NURSE PRACTITIONER REFRESHER COURSE APPLICATION PACKET

The refresher course is an individually planned and self-directed course of study containing required components for nurse practitioners (NP) who have not been engaged in clinical nurse practitioner practice in greater than two (2) years.

Do not begin any aspect of the NP Refresher Course until you have received the official NP Refresher Course Student approval letter from the NCBON. This includes any continuing education activities.

Send all materials via fax or email to:

Paulette Hampton, MA - Practice Coordinator
NCBON - PO Box 2129 - Raleigh, NC 27602
Fax: ATTN-aprnpractice 919-781-9461
aprnpractice@ncbon.com
## QUESTIONS & ANSWERS

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Who Must Take the NP Refresher Course?
A nurse practitioner (NP) who has not been engaged in nurse practitioner clinical practice in greater than two (2) years.

The nurse practitioner shall complete a nurse practitioner refresher course approved by the North Carolina Board of Nursing in accordance with paragraphs (o) and (p) of 21 NCAC 36.0220 and consisting of common conditions and their management directly related to the nurse practitioner's area of education and certification. 21 NCAC 36.0808 (d)(e)

In order to be eligible to submit the NP Refresher Course application to the Board, the NP must meet all other requirements for registration and NP approval to practice that were in place at the time of initial application for approval and hold current national certification in the NP's area of education and practice. The NP must complete the NP refresher course prior to seeking approval to practice.

*If previously approved to practice in NC prior to the national certification requirement, national certification is not required.

The refresher course is an individually planned and self-directed course of study containing required components. The components required are based on the number of years the NP has been out of active clinical NP practice as follows.

Note: Providing nurse practitioner education as a clinical instructor does not qualify as nursing practice nor can the credits from teaching roles waive you from the requirement of completing the NP Refresher Course.
What are the NP Refresher Course Requirements?

<table>
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<tr>
<th>NP REFRESHER COURSE REQUIREMENTS</th>
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<tbody>
<tr>
<td><strong>Number of years inactive as an NP</strong></td>
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<tr>
<td><strong>Contact hours of pharmacology continuing education</strong></td>
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<tr>
<td><strong>Contact hours of continuing education consistent with the NP’s education and area of practice</strong></td>
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<tr>
<td><strong>Precepted clinical experience consistent with the NP’s education and area of practice</strong></td>
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*For detailed information regarding contact hours and precepted clinical experience requirements, please see Page 5.*
How Do I Apply for NP Refresher Course Approval?

STEP 1
Complete and submit the Application for Registration as a Nurse Practitioner. The registration application must be approved before you can submit the NP Refresher Course Application.

You may obtain the Application for Registration as a Nurse Practitioner by going to http://www.ncbon.com - Online Services - Advanced Practice - NP - All NP online applications - Registration Application Only for Nurse Practitioner in NC. Note: Obtaining the NP Registration only allows you to use the title of NP, you cannot yet function as such.

STEP 2
Complete and submit the NP Refresher Course Application via email, fax, or regular mail.

The application is divided into the following sections:

**Nurse Practitioner Refresher Course Application**
- Clinical site(s) which will provide the clinical experience consistent with the NP’s education and area of practice. The clinical experience must be under the supervision of either an MD, a physician assistant, or an NP with approval to practice.
- A plan for obtaining the required graduate level pharmacology course for advanced practice registered nurses or pharmacology continuing education as applicable.
- A plan for obtaining the required number of contact hours of continuing education consistent with the NP’s education and area of practice.

**Curriculum Vitae** - Personal/Contact Information, Academic Background, Professional Licenses/Certifications, Work Experience, Professional/Academic Honors and Awards, Research/Scholarly Activities, etc.

**Educational Design Documentation Form** - Use this form to outline the objectives of your individualized plan of study. With prior notification and approval from the NCBON, your plan may be updated as often as necessary to enhance your refresher course experience. Sample and Form included.

**Clinical Experience Sheet** - Use the sample to guide you in outlining the patient populations that will be included in your clinical preceptorship. Sample included.

**Signed Agreement(s) with a nurse practitioner(s), physician assistant(s), and/or physician preceptor(s).**
Preceptors shall be nurse practitioners, physician assistants, and/or physicians, consistent with the applicant’s area of nurse practitioner education, national certification, if applicable, and scope of practice. Preceptors do not have to be potential employers or employees of potential employers. In the signed agreement(s), the preceptors are to acknowledge in writing that the NP who is in the NCBON approved Refresher Course will not assume the final responsibility for the diagnosis, treatment, writing of prescriptions, and billing for patients in the practice. Form included.

STEP 3
Wait for the NCBON to grant you approval to begin the NP Refresher Course as an NP. This will come in the form of the official approval to begin the NP Refresher Course letter via email.

Refresher Course Student. Your Refresher Course application must be approved before you begin any component of your refresher course. This includes any CE contact hours. Allow 2 - 3 weeks for review.

<table>
<thead>
<tr>
<th>How long NP has been inactive</th>
<th>Timeframe to Complete NP Refresher Course</th>
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<tr>
<td>Greater than two or three years</td>
<td>1 year from the date the NP is approved to begin NP course</td>
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<tr>
<td>Greater than four or five years</td>
<td>2 years from the date the NP is approved to begin NP course</td>
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</table>

All refresher course requirements must be satisfactorily completed within the required timeframe of Refresher Course application approval. If one of your requirements for approval to practice is to obtain national certification or re-certification, this must be obtained within the required timeframe for completion of the Refresher Course, or before applying for NP approval to practice.
What Do I Need to Know About the Contact Hours and Precepted Clinical Requirements?

Contact Hours
Pharmacology and general NP CEs are separate contact hours. For example, if you were under the inactive greater than 2-year requirement, you would complete 24 contact hours related to pharmacology and a separate 40 contact hours in the area of your NP education and area of practice for a total of 64 contact hours.

Only those CEs (related to your NP education and certification) completed within one year of applying for the NP Refresher Course will be considered.

The graduate level pharmacology course for APRNs can be at least 3 semester credit hours (45 contact hours) or on a continuing education basis (45 contact hours). Proof of a passing grade is required. Graduate level pharmacology courses must to be reviewed by the NCBON. Please email aprnpractice@ncbon.com to obtain a list of the NCBON-accepted online graduate level pharmacology APRN courses.

Semester credit converted to contact hours:
One semester credit = 15 contact hours One quarter credit = 7.5 contact hours

For both the pharmacology and continuing education hours, please be certain they are approved by the American Nurses Credentialing Center (ANCC) or Accreditation Council on Continuing Medical Education (ACCME), or other national credentialing bodies.

Lists of contact hours without provider information will not be accepted.

Fax, email or send via regular mail all CE certificates to Ms. Hampton at the time you have completed the NP Refresher Course.

Do not begin any of the CEs until you have received the NP Refresher Course approval to begin

Precepted Clinical Experience
Do not begin precepting until you have been granted approval from the NCBON. Chosen clinical site(s) must be able to provide the MINIMUM number of hours of clinical experience based on years NP has been inactive. The clinical experience must be in the area of the applicant's nurse practitioner education and national certification, if applicable. NOTE: You may have more than one preceptor and more than one site. The NCBON's expectation is that the preceptorship will provide you with direct, hands-on clinical experience wherein you will complete histories, physical exams, and determine the plan of care. Shadowing should be limited to two days.

The required components of precept clinical experience are as follows:
- Health assessment and diagnostic reasoning;
- Clinical management of common health problems and diseases that reflect the Nurse Practitioner’s formal education program; and national certification, if applicable; and,
- Clinical preventive services and client education.

Instructions regarding NP and Preceptor Online Assessments re: Precepted Clinical Experience(s) - Midway and Final (See example of assessment on Page 12.)

Midway
Once the NP has completed half of the required hours with his/her preceptor, the following is to occur:
- The NP will notify Paulette Hampton, Practice Coordinator (aprnpractice@ncbon.com), that the mid-way assessment is due.
- Ms. Hampton will then email the online mid-way assessment to both the NP and preceptor at their respective email addresses for completion. A mid-way assessment must be submitted for each preceptor.

Final
Once the NP has completed all the required hours with his/her preceptor, the following is to occur:
- The NP will notify Paulette Hampton, Practice Coordinator (aprnpractice@ncbon.com), that the final assessment is due.
- Ms. Hampton will then email the online final assessment to both the NP and preceptor at their respective
email addresses for completion. A final assessment must be submitted for each preceptor.

**What will happen after I Complete the NP Refresher Course?**

Once the Refresher Course Applicant has successfully completed the NP Refresher Course, the following will occur:

1) Your NP Refresher course materials will be reviewed. Please allow 4 - 6 weeks for this process to be completed.
2) You will be emailed a letter from the NC Board of Nursing stating that you have met all the requirements for the NP Refresher Course. This letter will be copied to the APRN Coordinator to inform her that you are eligible to apply for NP approval to practice.
3) After receipt of this email, and upon obtaining a position and primary supervising physician, you may submit an application for Nurse Practitioner approval to practice.

**How Do I Access the NP Approval to Practice Online Application?**

Once you have successfully completed the NP Refresher Course, you may access this online application here. A $100.00 fee is required upon submission of the application for approval to practice. Each additional primary supervising physician requires a separate application and the fee of $100.00 for approval to practice.

**What Do I Need to Know About NP Law and Rules?**

1) You are responsible to know your NP Law and Rules.
2) If you have questions, please contact the Education and Practice Coordinator, at aprnpractice@ncbon.com.
3) The NP’s Approval to Practice is granted by the Joint Subcommittee (comprised of representatives of both the NC Board of Nursing and the NC Medical Board); therefore, identical rules have been promulgated by both Boards.
4) **RULES:** 21 NCAC 36.0800 Section - “Approval and Practice Parameters for Nurse Practitioners” are the rules promulgated by the NC Board of Nursing. Go to www.ncbon.com -(Practice - APRN - NP).

   **LAW:** G.S. 90-18.2 and 90-18.3 - www.ncga.state.nc.us and www.ncbon.com - Practice - APRN - NP - NP General Statutes.
# NP Refresher Course Application

## Demographic Information

<table>
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<tr>
<th>Date</th>
<th>Name</th>
<th>Address (street, city, state, zip code)</th>
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</thead>
</table>

### NCBON Office Use

- NP Registration
- RN Verified
- CV Received
- Educational Design Form
- Clinical Sheet
- Preceptor(s) Verified
- Approved to Begin

<table>
<thead>
<tr>
<th>Home Number</th>
<th>Cell Number</th>
<th>Email Address</th>
<th>RN License Number</th>
<th>Exp Date</th>
</tr>
</thead>
</table>

- Send all materials via fax, email to:
  - Paulette Hampton, MA
  - Practice Coordinator
  - aprnpractice@ncbon.com
  - Fax: ATTN-aprnpractice 919-781-9461

### Type of NP (please select from below):
- ACNP □ ANP □ FNP □ GNP □ NNP □ SNP □ Women's Health NP
- OB/GYN NP □ OHNP □ PNP-PC □ PNP-AC □ PSYMH NP □ Other:

### How long have you been out of NP practice?
- □ greater than 2 years
- □ greater than 3 years
- □ greater than 4 years
- □ greater than 5 years: If greater than 5 years, how many years? ____

### I have completed the Nurse Practitioner Registration Application.
- □ Yes □ No

If no, please be reminded that the Nurse Practitioner Registration application must be submitted first. You can access the application for NP Registration Only at the following link: [https://www.ncbon.com/licensure-listing-advanced-practice-registered-nurse-aprn-nurse-practitioner](https://www.ncbon.com/licensure-listing-advanced-practice-registered-nurse-aprn-nurse-practitioner). Upon written notification by the NC Board of Nursing that her/his Nurse Practitioner Registration has been approved, the Applicant may complete an application for the Refresher Course. Following approval of the refresher course application, the Plan must be satisfactorily completed within one year for NPs inactive greater than two and less than four years, and two years for NPs inactive greater than four years.

I certify that the above information is to the best of my knowledge and belief true, accurate, and complete.

<table>
<thead>
<tr>
<th>NP Signature</th>
<th>Date</th>
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</table>

Do not begin any aspect of the NP Refresher Course until you have received the official NP Refresher Course Student approval letter from the NCBON. This includes any continuing education activities.
NP Refresher Course
CLINICAL EXPERIENCE SHEET

Please indicate your clinical experience plan suited to your particular scope of practice.

As a/an ___________ (type of NP), my experience will encompass the following patient age range: (please check all that apply).

__ Newborn
__ Toddlers
__ School-age
__ Teenagers
__ Adults
__ Elderly

As a/an ___________ (type of NP), my experience will encompass the following: (please check all that apply).

__ Male and female
__ Maternity/GYN
__ Pediatrics (birth - 21 years of age)
__ Urgent care
__ Other (please explain):

Do not begin any aspect of the NP Refresher Course until you have received the official NP Refresher Course Student approval letter from the NCBON. This includes any continuing education activities.
Sample - Educational Design Documentation Table

<table>
<thead>
<tr>
<th>Learning Objective (Core Competencies)</th>
<th>Related Content: Outline</th>
<th>Time Frame</th>
<th>Preceptors</th>
<th>Teaching Methodologies</th>
</tr>
</thead>
</table>
| Review and refine assessment skills related To GNP role | 1. Comprehensive/problem-focused health history, physical exam and diagnostic tests/procedures  
a. Functional assessment  
b. Psychosocial  
c. Cognition  
d. Skin integrity  
e. Nutrition  
f. Ethnic, cultural, spiritual  
g. Pain  
h. Abuse, neglect  
i. Addictive behaviors  
j. Sexual well-being  
k. At-risk populations  
l. Multiple-system problems  
m. Immunization status  
2. Differentiate normal, age-related and abnormal findings  
a. Common acute and chronic conditions  
3. Health issues related to environmental factors  
4. Urgent/emergency care  
5. Appropriate/age-specific assessment instruments and techniques  
6. Screening tools  
7. Special populations: frail, institutionalized, end-of-life | Ongoing throughout refresher course | , MD , MD | 1. Independent study  
1. Review current texts and literature regarding:  
   1) Mid- to late life developmental stages  
   2) Pathophysiology: normal, age-related changes, abnormal  
   3) Epidemiology  
   4) Pharmacotherapeutics  
   5) Infectious disease  
   6) Behavioral theory  
2. Review role of the GNP, inclusive of the ethical and legal implications  
3. Review current recommendations and best-practice clinical guidelines, i.e.. AHA, etc.  
4. 100 hours CEU specific to gerontology  
2. Work with preceptors  
a. Palliative care  
   1) Nursing home  
   2) Assisted Living Facility  
   1) Geriatric Office Practice  
   2) Nursing Home  
   3) Assisted Living Facility  
   1) Geriatric Office Practice  
   2) Nursing Home  
   3) P.A.C.E. (Program of All-Inclusive Care for the Elderly)  
   4) (Possible) home visits to clients that are home-bound  
5. (Possible) Hospital |
| Review and refine Diagnostic skills related to GNP role | 1. Differential diagnoses  
2. Typical/atypical presentations  
3. Co-morbidities  
4. Interpretation of laboratory and diagnostic tests | | | |
| Review and refine skills associated with treatment/formulating plan of care related to GNP role | 1. Primary care procedures within scope of practice  
a. Invasive and non-invasive procedures  
2. Treatment of acute and chronic illness  
3. Palliative care  
4. Pain management  
5. Principles of prescribing  
a. Current recommendations/guidelines  
b. Pharmacokinetics  
c. Efficacy  
d. Safety | | | |
EDUCATION DOCUMENTATION DESIGN FORM
Title: NURSE PRACTITIONER REFRESHER COURSE
Purpose: RETURN TO NP PRACTICE
For your convenience, more than one sheet has been provided in this packet.

<table>
<thead>
<tr>
<th>Learning Objective(s)</th>
<th>Related Content (Outline Form)</th>
<th>Time Frame</th>
<th>Faculty and/or Preceptor</th>
<th>Teaching Methodologies</th>
</tr>
</thead>
</table>

Select the total number of precepted clinical hours you are required to complete from those listed as follows:

- 160 hours
- 240 hours
- 320 hours
- 400 hours
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<tr>
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<th>Related Content (Outline Form)</th>
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<th>Faculty and/or Preceptor</th>
<th>Teaching Methodologies</th>
</tr>
</thead>
</table>

Title: NURSE PRACTITIONER REFRESHER COURSE  
Purpose: RETURN TO NP PRACTICE
Please Complete and Submit. Please type except for signatures.

Nurse Practitioner Refresher Course Student and Preceptor Agreement Form

_______________________ is currently in the North Carolina Board of Nursing approved refresher course. The purpose of this course is to prepare her/him for approval by the Board of Nursing to resume practice as a/an ________ nurse practitioner. The North Carolina Board of Nursing's (NCBON) Nurse Practitioner (NP) Refresher Course is an individually planned and self-directed course of study containing required components. One such component is that of the clinical experience.

The following outlines the NCBON's expectation of the NP Refresher Course Student's clinical experience:

• The chosen clinical site(s) must be able to provide the **MINIMUM** number of hours of clinical experience based on years NP has been inactive. The clinical experience must be in the area of the participant's nurse practitioner education and national certification. NOTE: The participant may have more than one preceptor and more than one site.

• If a participant decides to add another preceptor after she/he has been approved to begin the course, the participant will submit the Preceptor Agreement with signatures/dates (participant and the preceptor) via regular mail, fax, or email, and await approval before she/he begins the clinical experience with that preceptor.

• Preceptors do not have to be potential employers or employees of potential employers.

• Preceptors shall be nurse practitioners, physician assistants, and/or physicians, consistent with the applicant's area of nurse practitioner education, national certification, if applicable, and scope of practice.

• Participants will use the title of NP Refresher Course Student.

• While the participant is in this refresher course, she/he will **NOT** assume the final responsibility for the diagnosis, treatment, writing of prescriptions, and billing for patients in the preceptor's practice.

• The preceptor agrees to provide the participant with direct, on-site supervision and direct, hands-on clinical experience wherein she/he will complete histories, physical exams, and determine the plan of care. It is noted that shadowing should be limited to no more than **two days**.

• The clinical experience will encompass the following components: health assessment and diagnostic reasoning; clinical management of common health problems and diseases that reflect the NP’s formal education program; and national certification, if applicable; clinical preventive services and client education.

• Participant is responsible for her/his own liability insurance. The NCBON assumes no liability.

**NP and Preceptor Assessment Requirements**

**Midway Assessment** - Once the NP has completed half of the required hours with his/her preceptor, the following is to occur:
- The NP will notify Paulette Hampton, Practice Coordinator (**aprnpractice@ncbon.com**), that the mid-way assessment is due.
- Ms. Hampton will then email the online mid-way assessment to both the NP and preceptor at their respective email addresses for completion.

**Final Assessment** - Once the NP has completed all of the required hours with his/her preceptor, the following is to occur:
- The NP will notify Paulette Hampton, Practice Coordinator (**aprnpractice@ncbon.com**), that the final assessment is due.
- Ms. Hampton will then email the online final assessment to both the NP and preceptor at their respective email addresses for completion.

NOTE: A midway and final assessment must be submitted for each preceptor.

By signing below, I certify that I have read the above information. My signature also certifies my understanding of and agreement with the above statements.

<table>
<thead>
<tr>
<th>Printed Name of NP</th>
<th>Nurse Practitioner Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Printed Name of Preceptor</td>
<td>Preceptor Signature</td>
<td>Date</td>
</tr>
<tr>
<td>Name of Practice</td>
<td>Practice Address (Street, City, State, Zip code)</td>
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<tr>
<td>Type of Practice</td>
<td>Practice Population</td>
<td>Phone</td>
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</tbody>
</table>
Below is an example of the Midway and Final Online Assessment Questions. Do not complete this form.

### Professional Characteristics

<table>
<thead>
<tr>
<th></th>
<th>Consistently Demonstrates</th>
<th>Usually Demonstrates</th>
<th>Occasionally Demonstrates</th>
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### Clinical Skills

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<th>Usually Demonstrates</th>
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### Clinical Performance: Please assign one assessment grade using scale as listed below (Overall Preceptor Assessment Grade: _____ %)

- **Above expected (93-100%)** - Demonstrates above average knowledge and performs at a high level of skill.
- **Expected (82-86%)** - Demonstrates above knowledge and performs in a competent manner.
- **Below expected (85-70%)** - Performs with minimal knowledge for safe practice. Requires close supervision.
- **Unacceptable (Less than 75%)** - Demonstrates inadequate knowledge and skill for safe practice.
Do not begin any aspect of the NP Refresher Course until you have received the **official NP Refresher** Course Student approval letter from the NCBON. This includes any continuing education activities.