

Nurse Protocol Registration Forms and Information

The website for the Georgia Composite Medical Board is www.medicalboard.georgia.gov

For information regarding Nurse Practitioners and Protocol Agreements, please review the [Frequently Asked Questions](#) on our website.

At the [home page](#), on the left side of the screen, choose "[For Professionals](#)". On the next screen, choose "[Download Applications](#)". On the next screen, choose "[Nurse Protocol \(APRN\) Forms](#)". When you click on this item, there will be a menu.

[Nurse Protocol \(APRN\) Forms](#)

[APRN Forms](#)

[APRN Rules pursuant to OCGA 43-34-25](#)

[Frequently Asked Questions](#)

[SAMPLE APRN Agreement for Family Practice](#)

From this menu, you will need to print:

[APRN Rules pursuant to OCGA 43-34-25](#) – This is a 7-page document that contains the rules pertaining to Nurse Protocol Agreements. **Pay close attention to Section 360-32-.02. This is the section that lists the requirements that must be addressed in the Protocol Agreement between the delegating physician and the APRN.** There is no standard format for the Protocol Agreement, as it will be slightly different depending on the type of practice.

[SAMPLE APRN Agreement for Family Practice](#) (This is a [SAMPLE](#) agreement to be used [as a guide](#) in creating your protocol agreement for your practice.)

Click on the [APRN Forms](#). The next menu will display:

[APRN Forms](#)

[APRN General Information and Checklist](#)

[APRN Registration Form](#)

[Form A – Designated Physician Information](#) (This is for the [consulting or back-up](#) physician – **NOT** the delegating physician.)

[Form B – Protocol Agreement Termination](#)

[Form C – Protocol Agreement Worksheet](#)

[Form D – APRN DEA Information](#)

From this menu, you will need to print:

- [APRN Registration Form](#)
- [Form A](#) – Designated Physician Information (if applicable)
- [Form C](#) – Protocol Agreement Worksheet
- [Form D](#) – ONLY if the APRN's DEA number has [ALREADY](#) been issued

When you submit your paperwork to the Georgia Medical Board, you will need to send:

1 – **Registration Form** - Make sure all information is complete and the form is signed and dated by the delegating physician and the APRN. The **original form** must be **mailed** to the Medical Board.

2 – **Form A – Designated Physician Information** (optional) – There may be multiple copies of this form depending on the number of designated (consulting or back-up) physicians listed on the protocol agreement. Make sure all information is complete and the form is signed and dated by the designated physician. The **original form(s)** must be **mailed** to the Medical Board.

***** PLEASE NOTE - **If there are no designated physicians on the protocol agreement, there must be a statement in the agreement that when the delegating physician is unavailable, the APRN will NOT see patients.**

3 – **Form C – Nurse Protocol Agreement Worksheet** – Be sure to follow the instructions from the Documentation Requirements in the Registration Packet when completing this form.

4 – **Nurse Protocol Agreement** - This is the document that has been created between the delegating physician and the APRN. It must be signed and dated. **It must contain all the requirements** from **Rule 360-32-.02**. (The SAMPLE Nurse Protocol Agreement **may be used as a guide** to create the protocol agreement for an individual practice.)

5 – **\$150.00 fee (updated 07/13)**, check or money order made payable to the Georgia Medical Board.

6 – **Documentation of special training** or qualifications for any procedures that are **outside** the normal training for Nurse Practitioners – **this would also include any certifications (FNP, PNP, ANP, WHNP, etc.) from organizations such as the AANP or the ANCC.**

Please note:

** The **DEA Information** form is submitted to the Board only **AFTER** the **DEA number has been issued**.

** **Form B** is submitted to the Board when the **protocol agreement is being terminated** between the delegating physician and the APRN.

Questions?? **Contact Carol Dorsey by e-mail at cdorsey@dch.ga.gov or by phone at 404-463-5038.**