

**IOWA BOARD OF NURSING**

*RiverPoint Business Park  
400 SW 8<sup>TH</sup> St., Suite B  
Des Moines, IA 50309-4685*

**INSTRUCTIONS FOR REGISTRATION  
ADVANCED REGISTERED NURSE PRACTITIONER**

**I. Qualifications for Registration as required by Chapter 7.**

- A. Current licensure as a registered nurse in Iowa or licensure as a registered nurse in another compact state, which is your primary state of residence. Primary state of residence is defined as the state where you hold a driver's license, vote and pay taxes.
- B. Graduation from a program leading to a master's degree in a nursing clinical specialty area with preparation in specialized practitioner skills;

**OR**

Satisfactory completion of a formal advanced practice educational program of study, in a nursing specialty, approved by the board with appropriate clinical experience approved by the board.

- C. Time-dated advanced level certification by the appropriate national certifying body approved by the board. (See Section III if you are a new graduate and have not received documentation of current certification.)

**II The Advanced Registered Nurse Practitioner categories are:**

- A - Certified Family Nurse Practitioner
- B - Certified Nurse-Midwife
- C - Certified Pediatric Nurse Practitioner
- D - Certified Registered Nurse Anesthetist
- E - Certified School Nurse Practitioner
- F - Certified Women's Health Care Nurse Practitioner
- G - Certified Psych/Mental Health Nurse Practitioner
- H - Certified Adult Nurse Practitioner
- I - Certified Clinical Nurse Specialist
- J - Certified Gerontological Nurse Practitioner
- K - Certified Neonatal Nurse Practitioner
- L - Acute Care Nurse Practitioner
- M - Perinatal Nurse Practitioner
- Q - Clinical Nurse Specialist – Adult Health
- R - Clinical Nurse Specialist - Perinatal
- S - Clinical Nurse Specialist - Medical/Surgical
- T - Clinical Nurse Specialist - Adult Psych
- U - Clinical Nurse Specialist - Oncology
- V - Clinical Nurse Specialist - Gerontology
- W - Clinical Nurse Specialist - Orthopedics
- X - Clinical Nurse Specialist – Community Health
- Y - Clinical Nurse Specialist - Home Health
- Z - Clinical Nurse Specialist - Child/Adolescent Psych

(Over)

### III Filing Application

- A. The applicant is responsible for submitting the following to the Iowa Board of Nursing:
1. Completed application for registration in Iowa as an Advanced Registered Nurse Practitioner (A.R.N.P.) *Note: Do NOT submit the application unless you have the certification exam results to submit with the application. If the certification exam results are arriving separately from the certifying agency, please include a note stating this with your application.*
  2. \$81.00 fee for any length of registration up to three years (fee must accompany application)
  3. If your primary state of residence is another compact state (Not Iowa), a copy of the current Registered Nurse license OR a copy of the online verification from the board website OR a copy from [www.nursys.com](http://www.nursys.com), the document **MUST** include the expiration date and **MUST** be submitted with the application.
  4. A copy of a current certification card or certificate evidencing advanced level certification issued by the national certifying body approved by the board indicating a future expiration date.
  5. Newly certified applicants may submit a copy of their letter of notification of passing the certification exam within 90 days of issue if they have not received an actual certification notice.
  6. An official transcript from a masters program or formal advanced level educational program of study denoting course of study and clinical experience. Date of graduation/completion of program must appear on the transcript. Transcripts must be received directly from the college. Faxed copies or copies received from the applicant in a sealed envelope will NOT be accepted. *(If the same transcript was submitted previously for a different ARNP registration with the board, please include a note stating this with your application.)*
  7. Information regarding criminal offense or prior disciplinary action. Send a copy of the sentencing order and/or board documentation with the application.
- B. If applicant is currently (and will continue to be) an active member of the military or currently (and will continue to be) a Federal Government employee identification such as; military orders, military identification, or federal employee identification must be submitted with the application.
- C. The applicant shall complete the registration process within twelve (12) months of receipt of the application materials. The board reserves the right to destroy the documents after twelve (12) months.
- D. No Temporary Licenses will be issued.

If you have any questions, feel free to contact this office at 515/281-6488 or contact us by email at [newnurs@iowa.gov](mailto:newnurs@iowa.gov).