

Louisiana State Board of Nursing

17373 Perkins Road
Baton Rouge, LA 70810

Telephone: (225) 755-7500 Fax: (225) 755-7584

E-mail: lsbn@lsbn.state.la.us

ORDER FORM FOR DATA SERVICES

Name of Purchaser _____

Date of Order _____

Agency/Institution _____

Phone Number _____

Email Address _____

Purpose or Intended Use of Data _____

Please check the item(s) that you wish to order. We accept money orders and business checks only. All requests will be emailed back to the email address above, unless otherwise stated.

Roster: A list of names and addresses of licensees sorted alphabetically by last name. The Roster is prepared and updated once a year after license renewal (February or March). This is an unalterable PDF file and can not be used to create mailing lists.

\$10.00 Emailed copy of the Roster PDF

-OR-

Custom List of Names and Addresses of Licensees: A custom list of names and addresses of licensees. This is a .CSV (comma delineated) spreadsheet file that can be used to create mailing lists of nurses. The list is created when the request is received and is always up-to-date. Please email in this form with your selection and we will email back a quote based on the number of nurses matching your criteria. The charge is **\$0.02** per nurse. There is a minimum **\$10.00** charge. Each time you change your requirements and request a new quote after receiving your initial quote, you will be charged an additional **\$10.00** reprocessing fee. These queries will be retained for one month after your request is received and are then deleted.

Email lsbn@lsbn.state.la.us for quote, select criteria below

Select your requirements for the data (\$0.02 per nurse/\$10.00 minimum):

- All licensees*
- Licensees who reside in Louisiana*
- Licensees who reside outside of Louisiana*
- Licensees residing in specific parishes (Select all that apply)*

Acadia	Concordia	Lafayette	Richland	Union
Allen	Desoto	Lafourche	Sabine	Vermilion
Ascension	East Baton Rouge	LaSalle	St. Bernard	Vernon
Assumption	Rouge	Lincoln	St. Charles	Washington
Avoyelles	East Carroll	Livingston	St. Helena	Webster
Beauregard	East Feliciana	Madison	St. James	West Baton Rouge
Bienville	Evangeline	Morehouse	St. John	Rouge
Bossier	Franklin	Natchitoches	St. Landry	West Carroll
Caddo	Grant	Orleans	St. Martin	West Feliciana
Calcasieu	Iberia	Ouachita	St. Mary	Winn
Caldwell	Iberville	Plaquemines	St. Tammany	
Cameron	Jackson	Pointe Coupee	Tangipahoa	
Catahoula	Jefferson	Rapides	Tensas	
Claiborne	Jefferson Davis	Red River	Terrebonne	

Limit query to include only:

- Nurse Practitioners
- Clinical Nurse Specialists
- Certified Nurse Midwives
- Certified Registered Nurse Anesthetists
- APRNs with Prescriptive Authority

AGREEMENT NOT TO RESELL DATA

I _____, representing _____,
(Print Name) (Name of Agency)

agree not to resell, nor to make available to another agency pursuant to another arrangement, the data obtained from the from the Louisiana State Board of Nursing on the mailing list produced pursuant to the order on the first page of the form. I further agree not to hold the Louisiana State Board of Nursing responsible for changes in names, addresses, or licensure status of licensees, which occur after the list is produced.

Signature: _____

Date: _____