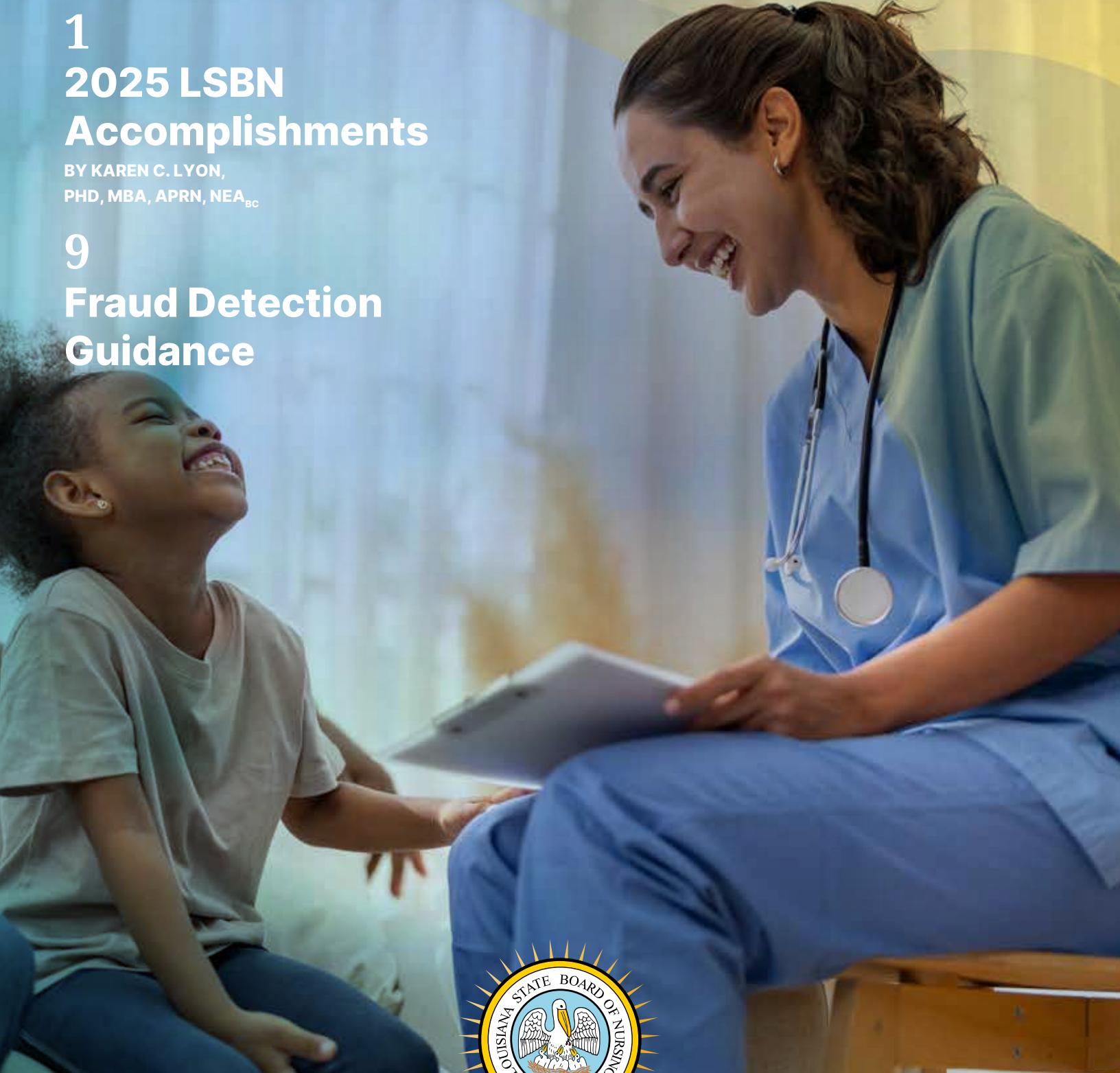


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BY KAREN C. LYON,
PHD, MBA, APRN, NEA_{BC}

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Mission

To safeguard the life and health of the citizens of Louisiana by assuring persons practicing as registered nurses and advanced practice registered nurses are competent and safe.

Vision

LSBN will be a nationally recognized leader and trend-setter in regulatory excellence that advances nursing education, practice, and workforce.

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MEMBER

Fredrick Pinkney
Ed.D.
MEMBER



2025 LSBN Accomplishments



Karen C. Lyon,
PhD, MBA, APRN, NEA_{BC}
CHIEF EXECUTIVE OFFICER

As I pack up my office and ready myself for my move back to Texas, it seems like an excellent time to summarize the accomplishments from 2025. It has been my privilege to serve with multiple Boards to serve the citizens of Louisiana. I am incredibly proud of what we have built and the positive impact we've made on nursing regulation, education, and practice in Louisiana and throughout the country. I'll begin this last report with a summary of the new members who have joined the Board through Governor appointments. Amie Bulliard is two years into her 1st 4-year appointment, but she was appointed President by Governor Landry on October 10, 2025. She represents Other Areas of Nursing and currently serves as Director of Care Continuum at Ochsner Health. Amie leads initiatives that bridge inpatient and outpatient care to improve outcomes across the system. Deborah Spann was appointed to her second 4-year term on January 1, 2026, and serves in Other Areas of Nursing as an emergency nurse, educator, leader, advocate, and Coordinator of the Louisiana Emergency Response Network. Deborah was elected as Vice President of the Board of Directors in December 2025. Dr. Ann Carruth was appointed on August 22, 2025, and will serve through December 2028 in a Nurse Educator role. She is the Professor and Dean of the College of Nursing and Health Sciences at Southeastern Louisiana University. She, too, was elected in December 2025 as Alternate Officer of the Board of Directors. Gilbert Humbert was appointed on January 1, 2026, for his first 4-year term. He is the Market Chief Nursing Officer for FMOL Health/Our Lady of Lourdes in Acadiana and has over 34 years of hospital and healthcare administration. Gilbert will fill a position on the Board as Nursing Service Administrator. Dr. Sarita James is the 2nd of our Nursing Education representatives appointed to the Board on January 1, 2026. She currently serves as Director and Professor of the LSU Alexandria School of Nursing. Dr. James brings 4 decades of experience in medical-surgical and maternal-child practice and has expanded her expertise into nursing informatics, leadership, and administration. Paul Molbert will be representing Consumers on the LSBN Board of Directors. He is the Governmental Relations Vice President at Ochsner Lafayette General. Dr. Katrina O'Con represents the dedicated APRN/CRNA position on the Board. She was appointed on February 14, 2025. Finally, Dr. Melissa Nunn was appointed as the 3rd representative in the Nursing Educator Role. She is the

Assistant Dean for Student Services and the Coordinator of the BSN-DNP Pediatric Nurse Practitioner Programs at the LSU Health New Orleans School of Nursing. These expert practitioners will be joined by current members Dr. Michelle Collins, CNM, FAAN, Dean of Nursing at Loyola University New Orleans, Teresita McNabb, Vice President of Nursing at Terrebonne General Medical Center, and Dr. Fredrick Pinkney, Consumer Member and Board member for the Louisiana Association of Educators representing 20,000 public school employees. Dr. Pinkney has worked regionally with the Southern Association of Colleges and Schools and the National Council for Accreditation of Teacher Education.

2025 LSBN ACCOMPLISHMENTS

Objective A: Build Organizational Capacity and Sustainability.

- Completion of updated Board Orientation binder and process for onboarding new Nurse Licensure Compact Commissioner's online meeting.
- Healthworks Commission workgroup meeting.
- Completion of updated Board Orientation binder and process for onboarding new Board members.
 - Initiated with Dr. O'Con on April 14, 2025.
- Nurse Licensure Compact Commissioner's online meeting.
- Scheduling of Board professional development presentations.
 - Partner collaboration meeting for Clinical Nurse Educator Academy.
 - NCSBN Discipline Knowledge Network calls monthly.
 - Access to Learning Collaborative monthly calls.
 - NCLEX webinar on entry-level RN characteristics.
 - Legiscon training.
 - Dr. Priola discipline training for Board members.
 - Celebrating Nursing through Championing Nurse Equity.
- Finalize Succession Planning Process for CEO, Chiefs, and Directors.
 - NCSBN Member Engagement Focus Groups

Objective B: Strengthen Outreach and Stakeholder Engagement

- Meeting between LHA Executives, LSBN Executive Committee and LSBN CEO and Executive Counsel to

discuss regulatory projects we can work on together.

- Bimonthly articles for New Orleans and Baton Rouge Healthcare Journal.
- Participation in the planning committee for LSNA Action Coalition for Health Summit in October.
- Panel speaker for National Association of Drug and Device Distributors in New Orleans in April.
- Speaker at LONL Annual Conference in April.
- Initiated Executive Committee weekly calls to discuss regulatory issues.
- Served on NCSBN 25th Anniversary Planning Committee and NCSBN Governance and Bylaws Committee.
- Completed Louisiana's Member Board Profiles for NCSBN in structure and governance, licensure, education, discipline, and advanced practice.
- Served on Task Force for HCR 55 to finalize playbook on Improving Health Outcomes in Minority Communities.
- Attended NCSBN Annual meeting with Executive Committee.

Objective C: Enhance Operational Efficiency and Effectiveness

- NCLEX Examination review with staff and board members.
- Nurses Week celebrations May 6 – 12, 2025.
- Added three additional sanctioned RNP programs for both inpatient and outpatient care.
- Sent 11 LSBN staff members to Culture of Health Summit on Advancing Workforce Well-Being.
- LaCANE presentation at Grambling on education challenges.

It has been a true pleasure to work with the expert staff at LSBN during my tenure to support the Board's strategic vision. While my heart will always call Texas home, Louisiana and its beautiful culture will remain forever in my memories.

I'll be seeing y'all,



Karen C. Lyon, PhD, MBA, APRN, NEA_{BC}
CHIEF EXECUTIVE OFFICER



Renewal Reminders

by Monique Calmes, DNP, APRN, FNP-BC
CHIEF CREDENTIALING OFFICER

We are nearing the end of the Renewal season. The Louisiana State Board of Nursing's renewal season began October 1, 2025. We will complete the late renewal season from January 1st through January 31st of 2026. Licensees whose licenses expire on January 31, 2026, are charged a late renewal fee during this period. Please contact the board office before this date if you need assistance with renewal.

The final deadline and closure of the renewal season is midnight (Central Standard Time) on January 31, 2026. If you have not renewed your license before it expires and do not hold a multistate RN license in another compact

state, you are not authorized to practice as a Registered Nurse. You must then apply for reinstatement for active licensure and be authorized by the Louisiana State Board of Nursing to resume practicing in Louisiana.

Currently, there is no APRN compact license available. APRNs must renew their APRN license to be authorized by the Louisiana State Board of Nursing to practice in Louisiana as an APRN. Please contact our office if you have any questions at 225-755-7500 during business hours or send a message to the message center of your nurse portal account [LARN Nurse Portal \(boardsofnursing.org\)](http://LARN Nurse Portal (boardsofnursing.org)) or email renewals@lsbn.state.la.us.

Practice Site Changes:

CLARIFICATION OF DEFINITIONS AND APPROVAL REQUIREMENTS

by Whitney Peltier, APRN, FNP-BC
APRN COMPLIANCE OFFICER

As practice settings and business structures continue to evolve, questions often arise regarding regulatory requirements. LSBN staff receive numerous inquiries from APRNs and employers regarding practice site changes. It is important to note that not every possible scenario is explicitly addressed in the rules, which can contribute to uncertainty and the need for interpretation. These inquiries highlight the need for continued clarification of what constitutes a “practice site” and when changes require submission of an application.

For purposes of prescriptive authority and collaborative practice—particularly for Certified Nurse Practitioners (CNPs), Certified Nurse Midwives (CNMs), and Clinical Nurse Specialists (CNSs)—a practice site refers to any location identified in documentation submitted to the board where an APRN exercises prescriptive authority or engages in advanced practice registered nursing. This includes both direct and indirect patient care. Practice sites may include hospitals and their affiliated clinics, ambulatory surgery centers, nursing homes, facilities or offices licensed and regulated by the Department of Health, and group or solo practices. Essentially, a practice site is made up of two components: the company or entity name and the physical location.

Entities with more than one physical location may be considered a single practice site when organizational policies and procedures established by the managing entity apply uniformly across all locations, including those policies outlined in §4513.D.1.f. In some cases, business entities that contract with facilities to provide APRN services may be considered a separate practice site, depending on the roles, responsibilities, and contractual agreements of the parties involved. The full definition of a practice site is provided in Title 46, Part XLVII, Chapter 45: [LAC Title 46 XLVII](#).

Recently, the most frequently asked question has involved situations in which an APRN’s employer undergoes a company name change. Based on the definition of a practice site, a change in the managing entity—such as a company name change—may be considered a new practice site. In these situations, submission of a Change in Prescriptive Authority application is required, even if the collaborating physician remains the same. The online application is submitted through the APRN’s Nurse Portal account and instructions for submitting a Change in Prescriptive Authority application are available on LSBN’s website: [APRN Prescriptive Authority Changes](#)



We identify,
implement,
and evaluate
methods
that ensure
Louisiana
nurses meet
evolving
national
regulatory
benchmarks.



**“Providing
safety for
the public,
saving
lives and
extending
the career
of nurses.”**



Recovering Nurse Program

by Urhonda Beckwith, MSN, APRN, FNP
DIRECTOR, RNP/MONITORING

As the Louisiana State Board of Nursing (LSBN) Recovering Nurse Program (RNP) / Monitoring closed out 2025 and welcomed 2026, the staff remains fully committed to the board's mission of protecting the public.

To date, there are approximately 469 RNP/Monitoring participants. In 2025, a total of 38 participants successfully completed the program. Of these, 14 were RNP participants, and 24 were Monitoring. This is a testament to the fact that the program is fully doable.

The RNP/Monitoring staff continues to work efficiently to develop internal processes for smooth day-to-day functioning. LSBN's structured program for registered nurses, advanced practice registered nurses, and student nurses seeking recovery from impairment can be completed through a non-punitive process.

The Recovering Nurse Program (RNP) / Monitoring is a program established by the board to identify and assist registered nurses, registered nurse applicants, advanced practice registered nurses and student nurses whose capacity to practice nursing with reasonable skill and safety to patients has been, or may potentially be, compromised because of the use of alcohol or drugs, or as a result of any illness, mental or physical condition.

For any further information and/or to request an RNP presentation for your students, organization, or employees, please contact the RNP Department at (225)755-7546 or via email at rnp@lsbn.state.la.us.



The Request for Reconsideration: KNOW THE DEADLINE AND KNOW WHEN IT APPLIES

by Donald Bowman
HEARINGS DIRECTOR

When the Louisiana State Board of Nursing (LSBN) issues an adverse decision after an adjudicatory process (for example, a denial, suspension, or other adverse Board action), Louisiana law provides a narrow, time-sensitive way to ask the Board to take a second look: a Request for Reconsideration or Rehearing. This article explains what that request is, when to file it, and just as important, when it does not apply.

WHAT A “REQUEST FOR RECONSIDERATION” IS AND WHAT IT IS NOT.

Under the Louisiana Administrative Procedure Act, an agency decision **in a case of adjudication** may be subject to “rehearing, reopening, or reconsideration” within a short window. LSBN’s rules likewise allow the Board to reconsider a matter it has decided either by rehearing the case or reconsidering the case based on the existing record when a party files a petition stating specific grounds.

This is **not** an “extra appeal” or a chance to simply reargue the case because you disagree with the outcome. It is a structured process with specific grounds and a strict deadline.

WHEN IT APPLIES?

A Request for Reconsideration/Rehearing is intended for adverse Board decisions, not for outcomes you voluntarily

accepted. LSBN’s published guidance, based on LAC 46:XLVII.3411.G, reflects that reconsideration/rehearing is tied to Board decisions and may also occur when a matter is remanded by a court or higher authority.

Practically, the LSBN form and guidance identify examples such as:

- **Reconsideration:** automatic suspension, delay or denial, recall of a temporary permit
- **Rehearing:** a final order

If you are unsure whether your situation involves an adjudicatory decision or a final order, consult counsel promptly because the deadline to make your request for rehearing or reconsideration comes fast.

WHEN TO FILE IT?

A petition for reconsideration or rehearing must be filed **within 10 days** from the date of **entry** of the decision. LSBN’s rules provide that a decision is “deemed to be entered” when it is signed by the Executive Director and sent by certified mail to the individual’s address of record. Therefore, it is important to open certified mail from LSBN immediately and note the decision’s **entry date**. Also, keep your address current with the Board as **entry** is tied to the certified mailing to your address of record.



WHAT YOUR PETITION MUST SAY.

Your petition must be in proper form and must specify the grounds. LSBN's rule/guidance lists grounds such as:

- The Board's decision is clearly contrary to the law and the evidence.
- There is newly discovered evidence not available at the time of the hearing that may be sufficient to change the outcome.
- Issues not previously considered ought to be examined to properly dispose of the case.
- It would be in the public interest to further consider the issues and evidence.

A request that does not clearly identify one or more recognized grounds or that is filed late will be denied without changing the original outcome.

WHAT HAPPENS AFTER FILING?

Upon receipt of a petition, the Board may:

- affirm the decision,
- modify the decision, or
- grant a rehearing on all or part of the issues.

If a rehearing is granted, the order granting it must specify the grounds, and the rehearing generally covers only the matters identified in that order.

WHEN DOES IT NOT APPLY?

A Request for Reconsideration/Rehearing is not the mechanism to undo or renegotiate an agreed disciplinary resolution that is memorialized in a consent order. LSBN rules allow informal disposition of adjudicatory matters

by "stipulation, agreed settlement, or consent order," and provide that a consent order must be presented to the Board for approval before it becomes binding on the Board. LSBN also explains publicly that signing a consent order binds the individual to its terms, and the consent order is later presented to the Board for acceptance/ratification and issuance as a final Board order.

So, if you voluntarily sign a consent order, you should assume it will be treated as a final, enforceable resolution once accepted, rather than something you can later challenge through a reconsideration petition. If you believe the allegations are incorrect or the proposed terms are unacceptable, the time to address that is before signing.

DON'T CONFUSE RECONSIDERATION WITH APPEAL RIGHTS.

Separate from reconsideration/rehearing, Louisiana law provides that any decision of the Board may be appealed to a court of competent jurisdiction within 30 days after mailing of notice of the decision by certified mail. Because deadlines can overlap and consequences can be significant, consider consulting counsel immediately after receiving an adverse decision.

WHERE TO FIND THE FORM AND GUIDANCE?

LSBN posts a ["Request for Reconsideration" page](#) with the guidance document/form available under Legal & Hearings web tab.

Upon receipt of an adverse Board decision, act quickly, read the certified letter carefully, and understand that the 10-day window is real and that this process is meant for adjudicatory adverse decisions, not for consent orders.

Compliance Investigations

by Alicia Edmond Wheeler, JD

EXECUTIVE COUNSEL/CHIEF REGULATORY OFFICER

The Louisiana State Board of Nursing (LSBN), through its statutory authority specified in the Nurse Practice Act (NPA), La. R.S. 37:911, *et. seq.*, is responsible for reviewing and acting on complaints to fulfill its mission to protect the public. If after a thorough investigation, the LSBN determines there is sufficient basis that the nurse has violated the NPA or LSBN regulations, the LSBN may take disciplinary action.

The graphic below demonstrates the disciplinary process from the filing of a complaint to final resolution.



INVESTIGATION

The process used to investigate and act on a case may vary depending upon the seriousness of the allegations. Investigation can include: requesting additional documents or information, requesting a written response to allegations, as well as witness interviews. Again, investigations take time, often many months, to complete.

BOARD PROCEEDINGS

After the investigation is completed, the LSBN will decide whether to close the case, offer a consent order, suggest an alternative program, or proceed to filing formal charges and presenting evidence at a hearing. An important part of the disciplinary process is providing an opportunity to respond to the allegations.

BOARD ACTIONS

The board may deny, revoke, suspend, probate, or limit any license to practice as a registered nurse or advanced practice registered nurse, impose fines, and assess costs, or otherwise discipline a licensee, in accordance with

La. R.S. 37:921-925. Board disciplinary action may affect a nurse's ability to hold a multistate license.

Every individual subjected to disciplinary proceedings shall be afforded an opportunity for a hearing before the board or its duly appointed hearing officer or committee. LAC 46:XLVII.3401(A).

REPORTING

Final disciplinary actions are reported to national databases, employers, and other regulatory bodies.

FAQS

What part will I play, if any, in an investigation?

- After a complaint has been received and vetted, an investigation is opened.
- An investigator will contact you, usually via an informal notice of the allegations related to the complaint.
- **Keep your contact information current.** It is your responsibility to update your address and other personal details in the Nurse Portal.
- You may be asked to participate in an interview and/or provide documents or written responses.
- If the case proceeds to a hearing, you will have an opportunity to present your case before the Board.

How long will it take to resolve my investigation?

Once an investigation is opened, the process, including investigation and hearings, may be lengthy. Depending on the nature of the case and the board's caseload, the time could range from a few weeks to a few months to over one year.

Why would a case take so long?

The length of time required to resolve a case depends on the seriousness, complexity, the level of investigation required, and whether it goes through informal or formal proceedings. Each case is unique and will be considered on its own merits.

Reference(s): www.ncsbn.org/nursing-regulation/discipline.page

Fraud Detection Guidance for Employers and Educators

This article is reproduced with permission from the National Council of State Boards of Nursing (NCSBN) and is intended to support fraud prevention efforts among nursing employees and educators.

PURPOSE

To provide guidance to nursing education programs, employers and others who assess nursing applicants for advanced study, employment, certification and other uses.

CONTEXT

There is no immunity to fraud. It is experienced by almost every sector in the population. It is costly and devastating to those who are subject to it. When it invades the health professions, it becomes a serious health concern, a risk to public safety and violates public trust in the health care system. For this reason, this guidance is issued to nursing programs, employers, accreditors and others to increase awareness and help institute methods of fraud detection and prevention.

Fraud in nursing can present itself via a fraudulent nursing program or other deceitful or counterfeit methods.

Mechanisms that may be used to deceive nursing regulatory bodies (NRBs), employers, educators and others can include:

- Obtaining a false nursing diploma/degree without having completed an approved nursing program; this can include a program that sells a nursing diploma/degree without providing sufficient education;
- Buying or forging a counterfeit license;
- Lying about one's experience, background, past work history; or
- Covering up a criminal background.

Individuals then use the fake credentials to apply for a nursing license, apply for a job or enroll in an advanced nursing program. Prevention requires awareness and astute detection methods. It is essential that everyone is aware that fraud exists and of some basic methods that may prevent it. To assist with this identification, basic

guidance for detecting fraudulent credentials is provided.

RECOMMENDATIONS

While there is no guarantee that these recommendations will prevent fraudulent individuals from entering your institution, if your institution does not already employ these methods, they should be added to your current processes for further protection.

1. Provide initial and ongoing fraud detection training for all individuals who will be reviewing and accepting applicants for your institution or agency.
2. Identify and close loopholes that evade rules or the law.
3. Fraudulent individuals look for the easiest entry routes. If your institution/agency has fewer requirements than others, be extra vigilant.
4. Check [nursys.com](https://www.nursys.com) to ensure every applicant has a valid unencumbered license.
5. Make sure the program where the applicant graduated was approved by the NRB in the state where the program is located.
6. Check references. Many cases where the applicant has provided deceitful information on an application can be identified by verifying references. Special attention should be given to former employers and institutions of higher learning. Ask for a business email address if one is not provided.
7. Review all transcripts and other documents carefully. Details on reviewing transcripts or other documents for potential fraud can be found in NCSBN's *Licensure of Internationally Educated Nurses Resource Manual* (https://www.ncsbn.org/public-files/23_IEN_manual.pdf, pages 19–25).
8. Educational institutions and practice settings alike should have an Institution e-Notify account and enroll all their nurses. e-Notify, a component of, [nursys.com](https://www.nursys.com) is a free nurse licensure notification system where institutions can receive real-time notifications about nurses enrolled in a nursing education program or

employed at their institution. The system provides licensure and publicly available discipline data directly to the institutions as the information is entered into the Nursys database by NRBs. Nursys is the only national nurse licensure and disciplinary database. If an NRB identifies a nurse with fraudulent credentials and revokes his/her license, that information will immediately be reported to the Nursys database and to e-Notify institution account holders. Educators and employers will quickly receive a message about the license revocation and can take appropriate actions.

9. Be alert to red flags such as inconsistencies in the information on applications and transcripts (e.g., time to completion of degree, sequencing of courses, etc.) or criminal background checks. Although a red flag does not directly indicate guilt or innocence, a red flag serves as a warning sign for inconsistency and the need for additional investigation.

10. Report to your NRB any nurse who has been deceitful, provided fraudulent information to your institution or you feel is unsafe. This will prevent these nurses from moving to another institution and threatening the safety of others. Once the NRB takes action, the information will be placed into Nursys alerting others about that individual.

It is important to recognize that the majority of nurses are honest, competent and caring individuals, so the public has no need for concern. This, however, serves as a reminder to schools and employers that there are occasional opportunists who may cover up their background to obtain a job, attend a nursing program or use fraudulently obtained credentials to pose as a nurse and seek employment.

THE FOLLOWING ORGANIZATIONS AND INDIVIDUALS SUPPORT THE FRAUD DETECTION GUIDANCE FOR EMPLOYERS AND EDUCATORS:

- National Council of State Boards of Nursing
- American Association of Colleges of Nursing
- American Association of Critical-Care Nurses Certification Corporation
- American Nurses Association
- American Organization for Nursing Leadership
- Missouri State Board of Nursing
- National League for Nursing

- Organization for Associate Degree Nursing
- Washington State Board of Nursing
- Laurie A. Badzek, LLM, JD, RN, FNAP, FAAN, Dean and Professor, Ross and Carol Nese College of Nursing, Penn State University
- Eileen Collins, PhD, RN, ATSF, FAAN, Dean and Professor, University of Illinois Chicago College of Nursing
- Connie W. Delaney, PhD, RN, FAAN, FACMI, FNAP, Professor and Dean, University of Minnesota School of Nursing
- Jennifer Doering, PhD, RN, FAAN, Associate Dean and Head of School, University of Wisconsin-Milwaukee, School of Nursing
- Nancy Edwards, PhD, MSN, ANP-BC, FAANP, Professor, Purdue University School of Nursing, Lafayette, Indiana
- Linda Flynn, PhD, RN, FAAN, Dean and Professor, Rutgers School of Nursing, Chair, BTAA Collaborative of Nursing Deans
- Eileen Fry Bowers, PhD, JD, RN, CPNP-PC, FAAN, Dean and Professor, University of San Francisco School of Nursing and Health Professions
- Patricia Hurn, PhD, RN, FAAN, Dean and Professor, University of Michigan School of Nursing
- Yolanda Ogbolu, PhD, RN, FAAN, Bill and Joanne Conway Dean and Professor, University of Maryland Baltimore School of Nursing
- Robin Newhouse, PhD, RN, NEA-BC, FAAN, Dean and Distinguished Professor, Indiana University School of Nursing, Deputy Chair, University Clinical Affairs Cabinet, Associate Vice President for Academic Affairs, IU Health
- Patricia M. Noga, PhD, RN, NEA-BC, FAAN, representing the American Organization for Nursing Leadership
- Karen Rose, PhD, RN, FGSA, FAAN, Dean and Professor, The Ohio State University, College of Nursing
- Linda D. Scott, PhD, RN, NEA-BC, FNAP, FAAN, Dean and Professor, School of Nursing, University of Wisconsin-Madison; President-Elect, American Academy of Nursing
- Lepaine Sharp-McHenry, DNP, RN, FACDONA, Dean and Professor, University of Nebraska Medical Center College of Nursing
- Leigh Small, PhD, RN, CPNP-PC, FNAP, FAANP, FAAN,



2026 Calendar

Dean and Professor, Michigan State
University College of Nursing

- Julie Zerwic, PhD, RN, FAHA, FAAN, Kelting
Dean and Professor, University of Iowa,
College of Nursing

ABOUT NCSBN

Empowering and supporting nursing regulators across the world in their mandate to protect the public, NCSBN is an independent, not-for-profit organization. As a global leader in regulatory excellence, NCSBN champions regulatory solutions to borderless health care delivery, agile regulatory systems and nurses practicing to the full scope of their education, experience and expertise. A world leader in test development and administration, NCSBN's NCLEX® Exams are internationally recognized as the preeminent nursing examinations.

NCSBN's membership is comprised of the nursing regulatory bodies (NRBs) in the 50 states, the District of Columbia and four U.S. territories. There are seven exam user members and 25 associate members that are either NRBs or empowered regulatory authorities from other countries or territories.

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STATE HOLIDAY SCHEDULE

FEBRUARY 17	Mardi Gras
APRIL 3	Good Friday
JULY 3	Independence Day Observed
SEPTEMBER 7	Labor Day
NOVEMBER 3	Election Day
NOVEMBER 11	Veterans Day
NOVEMBER 26	Thanksgiving Day
DECEMBER 25	Christmas Day

BOARD MEETING DATES

FEBRUARY 26, 2026
APRIL 23, 2026
JUNE 25, 2026
AUGUST 27, 2026
OCTOBER 22, 2026
DECEMBER 3, 2026

BOARD MEETING MINUTES

AUGUST 28, 2025
OCTOBER 23, 2025

DISCIPLINARY ACTIONS

OCTOBER 22, 2025



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