Legislation Affecting Occupational Health Nursing
Identifying Relevant Laws and Regulations

by Margaret C. Thompson, MSN, RN, COHN-S, FAAOHN

One of the basic dimensions of occupational health nursing practice is an understanding of the complex network of laws and regulations governing practice. “Occupational and environmental health nurses are responsible for maintaining a current knowledge of the laws affecting occupational health practice in the jurisdiction where they practice” (Knoblauch, Childre, & Strasser, 2001, p. 73). Although knowledge of these laws and regulations is fundamental to professional practice, it is often difficult for occupational health nurses to identify those regulations applicable to specific practice settings. After the applicable laws and regulations are identified, the challenge for occupational health nurses is to navigate the regulatory documentation to identify the elements that specifically affect their practice.

The purpose of this article is to:
- Provide an overview of nursing practice legislation and legislation applicable in occupational settings in the United States.
- Identify sources of information in relation to selected laws and regulations relevant for occupational health nurses.
- Describe a process and documentation tools for efficiently accessing relevant laws and regulations to effectively review and abstract the elements and content that are applicable for the occupational health nurses’ practice location and activities.

LEGISLATIVE PROCESS

In the United States, federal legislative power is vested in Congress with the Senate and House of Representatives having equivalent powers. Approval by both Houses and presentation of the bill for the President’s signature are necessary for a bill to become law (Johnson, 2003). The authority of the regulatory agency responsible for ensuring that the law is implemented is generally established in the original statute, but may be authorized in laws subsequently enacted.

The term legislation refers to the laws (also termed statutes) enacted by the legislative body and the regulations (or rules) issued by the authorized regulatory agency that also have the force of law. After being enacted, laws are communicated to the public through various publications. General and permanent U.S. laws are consolidated and codified in the U.S. Code where they are arranged under 50 title headings according to subject matter. Notices, rules, and regulations of the federal agencies responsible for enforcement of these laws are among the documents published on a daily basis in the Federal Register and consolidated annually in the Code of Federal Regulations (CFR). These annual consolidations incorporate any amendments to the law or regulatory revisions enacted since the last codification. Legislative and regulatory publications are among the materials published by the Government Printing Office and are accessible at www.gpoaccess.gov. Another resource for current information on federal laws and regulations is the Library of Congress’ legislative Internet site, THOMAS (http://thomas.loc.gov/). Access to legislative information is also available at the U.S. Government’s Official Web Portal (http://www.firstgov.gov/).

State laws and regulations are similarly enacted, communicated, and consolidated. Internet access to state legislative and regulatory documents is generally available through each state’s website. A starting place for individuals unfamiliar with these websites is the State Government link on http://FirstGov.gov. Through this site, one can access each state’s home page. On the state’s home page, occupational health nurses can use links to government, legislation, laws

ABOUT THE AUTHOR

Ms. Thompson is doctoral (PhD) candidate, Sociomedical Sciences, Columbia University, NY, and Principal/Occupational Health Consultant, Croft-Taylor Consulting, LLC, Ridgefield, CT.
establishing the authority for and the composition and activities of the State Board of Nursing is usually included in the NPA, although in some states, a more general law may establish the authority of a variety of professional boards. Also, the state Board of Nursing (BON) may be titled differently in different states. For example, it is titled the Board of Examiners for Nursing in Connecticut and West Virginia, and the Board of Nurse Examiners in Guam and Puerto Rico. Regardless of its statutory establishment, the state BON is the agency generally responsible for the oversight of nursing practice in each state, including specifying both basic and continuing nursing education requirements.

Rules and regulations developed and administered by the BON have the force and effect of law and are used to clarify and specify elements of the state NPA (National Council of State Boards of Nursing, 2005a). In some states, other state agencies may have responsibility for certain elements of nursing practice, such as processing licenses and license renewals. For example, in Connecticut, the Office of Practitioner Licensure and Certification within the State Department of Health processes nursing licenses as well as the licenses of health care practitioners (Connecticut Department of Public Health & Office of Government Relations, 2005). In Nebraska, the Department of Health and Human Services Regulation and Licensure licenses nurses and other health related professions, facilities, and services (Nebraska Health and Human Services System, 2005).

The BON or other authorized agency in the occupational health nurse’s practice state is the primary resource for questions about the scope and specifics of nursing practice in that state. The website (www.ncsbn.org) of the National Council of State Boards of Nursing, a not-for-profit organization of U.S. Boards of Nursing that promotes regulatory excellence, provides contact information for all state BONs as well as other useful information on nursing practice regulations. With few exceptions, the contact information includes a website for each BON or other nursing regulatory agency. Links to states’ legislative and regulatory information are conveniently compiled on the BON or agency website. These sites often include links to forms, applications, and additional practice information. Familiarity with the information provided by the state BON is key to building a strong framework of regulatory review.

REGULATORY REVIEW PROCESS

The regulatory review process (Sidebar) begins with identifying those laws and regulations applicable in the occupational health nurse’s practice setting. Applicability is based on considerations such as the geographic location of the practice setting, the type of industry in which occupational health services are provided, actual and potential workplace hazards, employee demographics, and the range of occupational health services provided. When identified as applicable, the content of each law and regulation is reviewed for relevant elements (e.g., purpose and scope, definitions, regulatory requirements, implementation dates). Key elements are documented, along with reference citations, and a schedule for regular review and updating is created. Detail in the documentation can vary from simply noting the citations of relevant sections of the law or regulation to including highlights or summaries of the

Steps in the Regulatory Review Process

- Identify laws and regulations applicable to the occupational health nurse’s specific practice setting.
- Using trusted sources, review each identified law and regulation for relevant elements.
- Document key elements; include reference citations.
- Regularly review identified laws and regulations and update documentation.
regulatory text. The basic notation allows for easy review and updating of regulatory changes; more extensive documentation can serve as the basis for implementation protocols and compliance reviews. When the law or regulation is complex or has many regulatory elements, the title or section citation can be listed along with a notation indicating the availability and location of additional materials. Tables 1a and 1b provide examples of documentation outlines.

**Nursing Practice Legislation**

To identify the scope of laws and regulations governing occupational health nursing practice, the occupational health nurse must begin with the laws and regulations that apply to nurses regardless of the setting in which they practice. Understanding the laws and regulations governing occupational health nursing practice is necessary.

Consideration of the occupational health nurses’ practice locations and roles is a key factor in determining which laws and regulations apply to nurses regardless of the setting in which they practice. Understanding the laws and regulations governing occupational health nursing practice is necessary.

<table>
<thead>
<tr>
<th>Practice Location(s)</th>
<th>Regulatory Authority</th>
<th>Statute</th>
<th>Rules/Regulations</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Example: Vermont</td>
<td>Government Agency—Website Board of Nursing—<a href="http://vtprofessionals.org/opr1/nurses/">http://vtprofessionals.org/opr1/nurses/</a></td>
<td>Title—Citation Vermont statutes—Title 26: Professions and Occupations Chapter 28 Nursing</td>
<td>Title—Citation State of Vermont—Board of Nursing Administrative Rules (Effective March 1, 2004)</td>
</tr>
</tbody>
</table>

**Key Elements**

- **Definitions**
  - Example: VSA 26: Chapter 28 § 1572. Definitions: (2) “Registered nursing” means the practice of nursing, which includes but is not limited to: (A) Assessing the health status of individuals and groups; (B) Establishing a nursing diagnosis... (copy of text in site nursing manual).

- **Scope of Practice**
- **Practice Standards**
- **License Requirements**
- **CE Requirements**
  - Example: VT BON AR: Chapter 4. Nursing, Subchapter 7 COMPETENCE: 1. Continuing Education: The Board expects each licensee to assume individual responsibility for maintaining and improving competencies in current knowledge, skills, and abilities relevant to the individual’s area of practice.

- **Other**
  - Citation: Text

Table 1a

<table>
<thead>
<tr>
<th>Nursing Practice Sample Documentation Outline</th>
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<tbody>
<tr>
<td>Practice Location(s)</td>
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<tr>
<td>State Example: Vermont</td>
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<tr>
<td><strong>Definitions</strong></td>
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<td><strong>Example:</strong></td>
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<td><strong>Scope of Practice</strong></td>
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<td><strong>Practice Standards</strong></td>
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<td><strong>License Requirements</strong></td>
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<tr>
<td><strong>CE Requirements</strong></td>
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<td><strong>Example:</strong></td>
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<tr>
<td><strong>Other</strong></td>
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Many of the NPAs and regulations either include definitive standards of practice (e.g., Massachusetts, Texas, West Virginia) or use general references to professional standards of practice (e.g., Oklahoma, Maine). Occupational health nurses’ awareness of these elements is necessary to ensure they are meeting the required standards.

In reviewing the NPA and BON regulations about licensure, several questions may arise. Does the law or regulation require periodic license renewal? If so, how often (e.g., annually, biennially), and what is the process? Does the law require any continuing education activities? If so, what are these activities? How should these activities be documented? Is any other information in the law or regulation about nursing practice applicable to the occupational health nurse’s role and activities? For example, are occupational health nurses required to display their nursing license in client care areas or to wear an identification badge (e.g., California, Texas)?

Regulations related to advanced practice may include additional definitions, requirements for collaborative practice agreements and prescriptive authority, continuing education, and separate application procedures. Occupational health nurses should also investigate practice restrictions related to geographic areas and practice locations, recordkeeping requirements, and quality assurance elements (e.g., requirements for chart reviews).

The occupational health nurse should document the key elements of the applicable state nursing laws and regulations using simple worksheets or tables. The detail included in the documentation can vary and is determined by how the occupational health nurse will use the documentation. The nurse must review and update the documentation regularly, noting any revisions, additions or deletions. The state BON or other authorized agency usually posts regulatory changes on their websites. State chapters of professional nursing associations, including the American Association of Occupational Health Nurses, may also track legislative revisions and provide regulatory information.

**Case Examples**

The regulatory review process for nursing practice legislation is demonstrated in the following case example. J.K. and L.C. are registered nurses providing comprehensive occupational health programs and services at a manufacturing facility located in Connecticut. L.C. also oversees occupational health...
services for employees at a smaller facility in New York State, providing case management services and regularly visiting the facility to provide health screenings, health education, and other programs for the employees. Both nurses are licensed in Connecticut, so they begin their investigation by exploring the government website for the state. Not finding a listing for the State Board of Nursing, they go to the National Council of State Boards of Nursing website and check Connecticut BON contact information. They find a link to a website for Connecticut’s Department of Public Health which has regulatory authority for nursing in Connecticut. Exploring the Department of Public Health’s website, they see that within the Department of Health, The Office of Practitioner Licensing and Certification, a unit of the Department’s Bureau of Healthcare Systems, licenses and certifies individual health care practitioners. Boards of Professions are the responsibility of both the Office of Practitioner Licensing and Certification and the Division of Health Systems Regulation. They note that nursing regulations are included in the compilation of regulations pertaining to public health maintained by the Department of Public Health.

Through site links, they find that procedurally, licensing and renewal is handled by Connecticut’s web-based Licensing Center, which provides access to nursing regulations and links to downloadable application forms. Using that site’s search tool, they identify the state’s NPA, Connecticut General Statue Part 378 Nursing (Connecticut General Assembly, 2005). In reviewing the statute, they find sections covering such elements as definitions, scope of practice, licensing qualifications and fees, scope of practice for advanced nurse practitioners, and improper professional conduct. Reading the sections on the Board of Examiners for Nursing, they learn that the Board consults with the Department of Public Health in relation to nursing education and training, approves nursing education programs with the consent of the Department, administers federal funds for nursing education, and has jurisdiction related to complaints about nursing conduct that does not conform to acceptable professional standards (Sec. 20-90 and Sec. 20-99).

Returning to the Department of Public Health’s website, they locate, first through the Programs and Services link and then through a link to the Public Hearing office (a unit supporting the state’s professional boards), a web page with information about the Board of Examiners for Nursing. This page provides contact information, links to licensing information, and linked listings of nursing regulations (Connecticut Department of Public Health, 2005). Having identified the applicable Connecticut nursing practice laws and regulations, J.K. and L.C. continue their review by documenting key elements of the NPA: the definition of nursing practice in Sec. 20-87a. Definitions. Scope of practice; and the description of unprofessional conduct in Sec. 20-99(b). Improper professional conduct. Prohibited conduct. Next, the nurses explore the list of nursing regulations and find that those listed are not relevant to their nursing practice. Finally, they examine the licensing renewal process to determine any continuing education (none required for registered nurses), or other requirements (e.g., fee, completion of renewal form) for maintaining an active nursing license in Connecticut.

Because Connecticut and New York are two states that have not yet enacted legislation authorizing the RN Nurse Licensure Compact (licensure is required in both states), L.C. must also identify and review the New York State NPA and nursing regulations to determine if licensure is required for the occupational health nursing responsibilities (i.e., oversee occupational health services, provide case management services, make regular visits to provide health screenings, provide health education and other programs to employee) performed at the New York facility. If licensure is required, L.C. would review and document key elements of the New York State NPA and nursing regulations.

**Occupational Health Nursing Practice Legislation**

After the basic nursing practice regulatory foundation has been established, the occupational health nurse identifies and reviews the broader occupational health laws and regulations. Considering an occupational health nurse’s practice setting is key to determining which laws and regulations are applicable. Elements of the practice setting to consider include location, type of industry, actual and potential workplace hazards, employee demographics, and occupational health services provided.

In the United States, a number of federal laws and regulations affect occupational health nursing practice. Occupational health nurses should evaluate the applicability of these laws and regulations for specific practice settings (Table 2). Although some of these laws and regulations may be generally applicable to workers and workplaces, the type of industry in which the occupational health nurse practices often affects which laws and regulations are applicable, and may indicate additional legislation requiring review. Occupational Safety and Health Administration (OSHA) standards are categorized by separate standards for General Industry (e.g., retail, wholesale, and manufacturing establishments), and may apply to any industry when more stringent or supplemental industry-specific standards exist (OSHA, 2005a) (e.g., construction and maritime industries). Standards and regulations of other government agencies may also be applicable (e.g., the Food and Drug Administration for manufacturers of food products, pharmaceuticals, and health-related devices; the Nuclear Regulatory Commission for NRC licensees; the Federal Aviation Administration and other agencies of the Department of Transportation for the transportation of raw materials and finished products). Each federal agency is required to develop an effective and comprehensive occupational safety and health program consistent with the Occupational Safety and Health Act (U.S. Department of Labor (2005). Although employees of state and local government are not covered under OSHA, they may be covered by state OSHA programs or other state plans. Occupational health nurses providing services for employees of government agencies must look to regulations applicable to public sector workers.

It is important to pay attention to worker and workplace dynamics when considering which standards and regulations are applicable because agency regulations and standards also may apply based on the worker’s position or job tasks, or potential job hazards (e.g., construction work in a general industry setting, marine or pipeline workers in a chemical company, jobs requiring a commercial driver’s license, workers in a manufacturing setting with potential exposure to radiation).

The types and content of occupational health programs and services should also be considered. Clinical
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<tr>
<th><strong>Table 2</strong></th>
<th><strong>Selected Federal Legislation Applicable to Occupational Health Nursing Practice</strong></th>
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<tbody>
<tr>
<td><strong>Title</strong></td>
<td><strong>Authority/Agency</strong></td>
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<tr>
<td>Clinical Laboratories Improvement Act (CLIA) Title 42 Part 493—Lab requirements</td>
<td>Department of Health and Human Services (DHHS): Centers for Medicare and Medicaid Services</td>
</tr>
<tr>
<td>Public Law 104-191—Health Insurance Portability and Accountability Act Title II</td>
<td>DHHS: Office of Civil Rights</td>
</tr>
<tr>
<td>Vaccine Adverse Event Report System (VAERS)</td>
<td>DHHS: CDC /Food and Drug Administration</td>
</tr>
<tr>
<td>Americans with Disability Act 1990 Title I Employment (42USC§12101 et seq.)</td>
<td>Department of Justice</td>
</tr>
<tr>
<td>Part 1915—Occupational safety and health standards for shipyard employment (maritime)</td>
<td>DOL: OSHA</td>
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<tr>
<td>Part 1917—Marine terminals</td>
<td>DOL: OSHA</td>
</tr>
<tr>
<td>Part 1918—Safety and health regulations for longshoring</td>
<td>DOL: OSHA</td>
</tr>
<tr>
<td>Part 1926—Safety and health regulations for construction</td>
<td>DOL: OSHA</td>
</tr>
<tr>
<td>12 CFR Part 61—Certification: Pilots, flight instructors, and ground instructors</td>
<td>Department of Transportation (DOT): Federal Aviation Administration</td>
</tr>
<tr>
<td>Toxic Substance Control Act: 40 CFR Part 717—Records and reports of allegations that chemical substances cause significant adverse reactions to health or the environment</td>
<td>Environmental Protection Agency</td>
</tr>
<tr>
<td>Medical device reporting for user facilities</td>
<td>Food and Drug Administration</td>
</tr>
</tbody>
</table>
elements of programs (e.g., health screenings, clinical testing, disability management, immunization programs) may fall within the scope of laws and regulations not specifically focused on occupational health topics or laws. For example, the Clinical Laboratories Improvement Act (CLIA) regulates laboratory testing performed on humans (U.S. Department of Health and Human Services, 1990); the National Childhood Vaccine Injury Act regulates the provision of vaccine information, vaccine recordkeeping, and the reporting of vaccine related adverse events (Centers for Disease Control and Prevention, 2005); and the Health Insurance Portability and Accountability Act (HIPAA) protects the privacy of health care data, and promotes standardization and efficiency in the health care industry (U.S. Department of Health and Human Services, 2005).

Having identified the relevant federal laws and regulations, the occupational health nurse investigates state and local laws and regulations applicable to the practice setting. Is the practice setting located in an area covered by a state OSHA plan? Currently, 22 states and jurisdictions are operating complete state plans (i.e., covering both private sector and state and local government employees), and 4 of them (i.e., Connecticut, New Jersey, New York, the Virgin Islands) operate plans covering public employees only (OSHA, 2005b). Are there any local laws and regulations that need to be included in the occupational health nurse’s review? The occupational health nurse can review state and local government and agency websites for legislation such as state OSHA plans which may have additional or more stringent requirements, as well as regulations related to requirements for facility licenses, injury and illness reporting, recordkeeping, and privacy and record confidentiality. The occupational health nurse should review each identified law and regulation and the guidance documents provided by the agency or other trusted sources. AAOHN’s website offers information and links to a variety of legislative resources.

Many agencies have links directly to the codified regulations. The nurse can scan the table of contents to identify relevant sections; review scope, purpose, and definitions; identify implementation dates; and find any requirements applicable to the practice setting. Is the practice setting covered within the scope of the regulation? Does the regulation apply to all employees or only those in particular jobs or with specific exposures? What is required for compliance? Are preexisting programs considered when assessing compliance? Does the rule require different elements at different times (e.g., initial and ongoing health surveillance)? Are there training requirements for those providing the required elements (e.g., Breath Alcohol Technician training for Department of Transportation alcohol testing)? Are there recordkeeping requirements? Partnering with colleagues in other disciplines ensures all elements are thoroughly reviewed and plans for compliance cover all aspects of the requirements. If occupational health nurses use materials provided by non-agency sources, they should verify that the material is current and includes existing revisions and updates. It is best to use only trusted sources (e.g., government agencies, professional associations) when reviewing standards and regulations.

Case Example Continued

The regulatory review process for occupational health nursing practice legislation is demonstrated in the following case example. Beginning their review of occupational health laws and regulations, J.K. and L.C. consider their facility locations in the states of Connecticut and New York, type of industry, jobs and tasks, the actual and potential workplace hazards, and occupational health services they provide. They focus initially on federal regulation and, using the listing in Table 2 as a starting place, they identify the laws and regulations applicable to their practice including:

- Occupational services provided—First aid and emergency care, job fitness evaluations, clinical testing, immunizations: 29 CFR Part 1910.151 Medical services and first aid; 29 CFR Part 1910.1020 Access to employee exposure and medical records; National Childhood Vaccine Injury Act (42 USC § 300aa-25, 300aa-26); Clinical Laboratories Improvement Act (CLIA) Title 42 Part 493 Lab Requirements; and Americans with Disabilities Act, Title 1 employment (42USC§12101 et seq.).

J.K. and L.C. review each of the identified laws and regulations, the agency compliance documents, and guidance provided by AAOHN and other trusted sources, then document key elements. For example, they review the Table of Contents for 29 CFR Part 1910 through links on the OSHA website (www.OSHA.gov), noting Subpart A—General (includes purpose and scope, definitions), Subpart K—Medical and First Aid, and Subpart Z—Toxic and Hazardous Substances as the sections of interest to them. (J.K. and L.C. do not have safety or industrial hygiene responsibilities.) They have decided to use a basic documentation format, so they note only the reference citations with minimum text for key elements (e.g., 1910.151[a] requires the ready availability of medical personnel for advice and consultation; 1910.1030 Bloodborne pathogens—compliance guidelines for this regulation are documented in the Occupational Health Department Procedure Manual).

J.K. and L.C. begin their review of state and local laws and regulations by accessing the Connecticut state website. Using the site search tool, they find that the state OSHA plan applies to public sector employees and is not applicable to their practice. Using the site agency links, they check the State Department of Labor site for relevant regulations. They find a link to Public Act No. 96-140, An Act to Coordinate the State Family and Medical Leave Laws with the Federal Family and Medical Leave Laws, and add this document to their list, noting that the DOL site has links to other materials about this regulation. Moving to the Department of Public Health site, they access the state’s Public Health Code, which is compiled by the Department of Public Health, and review the Table of
Legislation Affecting Occupational Health Nursing

Identifying Relevant Laws and Regulations

Thompson, M.C.

AAOHN Journal 2006; 54(1), 38-45.

1 A complex network of laws and regulations governs occupational and environmental health nursing practice. Knowledge of these laws and regulations is fundamental to professional practice.

2 The starting place for identifying the scope of laws and regulations governing occupational health nursing practice is with state nurse practice laws and regulations. These apply to all nurses regardless of the type of setting in which they practice.

3 Consideration of the occupational health nurse’s practice setting (e.g., location, type of industry, actual and potential workplace hazards, employee demographics, occupational health services provided) is key to determining which of the numerous federal, state, local, and industry-specific laws and regulations are applicable in the particular practice setting.

PERIODIC REVIEW AND UPDATE

Occupational health nurses must review documentation at regular intervals, updating their documentation as needed. When the nurse has included references to a specific section of applicable laws or regulations in the documentation, it is easier to find regulatory changes. The nurse may hear about changes or additions to federal regulations in notices from AAOHN and other national occupational health groups. AAOHN also provides information on some state laws and regulations in its newsletter. State and local nursing associations may also publish notices about regulatory changes through their newsletters and other publications. More often, websites are the prime location for publication of regulatory changes. Nurses may find it best to schedule periodic reviews of agency and association websites to check for revisions.

SUMMARY

Occupational health nurses are challenged by the complexity of the laws and regulations governing their practice. Establishing a practice-based regulatory framework and applying an efficient review process simplifies that challenge. For those interested in expanding this framework beyond laws and regulations, a number of agencies and organizations that establish standards and recommendations relevant to the occupational health setting exist, such as the Centers for Disease Control and Prevention (www.cdc.gov), the National Institute for Occupational Safety and Health (www.cdc.gov/niosh), and the American Conference of Governmental Industrial Hygienists (www.acgih.org). Materials published by these agencies (e.g., the CDC “Adult Immunization Schedule,” NIOSH “Recommendations for Protecting Outdoor Workers from West Nile,” American Conference of Governmental Industrial Hygienists “Guide to Occupational Exposure Values,” “TLVs,” and “BEIs”) are often of value to occupational health nurses and worth their attention.

REFERENCES


Legislation Affecting Occupational Health Nursing: Identifying Relevant Laws and Regulations

1. The rules issued by an authorized regulatory agency that have the force of law are known as:
   A. Statutes.
   B. Notices.
   C. Regulations.
   D. Legislation.

2. Permanent U.S. laws in the U.S. codes are arranged under ________ title headings according to subject matter.
   A. 45.
   B. 50.
   C. 55.
   D. 60.

3. An occupational health nurse accesses the Library of Congress’ legislative Internet site at:
   A. http://thomas.loc.gov/
   B. www.gpoaccess.gov/
   C. www.firstgov.gov/
   D. www.cdc.gov

4. It is critical for an occupational health nurse to understand the regulatory process. Which of the following is the first component in this process?
   A. Regulatory agency.
   B. Legislative body.
   C. Laws/statutes.
   D. Rules and regulations.

5. The occupational health nurse’s primary resource for questions about the scope and specifics of nursing practice in a state is the:
   A. State Board of Nursing.
   B. State Board of Medicine.
   C. National Council of State Boards of Nursing.
   D. Department of Public Health.

6. The occupational health nurse considers that the second step in the regulatory review process is:
   A. Identify laws and regulations applicable to the occupational health nurse’s specific practice setting.
   B. Document key elements.
   C. Review each identified law and regulation for relevant elements.
   D. Review identified laws and regulations and update documentation.

7. The occupational health nurse is aware that ________ states have enacted the RN Nurse Licensure Compact:
   A. 16.
   B. 21.
   C. 31.
   D. 38.

8. Which of the following is key to determining which occupational health laws and regulations are applicable to an occupational health nurse?
   A. Nurse Practice Act.
   B. Academic degrees.
   C. Certification status.
   D. Practice setting.

9. How many states and jurisdictions have complete state occupational health plans that include private sector and state and local government employees?
   A. 4.
   B. 12.
   C. 19.
   D. 22.

10. To determine compliance with medical services and first aid, the occupational health nurse reviews this regulation:
## ANSWER SHEET
### Continuing Education Module

#### Legislation Affecting Occupational Health Nursing: Identifying Relevant Laws and Regulations

January 2006

(Goal: To gain ideas and strategies to enhance personal and professional growth in occupational health nursing.)

Mark one answer only!

(You may submit a photocopy of the answer sheet for processing.)

1. A B C D
2. A B C D
3. A B C D
4. A B C D
5. A B C D
6. A B C D
7. A B C D
8. A B C D
9. A B C D
10. A B C D

### EVALUATION (must be completed to obtain credit)

Please use the scale below to evaluate this continuing education module.

<table>
<thead>
<tr>
<th>Statement</th>
<th>4 - To a great extent</th>
<th>3 - To some extent</th>
<th>2 - To little extent</th>
<th>1 - To no extent</th>
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<tbody>
<tr>
<td>1. As a result of completing this module, I am able to:</td>
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<tr>
<td>A. Discuss key occupational health nursing practice laws and regulations.</td>
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<td>B. Identify sources of information related to laws and regulations</td>
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<td>relevant for occupational health nurses.</td>
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<td>C. Describe the process and tools for accessing and reviewing regul</td>
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<td>ations applicable to occupational health nursing practice location</td>
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<td>and activities.</td>
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<td>2. The objectives were relevant to the overall goal of this independent</td>
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<td>study module.</td>
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<td>3. The teaching/learning resources were effective for the content.</td>
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<td>4. How much time (in minutes) was required to read this module and take</td>
<td>50</td>
<td>60</td>
<td>70</td>
<td>80</td>
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<td>the test?</td>
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Please print or type: (this information will be used to prepare your certificate of completion for the module).

DEADLINE: DECEMBER 31, 2006. Allow up to 4 weeks for processing.

NAME ________________________________________ MEMBERSHIP NUMBER ______________________

ADDRESS __________________________________________________________________________

CITY __________________________________ STATE _____________________ ZIP ______________

PHONE ______________________________________________________________________________

LICENSE NUMBER ________________________________________________________________

Processing Fees: On-line $10.00, check or money order $15.00 payable to AAOHN in U.S. Funds or bill my credit card:

☐ M/C ☐ Visa ☐ AMEX

Mail to: Professional Affairs — CE Module

AAOHN

Ste. 100

2920 Brandywine Rd.

Atlanta, Georgia 30341

Cardholder’s Name ________________________________

Cardholder’s Signature ________________________________

# ___________ - _________ - ___________ Expiration Date ___________

AN AUTHORIZED SIGNATURE IS REQUIRED FOR ALL CREDIT CARD ORDERS.

CREDIT CARD ORDERS MAY BE FAXED TO (770) 455-7271.