

Assessment of Nursing Practice Application

Please complete this form electronically and return to nanbregistration@nanb.nb.ca

General Information:

Name:

NANB Registration Number:

Job Title:

Business/employer name:

Practice Description:

1. Describe your nursing practice.
2. Which nursing practice role best describes your nursing practice (see Appendix A in the *Guideline for Recognition of Nursing Practice* for role descriptions)?
3. Describe the client(s) of your nursing practice.
4. Explain how best-practice and evidence-informed practice is incorporated into your practice.
5. How do you ensure that you possess the required competencies to offer the service(s)? Describe educational preparation and experiential knowledge.

6. Explain how the nursing process (assessment, planning, intervention, and evaluation) is be applied within your nursing practice. Provide explanation of assessments/evaluations and/or examples of assessment/evaluation tools.

7. Provide your job description, this is required by all applicants.

NPs only

8. Explain how the following will be incorporated into your practice:
- a) diagnosing or assessing a disease, disorder, or condition, and communicating the diagnosis or assessment to the client;

 - b) ordering and interpreting screening and diagnostic tests;

 - c) selecting, prescribing, and monitoring the effectiveness of drugs; and

 - d) ordering the application of forms of energy.