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Primary Source Board of Nursing Report Summary for

**KATE Wilhoit SCHNEIDER [NCSBN ID: 20195567]** ⓘ

**Report Date:** Thursday, February 22 2024 08:26:57 AM





Details related to License / Certificate Status can be found at the bottom of this page.

NAME ON LICENSE	LICENSE / CERTIFICATE TYPE	LICENSE / CERTIFICATE NUMBER	LICENSE STATUS	ORIGINAL ISSUE DATE	CURRENT ISSUE DATE	CURRENT EXPIRATION DATE	DISCIPLINE
SCHNEIDER, RN KATE Wilhoit		870389	Inactive	08/11/2023	08/11/2023	09/21/2023	NO

ⓘ Primary Source Board of Nursing Messages & Notifications

**This temporary license is issued until the applicant meets all of the licensure requirements for a permanent license. A temporary license may not be extended or renewed.**

SCHNEIDER, APRN-CNP KATE Wilhoit		870389	Inactive	09/06/2023	09/06/2023	09/21/2023	NO
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NAME ON LICENSE	LICENSE / CERTIFICATE TYPE	LICENSE / CERTIFICATE NUMBER	LICENSE STATUS	ORIGINAL ISSUE DATE	CURRENT ISSUE DATE	CURRENT EXPIRATION DATE	DISCIPLINE
<div>  Primary Source Board of Nursing Messages &amp; Notifications            </div> <p><b>This temporary license is issued until the applicant meets all of the licensure requirements for a permanent license. A temporary license may not be extended or renewed.</b></p>							
<div>  Advanced practice license/recognition information            </div> <p><b>Advanced Practice license/recognition information</b></p> <p><b>POPULATION FOCUS / SPECIALTY:</b></p> <ul style="list-style-type: none"> <li>◦ <b>FOCUS/SPECIALTY: Women's Health / Gender Related</b></li> <li>◦ <b>EXPIRATION DATE: 09/21/2023</b></li> <li>◦ <b>ORIGINAL ISSUANCE DATE: 09/06/2023</b></li> <li>◦ <b>CURRENT ISSUE DATE: 09/06/2023</b></li> <li>◦ <b>HAS DISCIPLINE: NO</b></li> <li>◦ <b>CERTIFICATION EXPIRATION DATE: 09/15/2026</b></li> </ul>							
SCHNEIDER, KATE Wilhoit	RN	870389	Active	09/21/2023	09/21/2023	✓ 04/12/2025	NO
SCHNEIDER, KATE Wilhoit	APRN-CNP	870389	Active Prescribing - CII	09/21/2023	09/21/2023	✓ 04/12/2025	NO

NAME ON LICENSE	LICENSE / CERTIFICATE TYPE	LICENSE / CERTIFICATE NUMBER	LICENSE STATUS	ORIGINAL ISSUE DATE	CURRENT ISSUE DATE	CURRENT EXPIRATION DATE	DISCIPLINE
<div> <div>  Advanced practice license/recognition information </div> <div>  </div> </div>							
<h3>Advanced Practice license/recognition information</h3>							
<p><b>POPULATION FOCUS / SPECIALTY:</b></p> <ul style="list-style-type: none"> <li>◦ <b>FOCUS/SPECIALTY: Women's Health / Gender Related</b></li> <li>◦ <b>EXPIRATION DATE: 04/12/2025</b></li> <li>◦ <b>ORIGINAL ISSUANCE DATE: 09/21/2023</b></li> <li>◦ <b>CURRENT ISSUE DATE: 09/21/2023</b></li> <li>◦ <b>HAS DISCIPLINE: NO</b></li> <li>◦ <b>CERTIFICATION EXPIRATION DATE: 09/15/2026</b></li> </ul>							



**The legend below provides details related to the statuses for advanced practice registered nurses (APRNs) only**

**Active–** ascribed to APRNs who meet the requirements for licensure, but do not meet the requirements, or have not applied for, prescribing privileges.

**Active Prescribing–** ascribed to all APRNs who have been granted authority to prescribe all legend drugs and may include Schedule CIII-V

**Active Prescribing – CII –** ascribed to all APRNs who have been granted authority to prescribe within the Schedule CII-V category, and is not required to obtain a protocol with a collaborative physician.

**Active Prescribing-CII-COLL –** ascribed to all APRNs who have been granted authority to prescribe within the Schedule CII-V category, and have provided a copy of his/her current protocol with a collaborative physician.

**Active Prescribing -D–** ascribed to all APRNs who have been granted authority to prescribe and dispense all legend drugs and may include Schedule CIII-V

**Active Prescribing – CII – D** ascribed to all APRNs who have been granted authority to prescribe and dispense within the Schedule CII-V category, and is not required to obtain a protocol with a collaborative physician.

**Active Prescribing-CII-COLL –D** ascribed to all APRNs who have been granted authority to prescribe and dispense within the Schedule CII-V category, and have provided a copy of his/her current protocol with a collaborative physician.

APRNs must also apply with the Nevada State Board of Pharmacy and/or DEA before they can prescribe in Nevada.

If an APRN wishes to remove the protocol requirement they must submit a letter on letterhead from their employer to the Nevada State Board of Nursing verifying that they have worked a minimum of 2 years or 2,000 hours as an APRN.



## Nursys National Licensure and Disciplinary Database

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- Online verification for endorsement to practice in another state.
- Nurse license lookup reports for employers and the general public.

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Nevada State Board of Nursing (<https://nevadanursingboard.org/>)

6005 Plumas Street, Ste. 100 Reno, NV 89519

Email: [nursingboard@nsbn.state.nv.us](mailto:nursingboard@nsbn.state.nv.us) (mailto: [nursingboard@nsbn.state.nv.us?Subject=Nurse Portal Support Request](mailto:nursingboard@nsbn.state.nv.us?Subject=NursePortalSupportRequest))

Telephone: 8885906726 Fax: 7756877707

Hours of Operation: Monday through Friday 8:00 AM to 5:00 PM PST

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