

ALABAMA BOARD OF NURSING  
**REGULAR BOARD MEETING**  
**RSA Plaza Suite 350**  
Montgomery, Alabama

**November 14, 2025**

**I. CALL TO ORDER**

**A. Roll Call**

The meeting was called to order at 8:30 a.m. on Friday, November 14, 2025.

The following members were present: Janice Seip CRNA, Vice-President; Sarah “Mandy” Mims, LPN, Secretary; Clint Witherington, Consumer; Kristi Acker, PhD, DNP, CRNP, FAANP; Louise O’Keefe, PhD, CRNP, CNE; Gabriel Sapalaran, MSN, RN; Tochie Lofton, DNP, ACNR-BC, CMSRN, RN; Cara Floyd, LPN; Deborah “Pepper” Hoover, MSN, FNP, RN; Sabria Danielle Baker, RN; and Executive Officer Peggy Benson. Board members absent were Karron Armstrong, LPN, Victoria Lavender, MSN, RN, President and Cherry Rodgers, LPN.

Staff members attending the meeting were: Honor Ingels, Administrative Director – Chief Policy/Communications Officer; Alice Maples Henley, Deputy Attorney General/General Counsel; Patrick Samuelson, Senior Assistant General Counsel; Amy Williams, Attorney; Joyce Jeter, MSN, RN, Deputy Director; Christie Mumford, MSN, RN, Director - Advanced Practice; Brad Jones, IT System Specialist Senior; Tonya Smith, Executive Secretary/Recorder; Wanda Dillard, Chief Financial Officer; Rachel Brazell, Probation Director; Tina Betts, MSN, RN, Legal Nurse Consultant; Carolyn Chaffer, MSN, RN-BC, Taylor Thomas, Legal Research Assistant; Pamela Smith, DNP, MSN, RN, Administrative Director of Education Programs; Christi Melton, MSN, RN, Director of Nursing Education; LaDonna Marsh, PhD, MSN, RN, CEN, Director of Practice, CE and Licensure; Tara Armistead, Attorney III; Ebony Williams, ASA III; Rosiana Gray, Nurse Consultant; Bernadette Powe, EdD, Leadership Institute Center for Nursing Excellence; Natalie Baker, Retired State Employee, Nurse Consultant; Kenneth Kirkland, PhD, RN, NRP, Chief External Affairs Officer; and Zachary Morgan, IT System Tech.

Visitors attending the meeting were: Wade Forehead, Troy University; LaGary Carter, Troy University; Sams Elebush; Riley Misyser, UAB; Carolos Adams, Leadership Institute; Alyssa Cooper, Children’s of Alabama; Jennifer Thomas, Children’s of Alabama; Effie Hawthorne, ALBME; and

Suzanne Powell, ALBME.

**B. Declaration of Quorum**

A quorum of ten Board members was present on Friday, November 14, 2025.

**C. Statement of Compliance with Open Meetings Act**

Prior notice of the meeting was posted on the Secretary of State's website in accordance with the Alabama Open Meetings Act.

**D. Review of Full Agenda**

1. Additions, Modifications, Reordering

Nothing

**2. REORDERING, MODIFICATION, OR ADOPTION AND APPROVAL OF  
CONSENT AGENDA**

- II.A. September 19, 2025, Board Meeting Minutes
- III.A. Board Action Follow-up
- VI.A.1. Executive Officer Report
- VI.A.2. FYI
- VI. C. Research
- VI.D.1. General Counsel Report
- VI.D.2. Assistant General Counsel Report, Samuelson
- VI.D.3. Voluntary Disciplinary Alternative Program Report
- VI.D.4. Investigations Report
- VI.D.5. Legal Nurse Consultant Report
- VI.D.6. Probation/Compliance Monitoring Report
- VI.D.7. Assistant General Counsel Report, Williams
- VI E. Policy and Communications Report N/A
- VI.F. ABN Center for Nursing Excellence Report
- VII.A. Education Report
- VII B. Program Deficiency Report
  
- IX.A. Advanced Practice Report
- IX.B. 2025 Application Deadline and Joint Committee Meeting Dates
- X.A. Continuing Education Report
- X.B. Licensure Report
- XI A. Board Travel
- XV.A. Regulatory application/renewal Question revisions

On November 14, 2025, Ms. Lofton moved that the Board adopt the Consent Agenda. Mr. Sapalaran seconded. Motion carried without objection.

**3. REORDERING, MODIFICATIONS, ADDITIONS, OR ADOPTION OF FULL AGENDA**

On November 14, 2025, Ms. Mims moved that the Board make some modifications to XIV. Other and move 1.A. AG Opinion to 1.B. and add to 1.A. Executive Session. Ms. Floyd seconded. Motion carried without objection.

**II. REVIEW OF MINUTES**

A. September 19, 2025, Board Meeting Minutes

The minutes of September 19, 2025, Board meeting was accepted on the Consent Agenda.

**III. OLD BUSINESS/FOLLOW-UP**

A. Board Action Follow-up

Ms. Benson's report on the Board Action Follow-up was accepted, as information, on the Consent Agenda.

**IV. BOARD REQUESTS / PRESENTATIONS**

**A. PRESENTATIONS/REVIEW**

1. Anti-Trust - Patrick Samuelson

Mr. Samuelson gave a brief presentation on Anti-Trust and was available to answer any Board member's questions.

2. APRN Education Presentation, Dr. Natalie Baker

Dr. Baker gave a brief presentation on APRN Education and was available to answer any Board member's questions.

3. APRN Disciplinary Presentation. Dr. LaDonna Marsh and staff

Ms. Marsh and Ms. Brazell gave a brief presentation on APRN Disciplinary and was available to answer any Board member's questions.

## V. FINANCIAL REPORTS

### 1. Financial Report Board Review

Ms. Dilliard, CFO, shared the Revenues and Expenditure Summary, Revenues, and the Expenditure Budget Comparison as of September 30, 2025.

## VI. REPORTS

### A. Executive Officer

#### 1. Report

Pursuant to Alabama Board of Nursing Administrative Code Chapter 610-X-.08, Ms. Benson accepted the voluntary surrender for revocation for each of the following nursing licenses.

<u>Licensee's</u> <u>Name</u>	<u>License</u> <u>Number</u>	<u>Date</u> <u>Acceptance</u>
Jackson, Pamela Dianne	2-038058	09/17/2025
Tucker, Edward Austin	1-129003; CRNP	09/22/2025
Johnson, Yolanda Monique	1-115704	09/22/2025
Ansley, Lisa Price	1-113428	10/06/2025
Clarke, Delisa	2-053490	10/06/2025
Thompson, Heather Renee	1-199463	10/15/2025
	2-077042	10/15/2025
Johnson, M. Lynn	1-064080	10/16/2025
Dykes, Alaina Danielle	1-203911	10/16/2025
Tyler, Summer Marie	MSL PTP MS	10/17/2025
	RN897505	

#### 2. FYI

Nothing

### 3. Board Meeting Dates for 2026

Ms. Benson reported that Board meetings are typically scheduled at the Annual Meeting in November of each year for the following calendar year. In addition to having ample advance notice of meetings, there is sufficient time to post the meeting on the Secretary of State's website. NCSBN has meetings that might interfere with Board meetings, so the calendar of events is noted when there is a meeting close to the time of a Board meeting or holidays with adjustments made in the schedule. ABN staff has suggested changing

the meetings to be before the Joint Committee (JC) meetings to allow for more time to consider and plan for any recommendations. The Nurse Practice Act required six (6) meetings per year. Emergency meetings may be called as needed throughout the year.

**On November 14, 2025, Dr. Acker moved that the Board approve the calendar year 2026 of Board Meetings as submitted. Mr. Sapalaran seconded. Motion carried without objection.**

#### **4. Election of Officers 2026**

Ms. Benson reported the board is required, by regulation, to elect officers at the November annual meeting each year. The section of the rules specific to officers is listed below and the specific position (in this case the President) is emphasized. Under the Alabama Open Meetings Act, the nominations and voting are required to be conducted in an open meeting. The minutes also must reflect the vote so Board members will be asked to raise their hands when voting for a candidate.

The Board shall elect from its members a president, vice-president and a secretary. The election officers shall be held at the annual meeting.

The officers elected by the Board comprise the Board's Executive Committee. The Executive Committee is responsible for:

- a) Developing the Board meeting agenda.
- b) Facilitating evaluation of the Executive Officer
- c) Assuring Board representation at legislative hearings, meetings, sunset reviews and requested public presentations/
- d) Participation in orientation of newly appointed Board members

#### **A. PRESIDENT**

Ms. Benson reported the president shall appoint a member to fill a vacancy in the office of vice-president or secretary. The President's appointment is subject to Board approval. The president shall preside at meetings of the Board, appoint members to serve on committees as may be created, and serve as ex-officio member of all committees.

**On November 14, 2025, Ms. Mims nominated Ms. Lavender as President. Ms. Lofton seconded. Motion carried with all in favor: (Ms. Seip, Mr. Witherington, Dr. Acker, Dr. O'Keefe, Mr. Sapalaran, Ms. Hoover, Ms. Baker, Ms. Floyd, Ms. Mims, and Ms. Lofton).**

## **B. VICE PRESIDENT**

Ms. Benson reported that the Vice-President shall fill any vacancy in the office of the president and shall preside in the absence of the president and shall assume the duties of the president when necessary.

**On November 14, 2025, Ms. Seip nominated Dr. O'Keefe as Vice-President. Ms. Baker seconded. Ms. Floyd nominated Mr. Sapalaran for Vice-President. Dr. Acker seconded. Mr. Witherington, Ms. Baker, Ms. Hoover, Ms. Mims, Ms. Seip, and Dr. O'Keefe voted for Dr. O'Keefe for Vice-President and Ms. Floyd, Ms. Lofton, Mr. Sapalaran, and Dr. Acker voted for Mr. Sapalaran for Vice-President. Dr. O'Keefe was elected Vice-President.**

## **C. SECRETARY**

Ms. Benson reported that the secretary shall be responsible for the minutes of the meetings and shall assume other duties at the discretion of the president.

**On November 14, 2025, Ms. Lofton nominated Ms. Mims for Secretary. Ms. Baker seconded. Motion carried with all in favor: (Ms. Seip, Mr. Witherington, Dr. Acker, Dr. O'Keefe, Mr. Sapalaran, Ms. Hoover, Ms. Baker, Ms. Floyd, Ms. Mims, and Ms. Lofton).**

### **B. Executive Committee**

1. Nothing

### **C. ABN Research**

1. Report

A written report on ABN Research was accepted, as information, on the Consent Agenda.

D. Legal Division

1. General Counsel/Deputy Attorney General

A written report on activities on the Legal Division from August 30, 2025, to October 24, 2025, the number of cases, and the number of cases on appeal or subject to litigation was accepted, as information, on the Consent Agenda.

2. Assistant General Counsel Report, Samuelson

A written report on the number of cases in the docket of the Assistant General Counsel as of October 23, 2025, was accepted, as information, on the Consent Agenda,

3. Voluntary Disciplinary Alternative Program

A written report on the VDAP (Voluntary Disciplinary Alternative Program) participants and terminations as of October 23, 2025, was accepted, as information, on the Consent Agenda.

4. Investigations Report

A written report on active investigations per investigator as of October 24, 2025, was accepted, as information, on the Consent Agenda.

5. Legal Nurse Consultant Report

A written report on open cases assigned to each Nurse Consultant as of October 24, 2025, was accepted, as information, on the Consent Agenda.

6. Probation/Compliance Monitoring Report

A written report on the number of nurses monitored on probation, the number of outstanding probation violations, the number of past due fines, the number of cases resulting in revocation by the Board Order as of October 22, 2025, was accepted, as information, on the Consent Agenda.

7. Assistant General Counsel Report, Williams

A written report on pending cases on the docket of Assistant General Ms. Williams as of October 24, 2025, was accepted, as information, on the Consent Agenda.

8. Assistant General Counsel Report, Armistead

A written report on pending cases on the docket of Assistant General Ms. Armistead, as of October 24, 2025, was accepted, as information, on the Consent Agenda.

E. Policy and Communication

1. Report

A written report on policy and communication activities was accepted, as information, on the Consent Agenda.

F. Leadership Institute/Center for Nursing Excellence Report

1. Report

A written report on Center for Nursing Excellence was accepted, as information, on the Consent Agenda.

G. Nursing Research/Workforce

1. Report

Nothing

**VII. NURSING EDUCATION PROGRAMS**

A. Education Report

A written report on nursing education was accepted, as information, on the Consent Agenda.

B. Program Deficiency (NONE)

**C. TROY UNIVERSITY'S NEW ACCELERATED MASTER OF SCIENCE IN NURSING (AMSN) MSN DEGREE PROGRAM PHASE I AND II APPLICATIONS FOR EDUCATION.**

Ms. Smith reported that the ABN Administrative Code § 610-X-3-.06 Establishing A New Program requires a two-part process. In Phase I, the governing institution must submit a letter of intent and a feasibility study. The Board then reviews the letter of intent, feasibility study, and supporting documentation for completeness and compliance with rules and regulations and provides guidance regarding the forward progress of the plan. In Phase II, the governing institution for the proposed program submits an application for approval to establish a new program. If all



standards for approval are met, then the Board may approve the new program.

On July 1, 2025, Troy University submitted a letter of intent, Feasibility Study, with supporting documentation to establish an Accelerated Master of Science in Nursing (AMSN) degree program. On August 11, 2025, ABN consultants contacted the Program Director seeking clarification of the submitted documents and requested additional information. Clarifications were provided over the telephone and via e-mail on August 11, 2025, and August 12, 2025.

August 11, 2025, Troy University submitted the Phase II application with supporting documentation. On September 29, 2025, ABN consultants contacted the Director regarding the submitted documents. Clarification was provided over the phone, and revisions were subsequently sent via email on October 2, 2025, and October 7, 2025.

According to the submitted applications, Troy University School of Nursing anticipates admitting students in the Summer of 2026.

Board consultants reviewed all documentation submitted by Troy University and prepared the attached Evaluation of the Proposal for an Accelerated Master of Science in Nursing (AMSN) direct entry to practice program. Based on a review of the submitted materials compared to the requirements in the ABN rules, the Board consultants have determined that the Troy University meets all of Phase I and Phase II regulatory criteria.

Dr. LaGary Carter, Dean of Health and Human Services and Dr. Jeffrey Wade Forehand, PhD, DNP, RN-BC, CNE, Professor and Director from Troy University were available to answer questions regarding the application.

**On November 14, 2025, Ms. Floyd moved that the Board approve Troy University School of Nursing Phase I and Phase II Applications for a New Accelerated Master of Science in Nursing (AMSN) Program. Ms. Baker seconded. Motion carried without objection.**

## **VIII. POLICY**

### **A. FINAL CERTIFICATION ALABAMA BOARD OF NURSING ADMINISTRATIVE CODE CRNP/CNM QUALIFICATIONS FROM 610-X-5 TO 610-X-9**

Related to revisions to Alabama Board of Nursing Administrative Code Chapters 610-X-5 and 610-X-9, which were proposed by the Board at the

July 2025 meeting, Mr. Ingels reported that Board staff proposed certifying the rules with the following additional revisions:

- Restore sections 610-X-5-.04 (Qualifications for Physicians in Collaborative Practice with Certified Registered Nurse Practitioners) and 610-X-5-.15 (Qualifications for Physicians in Collaborative Practice with Certified Nurse Midwives) to the certification of Chapter 610-X-5. The original proposal struck these sections, which were to be reconstituted in Chapter 610-X-9.
- Restore sections 610-X-5-.12 (Prescriptions and Medication Orders by Certified Registered Nurse Practitioners) and 610-X-5-.23 (Prescriptions and Medication Orders by Certified Nurse Midwives) to Chapter 610-X-5. The original proposal struck these sections, which were to be reconstituted in Chapter 610-X-9.
- Strike proposed new sections 610-X-9-20 and 610-X-9-.28 (corresponding to sections 610-X-5-.04 and 610-X-5-.15 above) from the certification for Chapter 610-X-9.
- Add an effective date of January 31, 2027, to the newly established requirement for prior practice experience for CRNP and CNM applicants under Chapter 9.

**On November 14, 2025, Dr. Acker moved that the Board modify the proposed revisions to Chapter 9 to remove the two (2) year/4,000-hour practice experience requirement for applicants and replace it with 2,000 hours of clinical experience. Dr. O’Keefe seconded. Following discussion, the motion failed due to lack of majority, with the following members voting: Approval: Janice Seip, Kristi Acker, Sabria Danielle Baker, Deborah “Pepper” Hoover and Gabriel Sapalaran. Opposing: Cara Floyd, Sarah “Mandy” Mims, Tochie Lofton, Louise O’Keefe, and Clint Witherington.**

**On November 14, 2025, following further discussion, Ms. Lofton moved that the Board remove the two (2) year/4,000-hour requirement and replace it with 3,000 hours of clinical experience. Ms. Mims seconded. Motion carried with Ms. Floyd, Ms. Mims, Ms. Lofton, Ms. Baker and Mr. Witherington in favor. Ms. Seip, Ms. Hoover, Mr. Sapalaran and Dr. Acker opposed.**

**On November 14, 2025, Ms. Lofton moved that the Board certify the revisions to Chapters 610-X-5 and 610-X-9, as amended. Ms. Mims seconded. Motion carried with Mr. Witherington, Dr. Acker, Ms. Baker, Dr. O’Keefe, Mr. Sapalaran, Ms. Floyd, Ms. Lofton and Ms. Mims in favor. Ms. Seip and Ms. Hoover opposed.**

**IX. ADVANCED PRACTICE**

**A. Report**

A written report on the activities of the Advanced Practice Division was accepted, as information, on the Consent Agenda.

**B. 2026 Application Deadline and Joint Committee Meeting Dates**

Ms. Mumford reported that the fast-track applications are approved monthly. However, applications and/or requests that require review by the Joint Committee will go forth on the Joint Committee dates. The final calendar is typically presented to allow ample time for posting to the ABN and Secretary of State's website. Prior notice of all Joint Committee meetings is posted on the Secretary of State's website in accordance with the Alabama Open Meetings Act.

**On November 14, 2025, Dr. Acker moved that the Board approve the 2026 Joint Committee Meeting Dates. Ms. Floyd seconded.**

**After Board Discussion.**

**On November 14, 2025, Dr. Acker moved to amend her motion and moved that the Board approve the 2026 Joint Committee Meetings Dates and remove the March and November Meeting Dates. Ms. Floyd seconded. Motion carried without objection.**

**C. Sports Physical NPAA**

Ms. Mumford reported that on October 15, 2025, the Alabama Board of Nursing (ABN) received a request from NPAA on behalf of Dr. Eileen Meyer, DNP, MLS, CRNP. The request sought guidance and support from the Joint Committee concerning the authority of Certified Registered Nurse Practitioners (CRNPs) in Alabama to independently sign pre-participation sports physical forms required by the AHSAA. In addition to guidance and support, MNPAA requested continued collaboration among the Joint Committee, ABN, and the Alabama Board of Medical Examiners (ABME) to develop an equitable, evidence-based policy that improves access to care for Alabama communities.

On October 28, 2025, the ABN's Executive Officer informed Eileen Meyer that this request would be placed on ABN Board agenda, rather than referred to the Joint Committee, as the matter is outside the Joint Committee's purview.

On February 27, 2025, the ABN issued a letter of support to the AHSAA, recommending the re-evaluation of its bylaws and the removal of the

physician co-signature requirement for sports physicals completed by CRNPs.

NPAA reports that Alabama is the only state that requires a physician's co-signature on sports physicals completed by nurse practitioners. NPAA indicate that this requirement creates a barrier to care, particularly in rural underserved areas, where physician availability may be limited. NPAA further indicated that the current AHSAA requirement is not supported by evidence and represents a structural inequity inconsistent with national trends expanding nurse practitioner practice authority to enhance access to care.

**On November 14, 2025, Ms. Lofton moved that the Board approve sending a letter of support to the Alabama High School Athletic Association (AHSAA) requesting that CRNPs be allowed to complete sports physical examinations and independently sign pre-participation sports physical forms. Ms. Floyd seconded. Motion carried without objection.**

**D. Approval of Revised Critical Care Protocol**

Ms. Mumford reported that the Critical Care Protocol was recommended for approval by the Joint Committee on September 17, 2025, and subsequently approved by the Board of Medical Examiners on September 18, 2025, and by the Alabama Board of Nursing (ABN) on September 19, 2025.

On September 24, 2025, the ABN received correspondence from UAB Hospital on behalf of Dr. Eileen Meyer, DNP, MLS, CRNP, ACNP-BC, Director of Advanced Practice Providers at UAB. UAB is seeking clarification regarding the exclusion language for Central Venous Line (CVL) insertion (non-tunneled with a diameter of 14.5 French and below): Internal Jugular and Femoral. The exclusion language on the new Critical Care Protocol states:

*“Excludes dialysis, extracorporeal photopheresis (ECP), and extracorporeal membrane oxygenation (ECMO).”*

UAB's acute care dialysis CVLs are 13 French. Therefore, based on the exclusion statement under the Basic Critical Care Skills/Procedures, the nurse practitioner would not be authorized to insert a 13 French dialysis catheter.

Eileen Meyer noted that when the Critical Care Advanced Protocol was initially developed in 2017, it did not specify a French size. Instead, it focused on clinical indications, acknowledging that catheter sizes may

vary across healthcare facilities. She expressed concern that the current language could unintentionally limit the scope of practice for qualified advanced practice providers and delay patient care.

UAB has requested that the ABN and the Joint Committee consider removing the term “dialysis” from the exclusion statement, noting that aligning the protocol with an indication-based approach, rather than catheter size, would promote safe, consistent, and timely care.

The new Critical Care Protocol authorizes the insertion and removal of CVLs (internal jugular, femoral, and subclavian) for venous access, including dialysis, ECP, and ECMO. These procedures remain categorized as "advanced skills/procedures" under the protocol, which requires at least one year of clinical critical care experience and prior training in CVL insertion/removal with catheters up to 14.5F. Importantly, no specific catheter size is defined for dialysis, ECP, or ECMO-related access.

At its October 14, 2025, meeting, the Physician Assistant Advisory Committee recommended removing the exclusion statement in its entirety from the Critical Care Basic Protocol. The Board of Medical Examiners approved this recommendation at their October 16, 2025, meeting.

The ABN Board action requested is to approve the revised Critical Care Protocol, removing the exclusion language for CVL insertion (non-tunneled with a diameter of 14.5 French and below): Internal Jugular and Femoral for CRNPs in collaborative practice.

**On November 14, 2025, Dr. Acker moved that the Board approve the removal of the Exclusion Language for Central Venous Line Insertion (non-tunneled with a diameter of 14.5 French and below): Internal Jugular and Femoral from the Critical Care Protocol for CRNPs in Collaborative Practice. Dr. Hoover seconded. Motion carried without objection.**

#### **E. Approval of Revised Neonatal CRNP Standard Protocol**

Ms. Mumford reported that at its meeting on August 19, 2025, the Alabama Board of Nursing (ABN) CRNP Advisory Council reviewed and discussed the Neonatal CRNP Standard Protocol, neonatal nurse practitioner competencies, and feedback from nurse practitioners related to the protocol.

On August 26, 2025, the ABN received a formal request from Children’s of Alabama, submitted by Kristen Waddell, MSN, CRNP, CPNP-AC, CCRN, CHSE, Director of Advanced Practice Providers. The submission,

supported by letters from the Medical Directors of the Neonatal Intensive Care Unit and the Lead Nurse Practitioner at Children's of Alabama, requested:

1. Addition of 'Thoracentesis/ needle aspiration of air or fluid from the pleural space' to the Neonatal Standard Protocol.

The Medical Directors noted that the neonatal nurse practitioners are currently permitted to perform needle aspiration for air and to place chest tubes for drainage. The Standard Protocol still does not explicitly address aspiration for fluid. They indicated that explicitly including aspiration of effusions represents a logical and necessary advancement in practice that aligns with the current scope of practice, education, and training of neonatal nurse practitioners.

The existing Neonatal Standard Protocol allows neonatal nurse practitioners to perform needle decompression for tension pneumothorax. The protocol does not explicitly address aspiration for fluid.

Board staff requests approval of Children's of Alabama's request regarding the revisions to the Neonatal Nurse Practitioner Standard Protocol for CRNPs in collaborative practice.

**On November 14, 2025, Ms. Baker moved that the Board approve revision to the Neonatal CRNP Standard Protocol for CRNPs in Collaborative Practice. Dr. Acker seconded. Motion carried without objection.**

#### **F. Approval of CRNP Standard Protocols**

Ms. Mumford reported that at its meeting on August 19, 2025, the Alabama Board of Nursing (ABN) CRNP Advisory Council reviewed and discussed the Women's Health Care Standard Protocol, Women's Health/Gender-Related nurse practitioner competencies, and feedback from nurse practitioners related to the protocol. Following this review, the CRNP Advisory Council recommended the following:

1. Addition of "Insertion and Removal of Intrauterine Devices"

The current Women's Health Care, Family Practice, and Certified Nurse-Midwives Standard Protocols authorize nurse practitioners and nurse-midwives to insert intrauterine devices (IUDs). However, these protocols do not explicitly authorize the removal of IUDs. In contrast, both the Limited Protocol – Alabama Department of Public Health (ADPH) and the Limited Protocol – Jefferson County Department of Health (JCDH) authorize nurse practitioners to insert and remove IUDs.

The Limited Protocol- ADPH was recommended for approval by the Joint Committee on September 15, 2020, and subsequently approved by the Board of Medical Examiners on September 16, 2020, and by the ABN on September 18, 2020. The Limited Protocol- JCDH was recommended for approval by the Joint Committee on September 18, 2024, and approved by the Board of Medical Examiners on September 19, 2024, and by the ABN on September 20, 2024.

Board staff now request approval of revisions to the Standard Protocol for CRNPs and CNMs in collaborative practice. These revisions, which explicitly address IUD removal, are shown in red in the attached protocols.

**On November 14, 2025, Ms. Baker moved that the Board approve revisions to the Women’s Health Care and Family Practice CNRPs, and Certified Nurse-Midwives Standard Protocols for CRNPs and CNMs in Collaborative Practice. Dr. O’Keefe seconded. Motion carried without objection.**

**X. CONTINUING EDUCATION/LICENSURE/PRACTICE**

A. Continuing Education

1. Report

A written report on Continuing Education (CE) Activities was accepted, as information, on the Consent Agenda.

B. Licensure

1. Report

A written report on Licensure Data Activity was accepted, as information, on the Consent Agenda.

C. Practice

1. Report

A written report on Standardized Procedure Application Activity was accepted, as information, on the Consent Agenda.

**D. Standardized Procedure Rectal Dilation RN, CRNP**

Ms. Jeter reported that Children's is a three hundred sixty-eight (368) bed hospital with fifty-four (54) bassinets. Rectal dilation is used to stretch the rectal area and prevent the rectum (anus) from becoming too tight. The dilation is done using specifically sized dilators.

Limitations (specified in the application)

1. The registered nurse (RN) will perform the procedure at the order of a physician.

Policy and Procedure

Procedures are specific to Rectal Dilation.

Policies and Procedures are presented for the Board's review

Organized Program of Study (copy presented to Board)

Supervised Clinical Practice and Demonstration of Competency

Initially and at Periodic Intervals (copies presented to Board)

Ms. Alyssa Cooper, MSN, RN, CPN, NPD-BC, Director of Nursing Professional Development and Ms. Jennifer Thomas, BSN, RN, CPN, NPD-BC, Director of Surgery Clinic, Nurse Unit Educator was present to answer any Board questions.

**On November 14, 2025, Dr. O'Keefe moved that the Board approve the Standardized Procedure Application Children's of Alabama for Rectal Dilation. Ms. Lofton seconded. Motion carried without objection.**

**E. Standardized Procedure Gastrostomy Tube Stoma Dilation RN**

Ms. Jeter reported that Children's is a three hundred sixty-eight (368) bed hospital with fifty-four (54) bassinets. Stoma dilation is used to facilitate the insertion of a gastrostomy tube that is difficult to pass once it has been removed. The dilation is done using a specifically sized Foley catheter. The Board has previously approved that the license nurse may reinsert a gastrostomy tube with a physician's order on a mature tract that is greater than seven (7) weeks old.

Limitations (specified in the application)

1. The registered nurse (RN) will perform the procedure at the order of a physician.
2. The RN cannot dilate a gastrostomy tube stoma that is less than eight (8) weeks old



### Policy and Procedure

Procedures are specific to stoma dilation.

Policies and Procedures are presented for the Board's review

### Organized Program of Stude (copy presented to Board)

### Supervised Clinical Practice and Demonstration of Competency Initially and at Periodic Intervals (copies presented to the Board)

Ms. Alyssa Cooper, MSN, RN, CPN, NPD-BC, Director of Nursing Professional Development and Ms. Jennifer Thomas, BSN, RN, CPN, NPD-BC, Director of Surgery Clinic, Nurse Unit Educator was present to answer any Board questions.

**On November 14, 2025, Ms. Lofton moved that the Board approve the Standardized Procedure Application Children's of Alabama for Gastrostomy Tube Stoma Dilation: RN. Dr. O'Keefe seconded. Motion carried without objection.**

## **XI. BOARD TRAVEL**

1. 2026 NCSBN Midyear Meeting-March 17-19, 2026, Phoenix, AZ

## **XII. DISCIPLINARY CASES – Executive Session, to follow completion of Agenda or as indicated by need, November 14, 2025.**

**On November 14, 2025, Ms. Mims moved that the Board enter into Executive Session to discuss the general reputation and character, professional competence, and physical or mental conditions of specific applicant and licenses. Ms. Floyd seconded. Motion carried with all in favor: (Janice Seip, Sarah "Mandy" Mims, Clint Witherington, Kristi Acker, Louise O'Keefe, Gabriel Sapalaran, Deborah "Pepper" Hoover, Tochie Lofton, Cara Floyd, and Sabria Danielle Baker).**

Ms. Seip estimated that the Board would reconvene at 12:15 p.m.

The Board reconvened to open session at 12:02 p.m.

## **A. CONSENT ORDERS**

1. Pope, Ms. Takyia Andrionna – LPN SSL Exam Applicant

Ms. Pope signed a Consent Order that would approve her to take the NCLEX-PN exam for a single state LPN license, and if successful she will receive her LPN license and her LPN license will be placed on probation for twelve (12) months with the usual illegal/illicit stipulations and she will be required to pay a \$300.00 fine and documented completion of a course on Substance Abuse and Addiction for RNs and LPNs Nursing CE Course.

**On November 14, 2025, Ms. Mims moved that the Board accept the Consent Order. Mr. Sapalaran seconded. Motion carried without objection.**

2. Robertson, Ms. Kaylee Autumn – RN SSL Exam Applicant

Ms. Robertson signed a Consent Order that would approve her to take the NCLEX-RN exam for a single state RN license, and if successful she will receive her RN license and her RN license will be placed on probation for twelve (12) months with the usual illegal/illicit stipulations and she will be required to pay a \$300.00 fine and documented completion of a course on Substance Abuse and Addiction for RNs and LPNs Nursing CE Course.

**On November 14, 2025, Ms. Mims moved that the Board accept the Consent Order. Mr. Sapalaran seconded. Motion carried without objection.**

3. Wilson, Ms. Ykama Maria – RN 1-169476 SSL (Lapsed)

Ms. Wilson signed a Consent Order that would approve her reinstatement application of a lapsed RN license. Upon licensure, Ms. Wilson's RN license will be placed on probation for a period to run concurrent with court and she will be required to take and document a course on Upholding the Standard: Professional Accountability in Nursing.

**On November 14, 2025, Ms. Mims moved that the Board accept the Consent Order. Mr. Sapalaran seconded. Motion carried without objection.**

4. Hollingsworth, Ms. Pamela Jill – LPN 2-074405 SSL (Active/Probation); RN SSL Exam Applicant

Ms. Hollingsworth signed a Consent Order that would terminate her March 19, 2021, Order and place her LPN license on probation for sixty (60) months with the usual substance use disorder stipulations, with monitored time credit from her March 19, 2021, Order. Ms. Hollingsworth has been approved to take the NCLEX-RN exam, and if successful she will receive her RN license which will be placed on probation for a period of time to run concurrent with her LPN probation and also subject to the following terms and conditions. In the event Ms. Hollingsworth is not issued an RN license prior to completion of probation, completion of her LPN probation shall be sufficient to satisfy probation for her RN license.

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Consent Order. Ms. Mims seconded. Motion carried without objection.**

5. Dodd, Mr. Jeremy Ray – RN 1-105697 SSL (Active)

Mr. Dodd signed a Consent Order that would place his RN license on probation for twelve (12) months with the usual illegal/illicit stipulations and require him to pay a \$300.00 fine and document completion of courses on Nursing Documentation Nursing CE Course and Substance Abuse and Addiction for RNs and LPNs Nursing CE Course.

**On November 14, 2025, Ms. Baker moved that the Board accept the Consent Order. Dr. O’Keefe seconded. Motion carried without objection.**

6. Hill, Ms. Stephanie Pendley – LPN 2-048999 SSL (Active)

Ms. Hill signed a Consent Order that would deactivate her multistate license and convert to a single state license and suspend her single state LPN license until such time as: (a) payment of the reinstatement of suspended license fee, any other applicable fees and a \$500.00 fine; (b) successful completion of the educational programs on Upholding the Standard: Professional Accountability in Nursing, Nursing Documentation Nursing CE Course offered by Nursing CE, and Medical Errors Nursing CE Course; and (c) receipt of the employer notification. In no event will this period of suspension extend beyond twelve (12) months of the effective date of this Order. Should such occur, Ms. Hill’s licensure status will be considered as and listed as revoked.

**On November 14, 2025, Ms. Baker moved that the Board accept the Consent Order. Dr. O’Keefe seconded. Motion carried without objection.**

7. Wood, Ms. Lauren Nicole – LPN 2-069599 SSL (Active)

Ms. Wood signed a Consent Order that would place her LPN license on probation for twelve (12) months with the usual illegal/illicit stipulations and she will be required to pay a \$300.00 fine and documented completion of courses on Upholding the Standard: Professional Accountability in Nursing and Substance Abuse and Addiction for RNs and LPNs Nursing CE Course.

**On November 14, 2025, Ms. Baker moved that the Board accept the Consent Order. Dr. O’Keefe seconded. Motion carried without objection.**

8. Nichols, Ms. Amy Marie – RN 1-138396 MSL (Active)

Ms. Nichols signed a Consent Order that would deactivate her multistate license and convert to a single state license and place her RN license on probation for twelve (12) months with the usual illegal/illicit stipulations and require her to pay a \$300.00 fine and documented completion of courses on Nursing Professional Conduct and Accountability and Substance Use and Drug Diversion for Licensees: Recognizing and Intervention for Peers Displaying Diversion Symptoms.

**On November 14, 2025, Ms. Mims moved that the Board accept the Consent Order. Ms. Floyd seconded. Motion carried without objection.**

9. Robinson, Ms. Nalesha Joynese – RN 1-109242 SSL (Active)

Ms. Robinson signed a Consent Order that would terminate her September 1, 2022, VDAP Agreement and suspend her RN license for a minimum of three (3) months prior to reinstatement. Ms. Robinson must submit documentation of: (a) required comprehensive evaluations; (b) successful completion of the initial phase of a treatment program; (c) receipt of recommendation to return to practice of nursing; (d) participation in an aftercare program; (e) negative random monthly drug screens; (f) contact information for individual counselor, if recommended; (g) accrual of requisite continuing education contact hours; and (h) payment of the reinstatement of suspended license fee and any other applicable fees. Upon reinstatement, Ms. Robinson’s RN license will be placed on probation for sixty (60) months with the usual substance use disorder stipulations and she will be required to pay a \$1,000.00 fine. In no event will this period of suspension extend longer than twelve (12) months past the effective date of this Order. Should such occur, Ms. Robinson’s licensure status will be considered as and listed as revoked.

**On November 14, 2025, Dr. O’Keefe moved that the Board accept the Consent Order. Ms. Hoover seconded. Motion carried without objection.**

10. Denson, Ms. Shamere L – LPN SSL Exam Applicant

Ms. Denson signed a Consent Order that would approve her to take the NCLEX-PN exam, and if successful, she will be licensed with a single state LPN license and issued a public reprimand.

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Consent Order. Dr. Acker seconded. Motion carried without objection.**

11. Kuhajda, Ms. Julia Alexandria – RN SSL Endorsement Applicant

Ms. Kuhajda signed a Consent Order that would approve her endorsement application for a single state RN license and when issued Ms. Kuhajda will be issued a public reprimand.

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Consent Order. Dr. Acker seconded. Motion carried without objection.**

12. Laboy, Ms. Yazmin Victoria – LPN SSL Exam Applicant

Ms. Laboy signed a Consent Order that would approve her to take the NCLEX-PN exam and if successful she will be licensed a single state LPN license and issued a public reprimand.

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Consent Order. Dr. Acker seconded. Motion carried without objection.**

13. Moorer, Ms. Jena Leshay – LPN SSL Exam Applicant

Ms. Moorer signed a Consent Order that would approve her to take the NCLEX-PN exam and if successful she will be issued a single state LPN license and issued a public reprimand.

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Consent Order. Dr. Acker seconded. Motion carried without objection.**

14. Crone, Ms. Alyssa – RN 1-200892 MSL (Active)

Ms. Crone signed a Consent Order that would issue her a public

reprimand and require her to pay a \$300.00 fine.

**On November 14, 2025, Ms. Floyd moved that the Board accept the Consent Order. Ms. Baker seconded. Motion carried without objection.**

15. Blake, Ms. Amber Lynn – RN MSL Endorsement Applicant

Ms. Blake signed a Consent Order that would approve her endorsement application for a multistate RN license and when issued Ms. Blake's multistate RN license will be issued a public reprimand and she will be required to pay a \$300.00 fine.

**On November 14, 2025, Ms. Floyd moved that the Board accept the Consent Order. Ms. Hoover seconded. Motion carried without objection.**

16. Ellis, Ms. Jennifer Anne – RN 1-200575 SSL (Active); RN SSL to MSL Applicant

Ms. Ellis signed a Consent Order that would approve her application for conversion from a single state RN license to a multistate RN license and issue her multistate RN license a public reprimand and require her to pay a \$300.00 fine.

**On November 14, 2025, Dr. Acker moved that the Board accept the Consent Order. Dr. O'Keefe seconded. Motion carried without objection.**

17. Cantavespre, Ms. Amanda Axley – RN 1-119426 SSL (Lapsed)

Ms. Cantavespre signed a Consent Order that would approve her application for reinstatement of a lapsed RN license and issue her a public reprimand and require her to pay a \$1,000.00 fine.

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Consent Order. Ms. Floyd seconded. Motion carried without objection.**

18. Furr, Ms. Amanda Rena – RN 1-089827 SSL (Active)

Ms. Furr signed a Consent Order that would issue her a public reprimand and require her to pay a \$1,000.00 fine and documented completion of a course on Upholding the Standard: Professional Accountability in Nursing.

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Consent Order. Ms. Floyd seconded. Motion carried without objection.**

**B. REINSTATEMENT OF REVOKED – CONSENT ORDERS**

1. Bramblett, Mr. Bryan Scott – RN 1-082783 SSL (Revoked); RN SSL Reinstatement of Revoked Applicant

Mr. Bramblett signed a Consent Order that would approve his application for reinstatement of a revoked single-state RN license and place his RN license on probation for sixty (60) months with the usual substance use disorder stipulations and require him to pay a \$1,000.00 fine.

**On November 14, 2025, Ms. Lofton moved that the Board accept the Consent Order. Ms. Mims seconded. Motion carried without objection.**

2. Callaway, Ms. Callie Elizabeth – RN 1-138723 SSL (Revoked); RN SSL Reinstatement of Revoked Applicant

Ms. Callaway signed a Consent Order that would approve her application for reinstatement of a revoked single-state RN license with no sanctions.

**On November 14, 2025, Ms. Lofton moved that the Board accept the Consent Order. Ms. Mims seconded. Motion carried without objection.**

**C. ADMINISTRATIVE HEARINGS**

**On November 14, 2025, Ms. Mims moved that the Board enter into Executive Session in its capacity as a quasi-judicial body to deliberate and discuss evidence and testimony presented during contested case hearing and vote on the outcomes. Ms. Floyd seconded. Motion carried with all in favor: (Janice Seip, Clint Witherington, Kristi Acker, Sabria Danielle Baker, Louise O’Keefe, Gabriel Sapalaran, Deborah “Pepper” Hoover, Tochie Lofton, Sarah “Mandy” Mims, and Cara Floyd).**

Ms. Seip estimated that the Board would reconvene at 12:30 p.m.

The Board reconvened to open session at 12:12 p.m.

1. Barnard, Ms. Megan Kathleen – RN 1-158395 SSL (Lapsed)

**On November 14, 2025, Ms. Floyd moved that the Board accept the Findings of Facts, Conclusions of Law, and the Recommendation of the Hearing Officer, and revoke Ms. Barnard's RN license. Ms. Mims seconded. Motion carried without objection.**

2. Billingsley, Ms. Johnnie Mae – LPN 2-063404 SSL (Active/Probation)

**On November 14, 2025, Ms. Mims moved that the Board accept the Findings of Facts, Conclusions of Law, and the Recommendation of the Hearing Officer, and revoke Ms. Billingley's LPN license. Ms. Floyd seconded. Motion carried without objection.**

3. Calhoun, Ms. Kalie – LPN 2-061602 SSL (Active) & RN SSL Exam Applicant

**On November 14, 2025, Ms. Lofton moved that the Board accept the Findings of Facts, Conclusions of Law, and the Recommendation of the Hearing Officer, and deny Ms. Calhoun's RN single-state application and revoke her LPN license. Ms. Mims seconded. Motion carried without objection.**

4. Petitpas, Ms. Breanne Michelle – RN 1-122053 MSL (Active)

**On November 14, 2025, Ms. Hoover moved that the Board accept the Findings of Facts, Conclusions of Law, and the Recommendation of the Hearing Officer, and issue Ms. Petitpas a public reprimand and require her to pay a \$500.00 fine. Ms. Mims seconded. Motion carried without objection.**

5. Trapani, Ms. Donna Kay – RN 1-063212 SSL (Lapsed)

**On November 14, 2025, Mr. Sapalaran moved that the Board accept the Findings of Facts, Conclusions of Law, and the Recommendation of the Hearing Officer, and revoke Ms. Trapani's RN license. Ms. Floyd seconded. Motion carried without objection.**

6. Washington, Ms. Samantha Sherdrail – RN 1-172869 SSL (Lapsed)

**On November 14, 2025, Dr. O'Keefe moved that the Board accept the Findings of Facts, Conclusions of Law, and the Recommendation of the Hearing Officer, and revoke Ms. Washington's RN license. Ms. Floyd seconded. Motion carried without objection.**

**XIII. NEXT MEETING DATE – January 16, 2026, 770 Washington Avenue, RSA Plaza, Montgomery, Alabama, Suite 350**



#### **XIV. OTHER**

##### **A. ABN Update.**

##### **1. EXECUTIVE SESSION.**

**On November 14, 2025, Ms. Mims moved that the Board enter into Executive Session in its capacity as a quasi-judicial body to deliberate and discuss evidence and testimony presented during contested case hearing and vote on the outcomes. Ms. Floyd seconded. Motion carried with all in favor: (Janice Seip, Clint Witherington, Kristi Acker, Sabria Danielle Baker, Louise O’Keefe, Gabriel Sapalaran, Deborah “Pepper” Hoover, Tochie Lofton, Sarah “Mandy” Mims and Cara Floyd).**

Ms. Seip estimated that the Board would reconvene at 12:30 p.m.

The Board reconvened to open session at 12:40 p.m.

##### **2. AG OPINION, ALICE HENLEY**

Ms. Henley reported following review of materials and discussion, the Board voted in favor of a resolution authorizing Ms. Benson to request an Attorney General’s Opinion to answer the following questions:

##### **Question One**

Does the Joint Committee have the statutory authority to review and make recommendations regarding whether the application for collaborative practice of a particular physician and CRNP/CNM should be approved based on alleged deficiencies such as a mismatch in specialty or the degree to which the physician is “readily available,” or for any other reason?

##### **Question Two**

Does the Joint Committee have the statutory authority to, at the request of a physician in collaborative practice, approve the physician’s collaborative practice with full-time CRNP/CNM positions beyond those permitted by rules governing the ratio of collaborating physicians to advanced practice providers?

##### **Question Three**

Does the Joint Committee have the statutory authority to “at its discretion, waive the requirements of written verification of

physician availability [for specific applicants for collaborative practice] upon documentation of exceptional circumstances”?

#### **Question Four**

Are model protocols developed by the ABN and/or ABME required to be recommended by the Joint Committee before they may be approved by the ABN and ABME?

#### **Question Five**

May the ABN or ABME promulgate rules and regulations pertaining to the regulation of collaborative practice between physicians and CRNPs/CNMs without those regulations first having been recommended by the Joint Committee?

#### **Question Six**

Is the ABME’s statutory authority to approve the collaborative practice of an individual physician limited to determining that the physician satisfies the ABME’s qualifications to engage in collaborative practice, when the physician has signed a written protocol, the standard form of which has already been approved by the ABME and ABN, and which has also been signed by a CRNP/CNM who possesses a certificate of qualification to engage in collaborative practice as a CRNP/CNM?

#### **Question Seven**

Does the recently enacted requirement that CRNP and CNM members of the Joint Committee be “engaged in an active collaborative practice with a physician in this state” (Ala. Code § 34-21-81(7)(c) and (d) (as amended in Act 2025-378)) require that the CRNP and CNM members actually work (whether paid or unpaid) performing duties set forth in a signed collaborative practice protocol at the practice site(s) approved for the collaboration?

#### **Question Eight**

If the ABN learns that a Joint Committee member it has appointed no longer meets the requirements of Ala. Code § 34-21-81(7)(c) and (d) (as amended in Act 2025-378) or any other eligibility requirements, what method(s) may the ABN employ to rescind the appointment or remove the member who no longer meets the eligibility requirement?

**On November 14, 2025, Ms. Mims moved that the Board approve resolution requesting the Alabama Attorney General to**

answer the following questions 1-8. Ms. Floyd seconded.  
Motion carried without objection.

**XV. BOARD MEETING DEBRIEFING**

A. New Board Members (How can we help?)

Nothing

B. Meeting Process: What can we improve/change?

Nothing

**XVI. ADJOURNMENT**

The ABN Board meeting adjourned at 1:03 p.m., on Friday, November 14, 2025.

\_\_\_\_\_  
Victoria Lavender, MSN, RN  
President

\_\_\_\_\_  
Sarah "Mandy" Mims, LPN  
Secretary

Submitted by: \_\_\_\_\_  
Tonya Smith 11/25