

Louisiana State Board of Nursing

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INSTRUCTIONS: HOW TO DELETE A PHYSICIAN AND/OR PRACTICE SITE FROM PRESCRIPTIVE AUTHORITY

INTRODUCTION

In accordance with LAC 46:XLVII.4513.D.7, Advanced Practice Registered Nurses (APRNs) approved for prescriptive authority (PA) **must** notify the Louisiana State Board of Nursing (LSBN) in writing to delete a previously approved collaborative physician(s), dentist(s) and/or practice site **within 30 days**.

If the APRN anticipates continued PRN practice with a particular collaborating physician and/or practice site previously approved by LSBN, the APRN would not submit a notification of deletion.

Prior to engaging in medical diagnosis and management as an APRN for a new group of physician(s), dentist(s) and/or practice site, including writing orders and/or prescriptions, the APRN must obtain a letter of approval issued to the nurse by LSBN indicating approval for PA privileges in the State of Louisiana in collaboration with the licensed physician(s) or dentist(s).

To apply for approval to make other changes to prescriptive authority including adding collaborating physicians and sites, please refer to the instructions and attestation available on the LSBN website.

WRITTEN NOTIFICATION REQUIRED BY LSBN

LSBN **must** receive written notification to delete a collaborating physician, dentist and/or practice site previously approved by LSBN for an APRN. Please provide the following information in the written request:

1. Name of the APRN. If possible, please provide the nurse's license number. (Free license look-up is available at LSBN website through [Licensure Verification](#)).
2. List the name of **each** collaborating physician(s) and/or dentist(s) to delete from the CPA previously approved by LSBN and the associated practice site(s). If only a specific practice site is being deleted, please clearly indicate the business name of the practice site and physical address.

Please submit the written notification to delete a physician(s) and/or site(s) to LSBN by one (1) of any the following three (3) manners:

- Email to the APRN Department at: advancedpractice@lsbn.la.gov; **or**
- U.S. postal mail to LSBN office. Please indicate ATTN: APRN Department on the envelope; **or**
- Fax to (225) 755-7581. Please include a cover sheet indicating ATTN: APRN Department.

Once the request has been processed by LSBN staff, **the APRN** will be sent confirmation the deletion(s) to the email address of record. Nurses may verify and update their residential mailing address, email address and phone number(s) on file with the Board through [My Services](#) at the LSBN website.