Chapter N 7
RULES OF CONDUCT

N 7.01 Authority and intent. (1) The rules in this chapter are adopted pursuant to authority of ss. 15.08 and 227.11, Stats., and interpret s. 441.07, Stats.

(2) The intent of the board of nursing in adopting this chapter is to specify grounds for denying an initial license or certificate or for reprimanding a licensee or certificate holder.

Note: The bracketed language was unintentionally omitted in the agency’s order promulgating this rule, CR 13–097.

History: Cr. Register, September, 1985, No. 357, eff. 10–1–85; am. (2), Register, May, 1990, No. 413, eff. 6–1–90; correction in (1) made under s. 13.92 (2m) (b) 7., Stats., Register, May, 1990, No. 413; CR 13–097: am. (2) Register July 2014 No. 703, eff. 8–1–14. CR 15–067: am. (2) Register August 2016 No. 728, eff. 9–1–16.

N 7.02 Definitions. As used in this chapter:

(1) “Board” means board of nursing.

(1m) “Certificate” means a certificate of an advanced practice nurse prescriber.

(2) “Drug” has the meaning contained in s. 450.01 (10), Stats.

(3) “License” means a license of a registered nurse, licensed practical nurse or nurse–midwife.

(4) “Licensee” means a person licensed as a registered nurse, licensed practical nurse under s. 441.10, Stats., or nurse–midwife.

(5) “Patient” means any person receiving nursing care for which the nurse is compensated.

Note: The board office is located at 1400 East Washington Avenue, Madison, Wisconsin 53706–8935.

History: Cr. Register, September, 1985, No. 357, eff. 10–1–85; cr. (1m) Register July 2014 No. 703, eff. 8–1–14; correction in (2) made under s. 13.92 (4) (b) 7., Stats., Register August 2015 No. 716.

N 7.03 Grounds for denying or taking disciplinary action. The grounds for denying or taking disciplinary action on a license or certificate are any of the following:

(1) Noncompliance with federal, jurisdictional, or reporting requirements including any of the following:

(a) Engaging in conduct that violates the security of the licensure examination or the integrity of the examination results.

(b) Having a license to practice nursing or a nurse licensure compact privilege to practice denied, revoked, suspended, limited, or having the credential holder otherwise disciplined in another state, territory, or country. A certified copy of the record of the board is conclusive evidence of the final action.

(c) After a request of the board, failing to cooperate in a timely manner, with the board’s investigation of a complaint filed against a license holder. There is a rebuttable presumption that a credential holder who takes longer than 30 days to respond to a request of the board has failed to cooperate in a timely manner.

(d) Practicing without an active license.

(e) Practicing beyond the scope of practice permitted by law.

(f) Failing to inform the board of the advanced practice nurse prescriber’s change in certification status with a national certifying body as a nurse anesthetist, nurse–midwife, nurse practitioner, or clinical nurse specialist.

(g) Violating any term, provision, or condition of any order of the board.

(h) Failing to notify the board of a felony or misdemeanor in writing within 48 hours after the entry of the judgment of conviction, including the date, place, and nature of the conviction or finding. Notice shall include a copy of the judgment of conviction and a copy of the complaint or other information which describes the nature of the crime in order that the board may determine whether the circumstances of the crime of which the credential holder was convicted are substantially related to the practice of nursing.

(i) Failing to report to the board or institutional supervisory personnel any violation of the rules of this chapter by a licensee. This provision does not require a nurse to report treatment information which would fall within the nurse–patient privilege set forth in s. 905.04 (1) (b), Stats.

(2) Violating or aiding and abetting a violation of any law substantially related to the practice of nursing or being convicted of any crime substantially related to the practice of nursing. A certified copy of a judgment of conviction is prima facie evidence of a violation.

(3) Confidentiality, patient privacy, consent, or disclosure violations, including any of the following:

(a) Failing to safeguard the patient’s dignity, or the right to privacy.

(b) Knowingly, recklessly, or negligently divulging a privileged communication or other confidential patient health care information except as required or permitted by state or federal law.

(c) Making statements or disclosures that create a risk of compromising a patient’s privacy, confidentiality, or dignity, including statements or disclosures via electronic or social media.

(4) Misconduct or abuse, including any of the following:

(a) Soliciting, borrowing, misappropriating, obtaining, or attempting to obtain money or property from a patient or a patient’s family.

(b) Obtaining or attempting to obtain any compensation by fraud, misrepresentation, deceit, duress, or undue influence in the course of nursing practice.

(c) Abusing a patient by a single or repeated act of force, violence, harassment, deprivation, neglect, or mental pressure which reasonably could cause physical pain, injury, mental anguish, or fear.

(d) Engaging in repeated or significant disruptive behavior or interaction with health care personnel, patients, family members, or others that interferes with patient care or could reasonably be expected to adversely impact the quality of care rendered.

(e) 1. Violating principles of professional boundaries, including any of the following:

a. Failing to establish, maintain, or communicate professional boundaries with the patient.

b. Engaging in relationships with patients that could impair the nurse’s professional judgment.

c. Exploiting in any manner the professional relationship with a patient for the nurse’s emotional, financial, sexual, or personal advantage or benefit.

d. Engaging in dual relationships if the nurse’s ability to provide appropriate care would be compromised due to the nature of the additional relationship with the patient.

e. Engaging in any dual relationship in mental health nursing.
f. Engaging in self-disclosure to a patient which creates a risk or adversely impacts the patient’s care and well-being.

g. Using any confidence of a patient to the patient’s disadvantage or for the advantage of the nurse.

h. Accepting gifts which are more than minimal value or any cash from a patient or patient’s family.

2. This paragraph does not include providing health care services to a person with whom the nurse has a preexisting, established personal relationship where there is no evidence of or potential for exploiting the patient and contact that is necessary for a health care purpose that meets the standards of the profession.

(i) Engaging in sexual misconduct, including any of the following:

a. Sexually explicit conduct, sexual contact, exposure, gratification, other sexual behavior with or in the presence of a patient.

b. Conduct that may reasonably be interpreted by a patient as sexual or any verbal behavior that is sexually harassing to a patient.

c. Posing, photographing or recording the body or any body part of a current or former patient, other than for health care purposes.

d. Transmitting information about a patient via electronic media that can be reasonably interpreted as sexual or sexually demeaning by the current or former patient.

e. Engaging or attempting to engage in sexual or seductive conduct with a former patient if doing so creates a risk that the relationship could cause harm to or exploitation of the former patient.

2. For the purpose of this paragraph, due to the unique vulnerability of mental health patients, including patients with substance use disorders, nurses are prohibited from engaging in or attempting to engage in sexual or seductive conduct with such former patients, a former patient’s immediate family or person responsible for the patient’s welfare, for a period of at least 2 years after the termination of nursing services.

(5) Fraud, deception or misrepresentation, including any of the following:

(a) Falsifying or inappropriately altering reports, patient documentation, agency records, or health documents.

(b) Intentionally making incorrect entries in a patient’s medical record or other related documents.

(c) Engaging in abusive or fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state laws.

(d) Submitting false claims.

(e) Fraud, deceit, or material omission in obtaining a license or certification or in the renewal of the license or certification.

(f) Impersonating another licensee or allowing another person to use the licensee’s credential for any purpose.

(g) Submitting false information in the course of an investigation.

(h) Misrepresentation of credentials.

(i) Misleading, false, or deceptive advertising or marketing.

(6) Unsafe practice or substandard care, including any of the following:

(a) Failing to perform nursing with reasonable skill and safety.

(b) Lack of knowledge, skill, or ability to discharge professional obligations within the scope of nursing practice.

(c) Departing from or failing to conform to the minimal standards of acceptable nursing practice that may create unnecessary risk or danger to a patient’s life, health, or safety. Actual injury to a patient need not be established.

(d) Failing to report to or leaving a nursing assignment without properly notifying appropriate supervisory personnel and ensuring the safety and welfare of the patient or client.

(e) Practicing nursing while under the influence of alcohol, illicit drugs, or while impaired by the use of legitimately prescribed pharmacological agents or medications.

(f) Unable to practice safely by reason of alcohol or other substance use.

(g) Unable to practice safely by reason of psychological impairment or mental disorder.

(h) Unable to practice safely by reason of physical illness or impairment.

(i) Failure to consult or delay in consultation for clinical care beyond scope of practice.

(j) Failure to treat.

(k) Inadequate or improper infection control practices.

(l) Failure to provide medically necessary items or services.

(m) Discriminating on the basis of age, marital status, gender, sexual preference, race, religion, diagnosis, socioeconomic status, or disability while providing nursing services.

(n) Executing an order which the licensee knew or should have known would harm or present the likelihood of harm to a patient.

(o) Failing to execute a medical order unless the order is inappropriate and the licensee reports the inappropriate order to a nursing supervisor or other appropriate person.

(p) Failing to observe the conditions, signs and symptoms of a patient, record them, or report significant changes to the appropriate person.

(7) Improper supervision or allowing unlicensed practice, including any of the following:

(a) Delegating a nursing function or a prescribed health function when the delegation could reasonably be expected to result in unsafe or ineffective patient care.

(b) Knowingly aiding, assisting, advising, or allowing a person to engage in the unlawful practice of nursing.

(c) Inappropriate or inadequate supervision or delegation.

(d) Failing to supervise assigned student experiences.

(8) Improper prescribing, dispensing, or administering medication or drug related offenses, including any of the following:

(a) Prescribing of any drug other than in the course of legitimate practice or as otherwise prohibited by law.

(b) Dispensing of any drug other than in the course of legitimate practice or as otherwise prohibited by law.

(c) Administering any drug other than in the course of legitimate practice or as otherwise prohibited by law.

(d) Error in prescribing, dispensing, or administering medication.

(e) Obtaining, possessing or attempting to obtain or possess a drug without lawful authority.

History: Cr. Register, September, 1985, No. 357, eff. 10–1–85; am. (1) (intro.), (6) to (g), (2) and (3), Register, May, 1990, No. 413, eff. 6–1–90; CR 13–097; r. and recri. Register July 2014 No. 703, eff. 8–1–14; corrections in (intro.), (1) (intro.), (3) (intro.), (4) (intro.), (6) (intro.), (7) (intro.), and (8) (intro.) made under s. 35.17, Stats., and renumbering in (4) (c) and (f) made under s. 13.92 (4) (b) 1., Stats., Register July 2014 No. 703; CR 15–067; am. (intro.) Register August 2016 No. 728, eff. 9–1–16; correction in (title) under s. 13.92 (4) (b) 2. Register August 2016 No. 728.