

Sec. 301.257. Declaratory Order of License Eligibility.

(a) A person may petition the board for a declaratory order as to the person's eligibility for a license under this chapter if the person:

(1) is enrolled or planning to enroll in an educational program that prepares a person for an initial license as a registered nurse; and

(2) has reason to believe that the person is ineligible for the license.

(b) The petition must state the basis for the person's potential ineligibility.

(c) The board has the same powers to investigate the petition and the person's eligibility that it has to investigate a person applying for a license.

(d) The petitioner or the board may amend the petition to include additional grounds for potential ineligibility at any time before a final determination is made.

(e) If the board proposes to find that the petitioner is ineligible for a license, the petitioner is entitled to a hearing before the State Office of Administrative Hearings.

(f) The board's order must set out each basis for potential ineligibility and the board's determination as to eligibility. In the absence of new evidence known to but not disclosed by the petitioner or not reasonably available to the board at the time the order is issued, the board's ruling on the petition determines the person's eligibility with respect to the grounds for potential ineligibility set out in the order.

(g) The board may require an individual accepted for enrollment or enrolled in an educational program preparing a student for initial licensure as a registered nurse to submit information to the board to permit the board to determine whether the person is aware of the conditions that may disqualify the person from licensure as a registered nurse on graduation and of the person's right to petition the board for a declaratory order under this section. Instead of requiring the person to submit the information, the board may require the educational program to collect and submit the information on each person accepted for enrollment or enrolled in the program.

(h) The information required under Subsection (g) must be submitted in a form approved by the board.

(i) If, as a result of information provided under Subsection (g), the board determines that a person may not be eligible for a license on graduation, the board shall notify the educational program of its determination.

(formerly V.A.C.S. Art. 4519a.)

Sec. 301.252. License Application.

Each applicant for a registered nurse license must submit to the board a sworn application that demonstrates the applicant's qualifications under this chapter, accompanied by evidence that the applicant has:

- (1) good professional character; and
 - (2) successfully completed an accredited program of professional nursing education.
- (formerly V.A.C.S. Art. 4518, Sec. 3 (part).)

Sec. 301.253. Examination.

(a) Except as provided by Section 301.452, an applicant is entitled to take the examination prescribed by the board if:

- (1) the board determines that the applicant meets the qualifications required by Section 301.252; and
- (2) the applicant pays the fees required by the board.

(b) The board shall give the examination in various cities throughout the state.

(c) The examination shall be designed to determine the fitness of the applicant to practice professional nursing.

(d) The board shall determine the criteria that determine a passing score on the examination. The criteria may not exceed those required by the majority of the states.

(e) A written examination prepared, approved, or offered by the board, including a standardized national examination, must be validated by an independent testing professional.

(formerly V.A.C.S. Art. 4518, Sec. 3 (part); Art. 4519, Subsecs. (a), (b) (part).)

Sec. 301.452. Grounds for Disciplinary Action.

(a) In this section, "intemperate use" includes practicing professional nursing or being on duty or on call while under the influence of alcohol or drugs.

(b) A person is subject to denial of a license or to disciplinary action under this subchapter for:

- (1) a violation of this chapter or a rule or order issued under this chapter;
- (2) fraud or deceit in procuring or attempting to procure a license to practice professional nursing;
- (3) a conviction for a felony or for a misdemeanor involving moral turpitude;
- (4) conduct that results in the revocation of probation imposed because of conviction for a felony or for a misdemeanor involving moral turpitude;
- (5) use of a nursing license, diploma, or permit, or the transcript of such a document, that has been fraudulently purchased, issued, counterfeited, or materially altered;
- (6) impersonating or acting as a proxy for another person in the licensing examination required under Section 301.253 or 301.255;

- (7) directly or indirectly aiding or abetting an unlicensed person in connection with the unauthorized practice of professional nursing;
- (8) revocation, suspension, or denial of, or any other action relating to, the person's license to practice nursing in another jurisdiction;
- (9) intemperate use of alcohol or drugs that the board determines endangers or could endanger a patient;
- (10) unprofessional or dishonorable conduct that, in the board's opinion, is likely to deceive, defraud, or injure a patient or the public;
- (11) adjudication of mental incompetency;
- (12) lack of fitness to practice because of a mental or physical health condition that could result in injury to a patient or the public; or
- (13) failure to care adequately for a patient or to conform to the minimum standards of acceptable professional nursing practice in a manner that, in the board's opinion, exposes a patient or other person unnecessarily to risk of harm.

(c) The board may refuse to admit a person to a licensing examination for a ground described under Subsection (b).

(formerly V.A.C.S. Art. 4525, Subsecs. (a) (part), as amended Acts 73rd Leg., R.S., Ch. 436, (a) (part), as amended Acts 73rd Leg., R.S., Ch. 840, (b), as amended Acts 73rd Leg., R.S., Ch. 840.)

Sec. 301.453. Disciplinary Authority of Board; Methods of Discipline.

(a) If the board determines that a person has committed an act listed in Section 301.452(b), the board shall enter an order imposing one or more of the following:

- (1) denial of the person's application for a license, license renewal, or temporary permit;
- (2) issuance of a written warning;
- (3) administration of a public reprimand;
- (4) limitation or restriction of the person's license, including:
 - (A) limiting to or excluding from the person's practice one or more specified activities of professional nursing; or
 - (B) stipulating periodic board review;
- (5) suspension of the person's license for a period not to exceed five years;
- (6) revocation of the person's license; or
- (7) assessment of a fine.

(b) In addition to or instead of an action under Subsection (a), the board, by order, may require the person to:

- (1) submit to care, counseling, or treatment by a health provider designated by the board as a condition for the issuance or renewal of a license;
- (2) participate in a program of education or counseling prescribed by the board;
- (3) practice for a specified period under the direction of a registered nurse designated by the board; or
- (4) perform public service the board considers appropriate.

(c) The board may probate any penalty imposed on a registered nurse and may accept the voluntary surrender of a license. The board may not reinstate a surrendered license unless it determines that the person is competent to resume practice.

(d) If the board suspends, revokes, or accepts surrender of a license, the board may impose conditions for reinstatement that the person must satisfy before the board may issue an unrestricted license.

(formerly V.A.C.S. Art. 4525, Subsec. (a) (part), as amended Acts 73rd Leg., R.S., Ch. 436; Art. 4525.1, Subsecs. (a), (b), (c), (d).)

Sec. 301.454. Notice and Hearing.

(a) Except in the case of a temporary suspension authorized under Section 301.455 or an action taken in accordance with an agreement between the board and a license holder, the board may not initiate a disciplinary action relating to a license unless:

- (1) the board has served notice to the license holder of the facts or conduct alleged to warrant the intended action; and
- (2) the license holder has been given an opportunity, in writing or through an informal meeting, to show compliance with all requirements of law for the retention of the license.

(b) If an informal meeting is held, a board member, staff member, or board representative who attends the meeting is considered to have participated in the hearing of the case for the purposes of ex parte communications under Section 2001.061, Government Code.

(c) A person is entitled to a hearing conducted by the State Office of Administrative Hearings if the board proposes to:

- (1) refuse to admit the person to examination;
- (2) refuse to issue a license or temporary permit;
- (3) refuse to renew a license; or
- (4) suspend or revoke the person's license or permit.

(d) The State Office of Administrative Hearings shall use the schedule of sanctions adopted by the board for any sanction imposed as the result of a hearing conducted by that office.

(e) Notwithstanding Subsection (a), a person is not entitled to a hearing on a refusal to renew a license if the person:

(1) fails to submit a renewal application; or

(2) submits an application that:

(A) is incomplete;

(B) shows on its face that the person does not meet the renewal requirements; or

(C) is not accompanied by the correct fee.

(formerly V.A.C.S. Art. 4525, Subsecs. (a) (part), as amended Acts 73rd Leg., R.S., Ch. 840,(a-1), (b) (part), as amended Acts 73rd Leg., R.S., Ch. 436, (k); Art. 4525.1, Subsec. (e); Art. 4525.4.)

§213.27. Good Professional Character.

(a) Good professional character is the integrated pattern of personal, academic and occupational behaviors which, in the judgment of the Board, indicates that an individual is able to consistently conform his or her conduct to the requirements of the Nursing Practice Act, the Board's rules and regulations, and generally accepted standards of nursing practice including, but not limited to, behaviors indicating honesty, accountability, trustworthiness, reliability and integrity.

(b) Factors to be used in evaluating good professional character in eligibility and disciplinary matters are:

(1) Good professional character is determined through the evaluation of behaviors demonstrated by an individual in his or her personal, academic and occupational history. An individual's age, education and experience necessarily affect the nature and extent of behavioral history; and, therefore shall be considered in each evaluation.

(2) A person who seeks to obtain or retain a license to practice professional nursing shall provide evidence of good professional character which, in the judgment of the Board, is sufficient to insure that the individual can consistently act in the best interest of patients/clients and the public in any practice setting. Such evidence shall establish that the person:

(A) is able to distinguish right from wrong;

(B) is able to think and act rationally;

(C) is able to keep promises and honor obligations;

(D) is accountable for his or her own behavior;

(E) is able to practice nursing in an autonomous role with patients/clients, their families and significant others and members of the public who are or who may become physically, emotionally or financially vulnerable;

(F) is able to recognize and honor the interpersonal boundaries appropriate to any therapeutic relationship or health care setting; and

(G) is able to promptly and fully self-disclose facts, circumstances, events, errors and omissions when such disclosure could enhance the health status of patients/clients or the public or could protect patients/clients or the public from unnecessary risk of harm.

§213.28. Licensure of Persons with Criminal Convictions.

(a) This section sets out the considerations and criteria on the eligibility of persons with criminal convictions to obtain a license as a registered nurse or those already licensed who renew their license. The Board may refuse to approve persons to take the licensure examination, may refuse to issue or renew a license or certificate of registration, or may refuse to issue a temporary permit to any individual that has been convicted of a felony, a misdemeanor involving moral turpitude, or engaged in conduct resulting in the revocation of probation imposed pursuant to such a conviction.

(b) The practice of nursing involves clients, their families, significant others and the public in diverse settings. The registered nurse practices in an autonomous role with individuals who are physically, emotionally and financially vulnerable. The nurse has access to personal information about all aspects of a person's life, resources and relationships. Therefore, criminal behavior whether violent or non-violent, directed against persons, property or public order and decency is considered by the Board as highly relevant to an individual's fitness to practice nursing.

(c) In considering whether a criminal conviction renders the individual ineligible for licensure or renewal of licensure as a registered nurse, the Board shall consider:

(1) the knowing or intentional practice of professional nursing without a license issued under the NPA;

(2) any felony or misdemeanor involving moral turpitude;

(3) the nature and seriousness of the crime;

(4) the relationship of the crime to the purposes for requiring a license to engage in professional nursing practice;

(5) the extent to which a license might offer an opportunity to engage in further criminal activity of the same type as that in which the person previously had been involved; and

(6) the relationship of the crime to the ability, capacity, or fitness required to perform the duties and discharge the responsibilities of professional nursing practice.

(d) In addition to the factors that may be considered under subsection (c) of this section, the Board, in determining the present fitness of a person who has been convicted of a crime, shall consider:

- (1) the extent and nature of the person's past criminal activity;
- (2) the age of the person at the time of the commission of the crime;
- (3) the amount of time that has elapsed since the person's last criminal activity;
- (4) the conduct and work activity of the person prior to and following the criminal activity;
- (5) evidence of the person's rehabilitation or rehabilitative effort while incarcerated or following release; and
- (6) other evidence of the person's present fitness, including letters of recommendation from: prosecutorial, law enforcement, and correctional officers who prosecuted, arrested, or had custodial responsibility for the person; the sheriff or chief of police in the community where the person resides; and any other persons in contact with the convicted person.

(e) It shall be the responsibility of the applicant to secure and provide to the Board the recommendations of the prosecution, law enforcement, and correctional authorities as required under this Act. The applicant shall also furnish proof in such form as may be required by the licensing authority that he or she has maintained a record of steady employment and has supported his or her dependents and has otherwise maintained a record of good conduct and has paid all outstanding court costs, supervision fees, fines, and restitution as may have been ordered in all criminal cases in which he or she has been convicted.

(f) If requested by staff, it shall be the responsibility of the individual seeking licensure to ensure that staff is provided with legible, certified copies of all court and law enforcement documentation from all jurisdictions where the individual has resided or practiced as a licensed health care professional. Failure to provide complete, legible and accurate documentation will result in delays prior to licensure or renewal of licensure and possible grounds for ineligibility.

(g) Behavior that would otherwise bar or impede licensure may be deemed "A Youthful Indiscretion" as determined by an analysis of the behavior using the factors set out in §213.27 of this title (relating to Good Professional Character), subsections (a)-(e) of this section and at least the following criteria:

- (1) age of 22 years or less at the time of the behavior;
- (2) absence of criminal plan or premeditation;
- (3) presence of peer pressure or other contributing influences;
- (4) absence of adult supervision or guidance;
- (5) evidence of immature thought process/judgment at the time of the activity;
- (6) evidence of remorse;
- (7) evidence of restitution to both victim and community;
- (8) evidence of current maturity and personal accountability;
- (9) absence of subsequent undesirable conduct;

(10) evidence of having learned from past mistakes;

(11) evidence of current support structures that will prevent future criminal activity; and

(12) evidence of current ability to practice professional nursing in accordance with the Nursing Practice Act, Board rules and generally accepted standards of professional nursing.

(h) With respect to a request to obtain a license from a person who has a criminal history, the executive director is authorized to close an eligibility file when the applicant has failed to respond to a request for information or to a proposal for denial of eligibility within 60 days thereof. (6/99)

§213.29. Criteria and Procedure Regarding Intemperate Use and Lack of Fitness in Eligibility and Disciplinary Matters.

(a) A person desiring to obtain or retain a license to practice professional nursing shall provide evidence of current sobriety and fitness.

(b) Such person shall provide a sworn certificate to the Board stating that he/she has read and understands the requirements for licensure as a registered nurse and that he/she has not:

(1) within the past five years, become addicted to or treated for the use of alcohol or any other drug; or

(2) within the past five years, been diagnosed with, treated or hospitalized for schizophrenia and/or other psychotic disorders, bi-polar disorder, paranoid personality disorder, antisocial personality disorder or borderline personality disorder. (6/99)

(c) Such person, if unable to sign the certification in subsection (b) of this section, shall execute an authorization for release of medical, psychiatric and treatment records in relation to the conditions mentioned in subsection (b) of this section.

(d) Such person shall submit to and pay for an evaluation by a professional approved by the executive director to determine current sobriety and fitness. The evaluation shall be limited to the conditions mentioned in subsection (b) of this section.

(e) Prior intemperate use or mental illness is relevant only so far as it may indicate current intemperate use or lack of fitness.

(f) No license shall be denied under this rule unless it is shown that the person seeking to obtain or retain the license poses a direct threat to the health and safety of patients/clients, their families or significant others or the public.

(g) With respect to chemical dependency in eligibility and disciplinary matters, the executive director is authorized to:

(1) review submissions from a movant, materials and information gathered or prepared by staff, and identify any deficiencies in file information necessary to determine the movant's request;

(2) close any eligibility file in which the movant has failed to respond to a request for information or to a proposal for denial of eligibility within 60 days thereof;

(3) approve eligibility, enter eligibility orders and approve renewals, without board ratification, when the evidence is clearly insufficient to prove a ground for denial of licensure; and

(4) propose conditional orders in eligibility, disciplinary and renewal matters for individuals who have experienced chemical/alcohol dependency within the past five years provided:

(A) the individual presents reliable and verifiable evidence of having functioned in a sober/abstinent manner for twelve consecutive months; and

(B) licensure limitations/stipulations and/or peer assistance program participation can be implemented which will ensure that patients and the public are protected until the individual has attained a five-year term of sobriety/abstinence.

(h) With respect to mental illness in eligibility, disciplinary, and renewal matters, the executive director is authorized to propose conditional orders for individuals who have experienced mental illness within the past five years provided:

(1) the individual presents reliable and verifiable evidence of having functioned in a manner consistent with the behaviors required of nurses under the Nursing Practice Act and Board rules for at least twelve consecutive months; and,

(2) licensure limitations/stipulations and/or peer assistance program participation can be implemented which will ensure that patients and the public are protected until the individual has attained a five-year term of controlled behavior and consistent compliance with the requirements of the Nursing Practice Act and Board rules.

(i) In renewal matters involving chemical dependency or mental illness, the executive director shall consider the following information from the preceeding renewal period:

(1) evidence of the licensee's safe practice;

(2) compliance with the NPA and Board rules; and

(3) written verification of compliance with any treatment.

(j) Upon receipt of items (i)(1)-(3) of this section, the executive director may renew the license.

§213.30. Declaratory Order of Eligibility for Licensure.

(a) An individual enrolled or planning to enroll in a basic nursing program who has reason to believe that he or she may be ineligible for licensure, may petition the Board for a declaratory order as to his or her eligibility.

(b) The individual must submit a petition on forms provided by the Board which includes:

(1) a statement by the individual indicating the reason(s) and basis of potential ineligibility;

(2) if the potential ineligibility is due to criminal conviction, any court documents including, but not limited to, any indictments, judgments, probation records and evidence of completion of probation, if applicable;

(3) if the potential ineligibility is due to mental illness, evidence of evaluation, including a prognosis, by a psychologist or psychiatrist, evidence of treatment, including any medication;

(4) if the potential ineligibility is due to chemical dependency including alcohol, evidence of evaluation and treatment, after care and support group attendance; and

(5) the required fee which is not refundable.

(c) An investigation of the petition and the individual's eligibility shall be conducted.

(d) The petitioning individual or the Board may amend the petition at any time before a final determination is made.

(e) If the executive director proposes to find the petitioning individual ineligible for licensure, the petitioner may obtain a hearing before an ALJ by making such a request in writing to the executive director. The hearing shall be conducted in accordance with §213.22 of this title (relating to Formal Proceedings) and the rules of the SOAH. When in conflict, the SOAH rules governing hearing procedure will prevail. The decision of the Board shall be rendered in accordance with §213.23 of this title (relating to Decision of the Board).

§217.11. Standards of Professional Nursing Practice. The responsibility of the Texas Board of Nurse Examiners (board) is to regulate the practice of professional nursing within the State of Texas. The purpose of defining standards of practice is to identify roles and responsibilities of the registered professional nurse (RN) in any health care setting. The standards for professional nursing practice shall establish a minimum acceptable level of professional nursing practice. The RN shall:

(1) know and conform to the Texas Nursing Practice Act and the board's rules and regulations as well as all federal, state, or local laws, rules or regulations affecting the RN's current area of nursing practice;

(2) use a systematic approach to provide individualized, goal-directed nursing care by:

(A) performing nursing assessments regarding the health status of the client;

(B) making nursing diagnoses which serve as the basis for the strategy of care;

(C) developing a plan of care based on the assessment and nursing diagnosis;

(D) implementing nursing care; and

(E) evaluating the client's responses to nursing interventions;

(3) know the rationale for and the effects of medications and treatments and shall correctly administer the same;

(4) accurately and completely report and document:

(A) the client's status including signs, symptoms and responses;

(B) nursing care rendered;

(C) physician, dentist or podiatrist orders;

(D) administration of medications, and treatments; and

(E) client response(s);

(F) contacts with other health care team members concerning significant events regarding client's status.

(5) implement measures to promote a safe environment for clients and others;

(6) respect the client's right to privacy by protecting confidential information unless obligated or allowed by law to disclose the information;

(7) promote and participate in client education and counseling based on health needs;

(8) ensure the verification of current Texas licensure and credentials of personnel for whom the RN is administratively responsible, when acting in the role of nurse administrator;

(9) make assignments to others that take into consideration client safety and which are commensurate with the educational preparation, experience, knowledge, and physical and emotional ability of the persons to whom the assignments are made;

(10) delegate nursing tasks in compliance with §218.3, relating to general criteria for delegation and §218.4, relating to supervision;

(11) supervise nursing care provided by others for whom the RN is administratively or professionally responsible;

(12) accept only those nursing assignments that take into consideration patient safety and that are commensurate with one's own educational preparation, experience, knowledge and physical and emotional ability;

(13) obtain instruction and supervision as necessary when implementing nursing procedures or practices;

(14) notify the appropriate supervisor when leaving a nursing assignment;

(15) know, recognize, and maintain professional boundaries of the nurse-client relationship;

(16) report unsafe nursing practice by an RN which a nurse has reasonable cause to suspect has exposed or is likely to expose a client unnecessarily to risk of harm as a result of failing to provide client care that conforms to the minimum standards of acceptable and prevailing professional practice. The RN should report unsafe practice conditions or other practitioners to the appropriate authority or licensing board;

(17) provide, without discrimination, nursing services regardless of the age, disability, economic status, gender, national origin, race, religion, or health problems of the client served;

(18) institute appropriate nursing intervention which might be required to stabilize a client's condition and/or prevent complications;

(19) clarify any order or treatment regimen that the nurse has reason to believe is inaccurate, non-efficacious or contraindicated by consulting with the appropriate licensed practitioner and notifying the ordering practitioner when the RN makes the decision not to administer the medication or treatment;

(20) implement measures to prevent exposure to infectious pathogens and communicable conditions;

(21) collaborate with the client, members of the health care team and, when appropriate, the client's significant other(s) in the interest of the client's health care;

(22) consult with, utilize and make referrals to appropriate community agencies and health care resources to provide continuity of care;

(23) be responsible for one's own continuing competence in nursing practice and individual professional growth.

§217.12. Unprofessional Conduct. The unprofessional conduct rules are intended to protect clients and the public from incompetent, unethical, or illegal conduct of licensees. The purpose of these rules is to identify unprofessional or dishonorable behaviors of the registered professional nurse (RN) which the board believes are likely to deceive, defraud or injure clients or the public. These behaviors include but are not limited to:

- (1) failing to know and conform to the Texas Nursing Practice Act and the board's rules and regulations as well as all federal, state, or local laws, rules or regulations affecting the RN's current area of nursing practice;
- (2) failing to assess and evaluate a client's status or failing to institute nursing interventions which might be required to stabilize a client's condition or prevent complications;
- (3) failing to administer medications or treatments or both in a responsible manner;
- (4) failing to accurately and completely report and document:
 - (A) the client's status including signs, symptoms and responses;
 - (B) nursing care rendered;
 - (C) physician, dentist or podiatrist orders;
 - (D) administration of medications, and treatments; and
 - (E) client response(s);
 - (F) contacts with other health care team members concerning significant events regarding client's status.

- (5) failing to implement measures to promote a safe environment for clients and others (e.g., bed rails up, universal precautions);
- (6) disclosing confidential information or knowledge concerning the client except where required or allowed by law;
- (7) failing to provide client education and counseling based on client health care needs;
- (8) failing to ensure the verification the current Texas licensure and credentials of personnel for whom he/she is administratively responsible, when acting in the role of nurse administrator;
- (9) assigning nursing care in a manner that fails to take client safety into consideration or assigning nursing care functions to others who lack the educational preparation, experience, knowledge or physical and emotional ability to perform these functions;
- (10) delegating nursing tasks not in compliance with §218.3 relating to general criteria for delegation and §218.4 relating to supervision;
- (11) failing to supervise the delivery of nursing care for which the RN is administratively or professionally responsible;
- (12) accepting an assignment when one's physical or emotional condition prevents the safe and effective delivery of care or accepting an assignment that does not take into consideration patient safety or for which one lacks the educational preparation, experience, knowledge or ability;
- (13) failing to obtain instruction or supervision when implementing nursing procedures or practices for which one lacks the educational preparation, ability, knowledge and/or experience;
- (14) leaving a nursing assignment without notifying one's appropriate supervisor;
- (15) violating professional boundaries of the nurse/client relationship including but not limited to physical, sexual, emotional or financial exploitation of the client or the client's significant other(s);
- (16) causing or permitting physical, emotional or verbal abuse or injury or neglect to the client or the public, or failing to report same to the employer, appropriate legal authority and/or licensing board;
- (17) failing to report to the board or to a board approved peer assistance program, if applicable, within a reasonable time of the occurrence, any violation or attempted violation of the Nursing Practice Act or duly promulgated rules, regulations or orders;
- (18) failing to follow the policy and procedure in place for the wastage of medications at the facility where the RN was employed or working at the time of the incident(s);
- (19) misappropriating, in connection with the practice of nursing, anything of value or benefit, including but not limited to, any property, real or personal of the client, employer, or any other person or entity, or failing to take precautions to prevent such misappropriation;
- (20) failing to make entries, destroying entries, and/or making false entries in records pertaining to care of clients;

(21) passing, or attempting to pass forged, altered, falsified or unauthorized prescription(s) by electronic, telephonic, written communication or any other means;

(22) providing information which was false, deceptive, or misleading in connection with the practice of professional nursing;

(23) failing to answer specific questions that would have affected the decision to license, employ, certify or otherwise utilize an RN;

(24) offering, giving, soliciting, or receiving or agreeing to receive, directly or indirectly, any fee or other consideration to or from a third party for the referral of a client in connection with the performance of professional services;

(25) failing to report the unauthorized practice of professional nursing;

(26) failing to repay a guaranteed student loan, as provided in Section 57.491 of the Texas Education Code.