



The Registered Nurse Population

Findings from the
March 2004

National Sample Survey of
Registered Nurses



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U.S. Department of Health and Human Services
Health Resources and Services Administration
Bureau of Health Professions

PREFACE

The Health Resources and Services Administration (HRSA) is the key Federal agency responsible for nursing workforce analysis and development in the United States. The Bureau of Health Professions (BHP) within HRSA provides national leadership to assure an adequate supply and distribution of qualified nursing personnel to meet the health needs of the Nation. This responsibility includes examination of the supply, composition, and distribution of nurses on the national and State levels in order to assure an adequate supply of qualified nursing personnel against requirements. For several decades, the Division of Nursing (DN) had primary responsibility for the assessment and examination of the Nation's nursing workforce. Since 2001, the analytical aspects of these efforts on the nursing workforce have resided in BHP's Evaluation and Analysis Branch (EAB). These activities of the EAB have included leadership and direction in the administration of the 2004 National Sample Survey of Registered Nurses (NSSRN), the reporting of findings from the Survey, and analytic support in short-term and long-term assessments of both the supply of nurses in the workforce and the requirements for nurses in the workforce. In pursuing these analytical efforts on the nursing workforce, BHP has worked with other agencies within the Federal Government, as well as with various State agencies and private nursing organizations, in the development of methods for the study and acquisition of data on the RN population.

The NSSRN is the Nation's most extensive and comprehensive source of statistics on all individuals with active registered nurse licenses to practice nursing in the United States whether or not they are employed in nursing. It provides information on the number of registered nurses, their educational background and practice specialty areas, their employment settings, position levels, job satisfaction and salaries. It also provides information on their geographic distribution and personal characteristics including gender, racial/ethnic background, age, and family status.

The development of a design for collecting data through national sample surveys of registered nurses originated in July 1975 in a contract with Westat, Inc. Subsequently, reports for seven studies, conducted in September 1977, November 1980 and 1984, and March 1988, 1992, 1996, and 2000 have been published and made available to people and organizations involved in health care planning and evaluation as well as to the public. This publication is the report of the eighth study, conducted in March 2004.

The 2004 NSSRN benefited from a wide range of professional nurse associations and organizations with large or diverse memberships of individual RNs that endorsed the study and encouraged their members to participate in it. The organizations included the American Academy of Nurse Practitioners, American Association of Critical-Care Nurses, American Association of Nurse Anesthetists, American Nurses Association, American College of Nurse-Midwives, Asian American Pacific Islander Nursing Association, Association of Perioperative Registered Nurses, Association of Women's Health Obstetric and Neonatal Nurses, Emergency Nurses Association, National Alaska Native/American Indian Nurses Association, National Association of Hispanic Nurses, National Black Nurses Association, and the National Council of State Boards of Nursing.

The 2004 NSSRN survey application, including survey administration, data collection, and reporting, was carried out by The Gallup Organization through a contract with the U.S. Department of Health and Human Services (USDHHS), HRSA, and administered by the EAB. Under a subcontract with The Gallup Organization, Insight Policy Research, Inc. led the data analysis, sample design, and the development and writing of the final report. Funding for the 2004 NSSRN was provided by the Division of Nursing. EAB staff were responsible for overseeing the study (Dr. Christine Hager, Steve Tise, Louis A. Kuta, William Spencer, and Marshall Fritz). In addition, other HRSA staff including, Dr. Denise Geolot, Donna English, Dr. Annette Debisette, Dr. Joan Weiss, and other members of their staff in the Division of Nursing provided guidance on nursing education and practice during the review of the questionnaire drafts, the interpretation of the raw response data, and the preparation of

the Findings Report. Members of the Interagency Collaborative on Nursing Statistics (ICONS) also reviewed the questionnaire draft and offered suggestions prior to finalization. The report was authored by Darby Miller Steiger of the Gallup Organization and Sara Bausch, Bryan Johnson, and Dr. Anne Peterson of Insight Policy Research. Zac Arens of the Gallup Organization programmed and summarized the data into tables. HRSA's BHPr is pleased to make this important information on the Nation's RNs population available to the public through this report.

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INTRODUCTION

The Health Resources and Services Administration (HRSA) is the key Federal agency responsible for nursing workforce analysis and development in the United States. The Bureau of Health Professions (BHP) within HRSA provides national leadership to assure an adequate supply and distribution of qualified nursing personnel to meet the health needs of the Nation. This responsibility includes examination of the supply, composition, and distribution of nurses on the National and State levels in order to assure an adequate supply of qualified nursing personnel against requirements. For several decades, the Division of Nursing (DN) had primary responsibility for the assessment and examination of the Nation's nursing workforce. Since 2001, the analytical aspects of these efforts on the nursing workforce have resided in BHP's Evaluation and Analysis Branch (EAB). These activities of the EAB have included leadership and direction in the administration of the 2004 National Sample Survey of Registered Nurses (NSSRN), the reporting of findings from the Survey, and analytic support in short-term and long-term assessments of both the supply of nurses in the workforce and the requirements for nurses in the workforce. In pursuing these analytical efforts on the nursing workforce, BHP has worked with other agencies within the Federal Government, as well as with various State agencies and private nursing organizations, in the development of methods for the study and acquisition of data on the RN population.

EARLY REGISTERED NURSE WORKFORCE STUDIES

National studies to determine the number and characteristics of the Nation's registered nurses were initiated in 1949 when the American Nurses Association (ANA) conducted the first Inventory of Registered Nurses¹. Data were collected through postcard questionnaires mailed by the licensing entity in the States and territories that require renewal of registration to each registrant on record at the time of the study. In Maryland and Ohio, where renewal and registration was not required, questionnaires were distributed through State nurses' associations and employing agencies. About 62 percent of all questionnaires sent to nurses by the States were returned. The number of nurses who had licenses to practice in 1949 was estimated by eliminating duplication resulting from nurses having licenses in more than one State, and accounting for those nurses who did not respond to the survey.²

The ANA conducted a similar study in 1951, but decided to mail the questionnaires with the license renewal notices to RNs in each State. About 71 percent of the questionnaires were returned. This change in data collection methodology improved the response rate but lengthened the data collection period because of variation in renewal dates from State to State. The number of nurses who had licenses to practice in 1951 was estimated using the same procedures used in the 1949 inventory: elimination of duplication due to RN licensure in more than one State, and accounting for nonrespondents to the inventory.

In the mid-1950s, the ANA promoted the inclusion of a uniform set of questions about RNs' characteristics on each State's licensing application form rather than using a postcard or a separate questionnaire. An Inventory of Registered Nurses was initiated in 1956 using this data collection process. The length of time it took to include the questions in the licensing process and the limited funds available

for compiling and analyzing the data resulted in an extended time frame for both the data collection and analysis. The actual data summary for the 1956-1958 inventory was published in 1963³.

The ANA conducted four subsequent inventories of registered nurses^{4,5,6,7}. HRSA was instrumental in providing Federal financial support to the ANA to defray the costs of obtaining and processing the data for these studies. This support ensured a more centralized approach to data collection and processing as well as greater use of automated procedures to summarize the data.

DEVELOPMENT OF NSSRN METHODOLOGY

Originally, the nursing inventories were based on data collection at the State level using the licensing mechanism as an opportune time for asking registered nurses to complete the questionnaires. This data collection process, although logical and potentially comprehensive, encompassed some serious limitations. The size of the questionnaire had to be limited and follow-up on forms not returned, missing data, or ambiguous data were not part of the data collection process. Moreover, the wide variation in renewal dates from State to State led to a lengthy data collection period. It took as long as 3 years to present a national picture through analysis of data from all States.

The need for more comprehensive data on the nursing workforce, concerns about the limitations of the nursing inventories, and the enactment of Public Law (P.L.) 94-63 were the impetus for the development of the present methodology for collecting data on the nursing workforce. Section 951 of P.L. 94-63 called for the collection of information on a continuous basis regarding the current and future supply, distribution, and educational requirements for nurses, nationally and within each State. The data acquisition requirements listed in the law were very specific. For example, the law required data on the number of nurses with advanced education or graduate degrees by specialty, and data on average rates of compensation by type of employment and location of practice.⁸

In the mid 1970s, the Department of Health, Education and Welfare (DHEW) contracted with Westat Inc., a survey research firm with expertise in complex survey design, to develop a comprehensive survey plan. Westat worked with the ANA and the DN to develop a survey plan to implement the data element requirements in section 951 of P.L. 94-63: 1) to provide baseline data for the development of estimates and projections regarding the registered nurse population both nationally and for each State; and 2) to provide data on nurse characteristics needed for program planning, administration, monitoring, and evaluation by Congress, State legislators, and Federal and State agencies and associations.⁹ A complex sample survey was developed using licensure listings from each of the 50 States and the District of Columbia. A single questionnaire was designed and data collection and data follow-up processes were established. The data collection was to be done by mail with telephone follow-up for nonrespondents.

The first study using this survey methodology was conducted in September 1977, under contract to the ANA with a subcontract to Westat. During the conduct of that study, the design and data processing procedures were refined¹⁰. Subsequent studies using the same design were carried out in 1980, 1984, 1988, 1992, 1996 and 2000^{11, 12,13,14,15,16}.

THE 2004 NATIONAL SAMPLE SURVEY OF REGISTERED NURSES (NSSRN)

The eighth sample survey, the 2004 NSSRN, collected data on the actively licensed registered nurse population as of March 2004. NCHWA was responsible for the administration of this study. The Gallup Organization, under a contract with the HRSA, carried out the sample selection, data collection, and processing of this study. This report summarizes results of the study.

As in previous NSSRN studies, the eighth sample survey instrument maintains the specific data requirements of section 951 of P.L. 94-63 and provides the necessary base data for developing projections of the supply, distribution, and educational requirements for registered nurses. It also contains some new areas of inquiry designed to provide information on issues of current importance. However, as in prior studies, the survey instrument was designed to ensure that the data collected from study to study provides sufficient continuity so that an evaluation can be made of trends in nursing.

As in prior years, samples were drawn for each State's list of active licensees, because no single unduplicated list of licensed registered nurses exists in this country. Approximately 15 percent of RNs are estimated to have more than one RN license. Disproportionate sampling from State to State was used to provide statistically improved estimates of the number of individual RNs in each State, while maintaining the overall sample size within reasonable bounds. Larger proportions of licensees were sampled in the States with fewer registrants than in States with more registrants. A weighting procedure was used to account for duplication of licenses from State to State so that estimates could be developed of the number of *individuals* who hold active licenses to practice as RNs, regardless of the number of State licenses they hold. Based on March 2004 data, over 3,252,548 licenses to practice as registered nurses in the United States were held by an estimated 2,915,309 nurses.¹

The initial sample selection for this survey consisted of 56,917 licenses, of which 4,250 were identified as duplicates for nurses licensed in other States. After taking account of duplications and frame errors, a total of 50,691 RNs were estimated to be eligible to participate in NSSRN, with a total of 35,724 individual RNs responding to the survey request, for a final response rate of 70.47 percent. This report primarily presents data and analysis of those RNs who were licensed in nursing as of March 2004, including those employed in nursing or if not employed in nursing, resided in the United States—35,635 of the 35,724 respondents. Applying weights to these responses², there are an estimated 2,909,357 employed or living in the United States, an increase of 7.9 percent or 212,817 above the 2,696,540 licensed RNs estimated in 2000.

To ensure an adequate response to the survey, four mailings were sent out, and these were followed by telephone interviews with those who did not respond to the mailing. Unlike previous iterations of the NSSRN, the packages for the third mailing were shipped via USPS Priority Mail and a Web version of the survey was provided to respondents in an attempt to improve responsiveness. In addition to the efforts to reduce the nonresponse to the survey, careful screening of responses received was undertaken to minimize ambiguous responses and nonresponse to individual questions. Responses were accepted through November 2004.

Questions on the survey instrument were prioritized as to their importance to the overall registered nurse database, and the degree to which a question might be sensitive in nature. If high priority items were skipped or answered improperly, respondents were called to clarify the response made or to obtain the missing information. When a call was made concerning a high priority question, the respondent also was queried about other ambiguous or missing items regardless of their priority order.

¹ National estimate of the total number of RNs (RN population) is between 2,897,467 and 2,921,467 RNs at the 95 percent confidence level, a margin of error of +/- 0.7 percent. For the purposes of this document, the weighted estimates are stated without reporting the sampling errors associated with each characteristic.

² For specific information regarding the sampling estimation and weighting methodologies, see 2004 National Sample Survey of Registered Nurses: Technical Report.

All respondents to the survey were classified according to whether they were employed in nursing as of March 2004, and also according to State of residence and/or employment. In addition to the identification and follow-up of missing data, open-ended responses written in the “other-specify” categories within the questions were reviewed and reclassified to already stated categories, if possible. The remaining responses were reviewed to determine whether there was a sufficient number of a particular response to warrant a new category.

ORGANIZATION OF THE REPORT

The substantial database resulting from the 2004 study may be used for many different types of analyses concerning a variety of subjects. This report presents an overview of the personal, professional, and employment characteristics of the 2.9 million registered nurses residing in the United States as of March 2004. A summary of the findings from the study and comparisons to the findings of prior studies in this series are presented in Chapters II and III. Appendix A contains a series of tables summarizing the data. A review of the survey methodology and the statistical techniques used in sample selection, response weighting, and identification of sampling errors are found in Appendix B. The survey instrument is included in Appendix C.

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CHAPTER II

THE REGISTERED NURSE POPULATION 1980 – 2004

REGISTERED NURSES IN THE U.S.

The 2004 National Sample Survey of Registered Nurses (NSSRN) provides information about the current population of registered nurses (RNs³) with an active license to practice in one or more of the 50 States and the District of Columbia. The data in this report focus on the 2,909,357 RNs located in the United States. **RNs are considered to be located in the United States if they were employed in nursing in one of the 50 States and the District of Columbia or, if not employed in nursing, were residents of the United States. Those RNs with licenses from the United States Territories are not included in this population of RNs from the United States.** This study has been conducted every 4 years since 1980 and examines trends over time in the Nation's largest health profession.

The estimated **RN population** increased by 1,246,975 between November 1980 and March 2004. In 2004, 2,909,357⁴ persons were estimated to have licenses to practice as RNs in this country, an increase of 75.0 percent since 1980. From 1992 to 1996, there was a 14.2 percent increase in the RN population. After a record slow down in growth of the RN population between 1996 and 2000 (5.4 percent), the RN population bounced back to a more robust increase of 7.9 percent between 2000 and 2004. The years between 1996 and 2000 had marked the lowest growth in the RN population over the span of the NSSRN study, increasing only 1.3 percent each year compared with average annual increases of 2-3 percent in earlier years (See Chart 1). For the past 4 years, the RN population grew just under 2.0 percent per year.

In the last 24 years, the number of RNs **employed in nursing** increased 90.2 percent (from 1,272,851 in 1980 to 2,421,351 in 2004, with an estimated increase of 219,538 RNs just from 2000 to 2004). In 2004, 83.2 percent of those with active licenses were employed in nursing, an increase of 1.6 percent from the 2000 estimate of 81.7 percent. The 2004 employment percentage marks the highest employment rate

³ The term "nurse" encompasses professionals concerned with health care at a number of skill levels, such as registered nurse, advanced practice nurse, and licensed practical nurse/vocational nurse. The NSSRN population, however, consists of *all registered nurses who are currently eligible to practice as an RN in the United States*. This *includes* RNs who have received a specialty license or have been certified by a State agency as an advanced practice nurse (APN) such as nurse practitioner, certified nurse midwife, certified registered nurse anesthetist, or clinical nursing specialist, but *excludes* licensed practical nurses (LPNs)/licensed vocational nurses (LVNs).

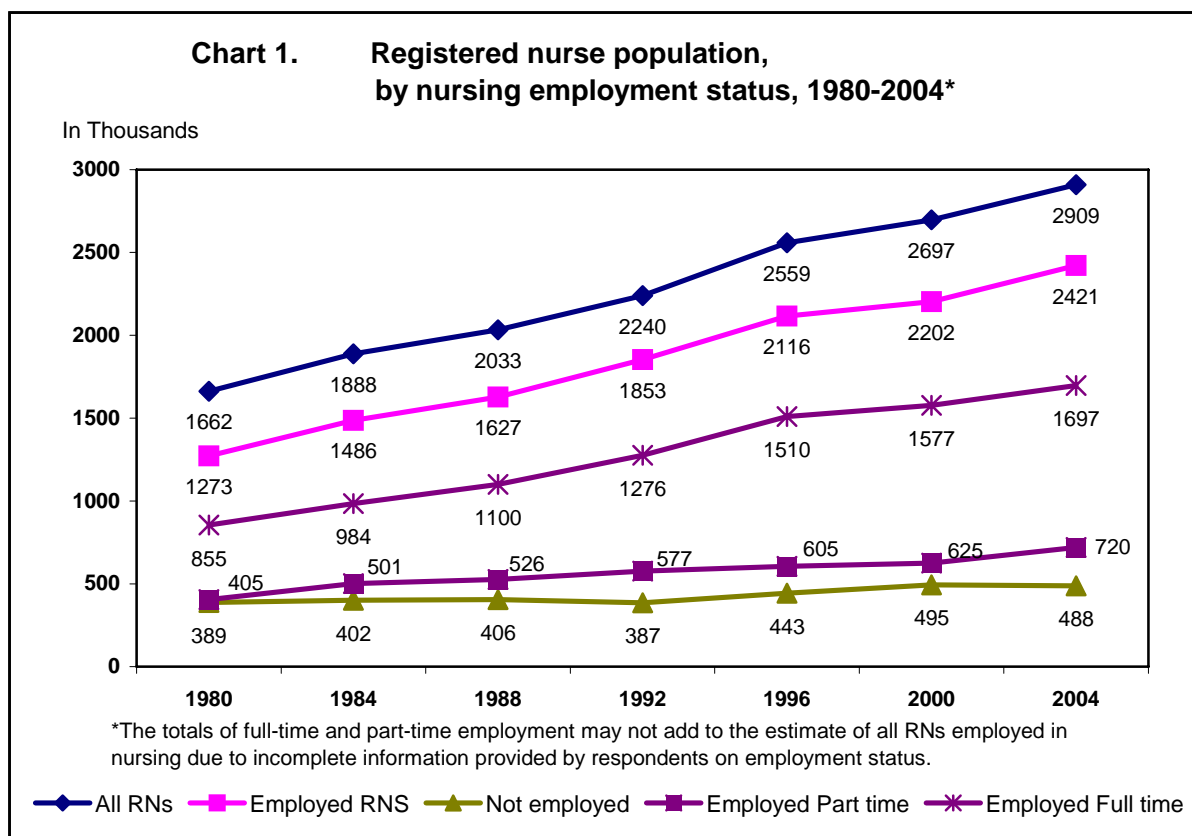
⁴ National estimate of the total number of RNs (RN population) is between 2,897,467 and 2,921,467 RNs at the 95 percent confidence level, a margin of error of +/- 0.7 percent. For the purposes of this document, the weighted estimates are stated without reporting the sampling errors associated with each characteristic. Refer to Appendix B for the standard errors for other variables as well as a general methodology for estimating standard errors overall.

since the start of the study in 1980, eclipsing the previous peak of 82.7 percent in both 1996 and 1992. From 2000 to 2004, however, the number of RNs employed in nursing grew by an average annual rate of increase of about 2.4 percent. In contrast, from 1996 to 2000 there was only a 1.0 percent average annual rate of increase in employed RNs. Larger annual average rates of increases in RN employment rates (3.3 percent), occurred from 1988 to 1996. From 1984 to 1988, the average annual rate of increase in RN employment rates was 2.3 percent. From 1980 to 1984, the average annual rate of increase in RN employment rates was the highest, at 3.9 percent.

The total number of RNs **employed full-time** in nursing nearly doubled from 854,813 to 1,696,807 between 1980 and 2004. From 2000 to 2004, the percentage of RNs employed full-time in nursing increased by 7.6 percent (or 120,132 RNs), from 1,576,675 to 1,696,807. This increase represents a significant improvement over the 1996 to 2000 increase of 4.4 percent, the lowest increase over the duration of the study. However, the 2000 to 2004 increase still falls in lower than the average 4-year rate of increase seen from 1980 through 1996 (15.3 percent). From 2000 to 2004 there was a 15.2 percent increase in the number of nurses **employed part-time** (an estimated increase of 95,144 part-time nurses, leading to an overall increase from 28.4 to 29.7 percent in the percentage of employed RNs who work part-time in their principal employment in nursing).

Over the last seven surveys, the numbers, percents, or rates of change of licensed **RNs who were not employed in nursing** vacillated somewhat across each 4-year period. The number of RNs not employed in nursing, however, changed little from 1980 to 1992 while the total number of RNs grew substantially over this period. Between 1992 and 2004, the number of RNs not employed in nursing increased about 26.2 percent, from 386,791 to 488,006. In 2004, 16.8 percent of all RNs were not employed in nursing, with the number of RNs not employed in nursing decreasing by 1.4 percent from 2000 to 2004. From a high of 23.4 percent in 1980, this 2004 rate of being not employed in nursing marks the lowest percentage of licensed RNs not employed in nursing since the inception of the study.

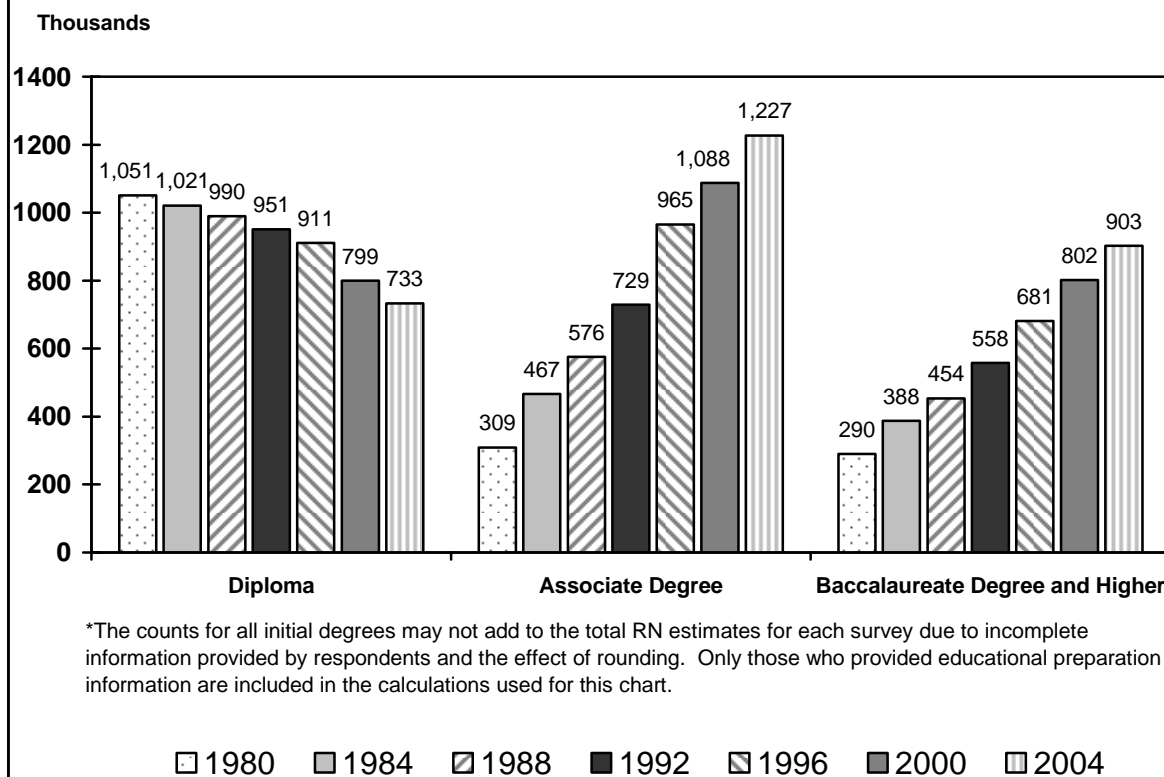
The 2004 finding breaks a pattern over the last two surveys. While the rates of increase from 1980 to 1988 of those not employed in nursing were low (totaling 4.5 percent), and there was a decrease of 4.7 percent from 1988 to 1992, the rates of increase were much higher from 1992 to 2000. From 1992 to 1996 the number of RNs not employed in nursing increased by 14.5 percent, and from 1996 to 2000 the number increased 11.7 percent. All of the survey statistics on nurses who are not in the workforce must be tempered against the unknown numbers who have not renewed their RN licenses for whatever reason and are not being surveyed under the NSSRN sample survey design. For example, some retired nurses maintain their licenses while others may have chosen not to renew their licenses.



EDUCATIONAL PREPARATION

One of the most substantial changes in the RN population over the past nearly quarter century has been in the type of program RNs enter to obtain their initial nursing education. Between 1980 and 2004, the percentage of nurses who received their initial nursing education in diploma programs decreased from 63.2 percent to 25.2 percent of the RN population (a net decrease of 317,284 nurses). During the same period, the percentage receiving their initial nursing education in associate degree programs increased from 18.6 percent to 42.2 percent of the RN population (a net increase of 918,640 nurses); and the percentage receiving initial nursing education in baccalaureate programs or higher degree programs increased from 17.4 percent to 31.0 percent of the RN population (a net increase of 613,039 nurses; see Chart 2).

Chart 2. Distribution of registered nurses according to initial nursing education, 1980-2004*



Between 2000 and 2004, there were similar increases between the percentage of RNs who received their initial nursing education in baccalaureate-and-higher programs (12.6 percent, from 801,811 RNs in 2000 to 902,625 RNs in 2004) and those who received their initial nursing education in associate degree programs (12.8 percent, from 1,087,602 RNs in 2000 to 1,227,256 RNs in 2004). From 1980 through 1996, the percentage of nurses who received their initial nursing education in associate degree programs increased at a faster rate than those who received their initial education in baccalaureate-and-higher programs. Between 1996 and 2000, however, there had been a reversal of the trend, when the percentage of nurses educated in baccalaureate-and-higher degree programs increased at a rate faster than those who received their initial nursing education in associate degree programs (increases of 17.3 percent and 12.7 percent respectively). Meanwhile, the percentage of nurses who received their initial nursing education in diploma programs declined steadily during the period from 1980 to 2004 from 63.2 percent to 25.2 percent (an estimated change from 1,050,661 RNs to 733,377 RNs). There was an 8.3 percent decline in RNs receiving their initial nursing education in diploma programs from 2000 to 2004 (from 799,354 RNs in 2000 to 733,377 RNs in 2004), the second largest decline in diploma-educated RNs since the inception of the NSSRN. It follows a decline of 12.2 percent between 1996 and 2000, the largest decline since the inception of the NSSRN. The number of new RNs prepared in diploma programs from 2000 to 2004 has continued its decline in recent years, now at an average rate of decline of about 2.0 percent per year.

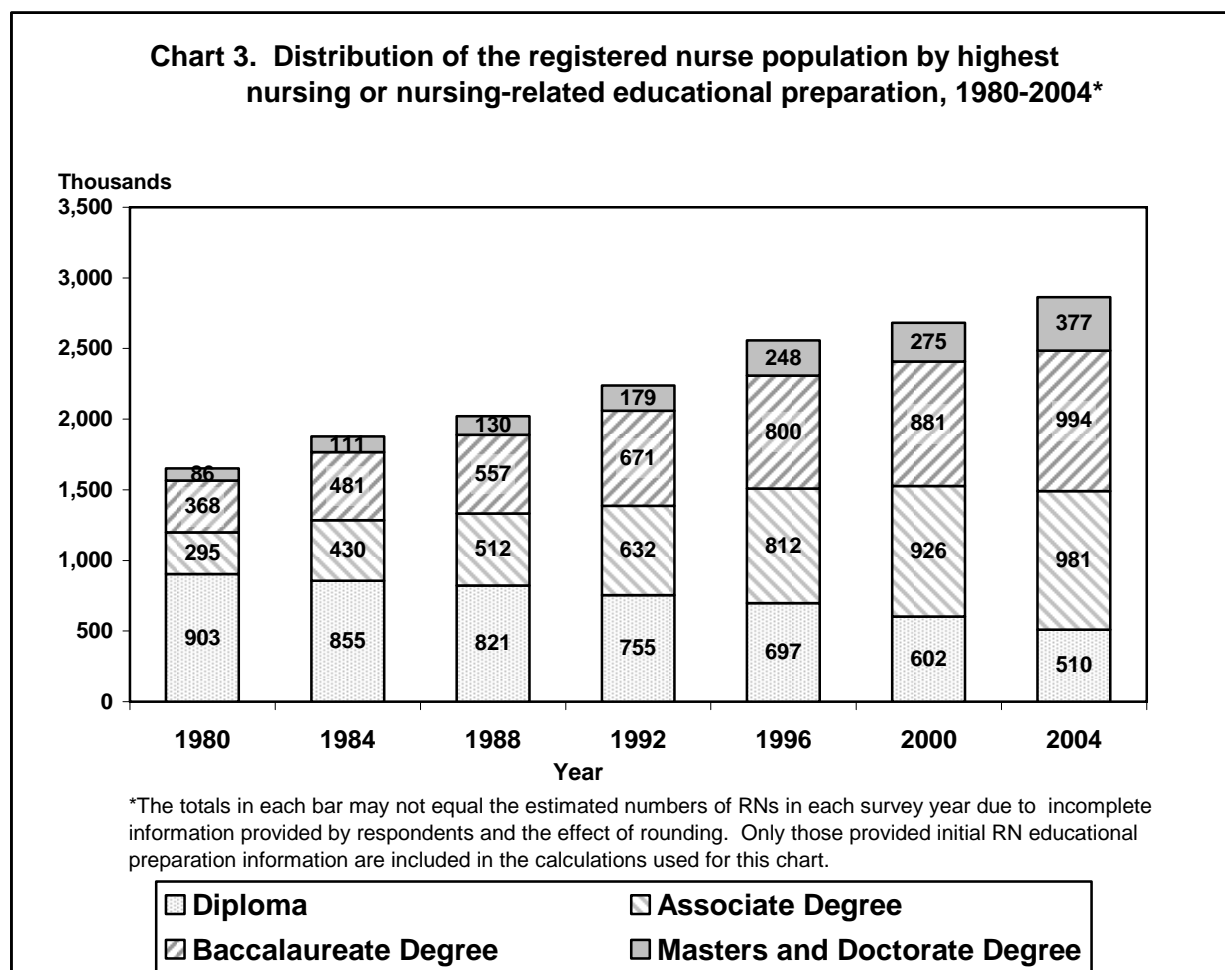
The distribution of RNs according to their highest nursing or nursing-related educational preparation, including any post-RN degree received, also changed substantially over the past 24 years.⁵ In 1980, the diploma was the highest nursing or nursing-related educational level of the majority of nurses (54.3 percent of all RNs). Since 1996, nurses with associate and baccalaureate degrees as their highest level of nursing or nursing-related education have had the largest presence among the RN population while the percent of nurses who hold only diploma degrees has continued to drop. While associate degrees have remained the largest entry program into nursing for many years, RNs with baccalaureate, master's, and doctorate degrees have increased their presence among the nurse population in recent years. As a result, even though associate degree programs have graduated large numbers of nurses in recent decades from their initial educational programs, the percent of the nurses having associate degrees as their highest level of nursing or nursing-related education decreased slightly since 2000.

In 2004, 33.7 percent of nurses (981,238 RNs) reported the associate degree as their highest level of nursing or nursing-related education, 34.2 (994,276) percent reported the baccalaureate degree as their highest level and 13.0 percent (376,901) reported a master's or doctoral degree as their highest level (see Chart 3). Only 17.5 percent of RNs (510,209) reported that the diploma degree was their highest nursing or nursing-related education. From 2000 to 2004, the percentage of RNs with associate degrees as their highest nursing or nursing-related education level decreased slightly, from 34.3 percent to 33.7 percent (although the number of RNs increased from 925,516 in 2000 to 981,238 in 2004). The numbers of nurses whose highest education was the associate degree has increased by 232 percent since 1980 from 295,318. From 2000 to 2004, the percentage of RNs whose highest nursing or nursing-related educational preparation was a baccalaureate degree increased from 32.7 percent to 34.2 percent (the number increased from 880,997 in 2000 to 994,276 in 2004). Overall, this is a 170 percent increase in baccalaureate education for RNs since 367,816 RNs in 1980. Many RNs initially educated in associate degree programs eventually receive their baccalaureate degree. In 2004, nearly 21 percent (20.9 percent) of RNs initially educated in associate degree programs received baccalaureate degrees and higher. This estimate represents an increase from 2000, when 15.5 percent of RNs initially educated in associate degree programs received baccalaureate degrees or higher. In 1996, 16.4 percent of RNs initially prepared in associate degree programs received baccalaureate degrees or higher, an increase from 11.8 percent of RNs initially prepared in associate degree programs in 1988 and 10.3 percent in 1984. In 1980, only 8.8 percent of RNs initially prepared in associate degree programs eventually received a higher degree.

The highest increase from 2000 to 2004 was for the number of RNs receiving nursing or nursing-related master's or doctorate degrees (an estimated increase of 101,833 or 37.0 percent) compared to a decrease of 91,495 nurses or 15.2 percent in the number of RNs whose highest nursing or nursing-related degree was a diploma. Over the entire period from 1980 to 2004, there was a 43.5 percent decrease (an estimated change from 903,131 to 510,209) in the number whose highest level of nursing or nursing-related

⁵ In the terminology used here to identify highest educational preparation, the following convention has been used in current and past NSSRN survey analyses. In addition to degrees strictly in nursing, additional formal academic education reported by the nurse that would enhance the nursing career is considered to be 'nursing-related' education. The term 'highest nursing or nursing-related' education is used here to denote the highest degree level, overall, among these academic degrees that are in nursing or which enhance a nursing career. For example, a nurse reporting a baccalaureate degree in nursing and a nursing-related master's degree in social work would be considered to have the highest nursing or nursing-related education at the master's level.

education was a diploma, while the number whose highest level of nursing or nursing-related education was a master's or doctorate increased by 339 percent (from 85,860 to 377,046). Similarly, from 1980 to 2004 the estimated number of RNs whose highest nursing or nursing-related educational preparation was a baccalaureate increased by 170 percent (from 367,816 to 994,276) and the estimated number whose highest nursing or nursing-related preparation was an associate's degree increased by 232 percent (from 295,318 to 981,238).

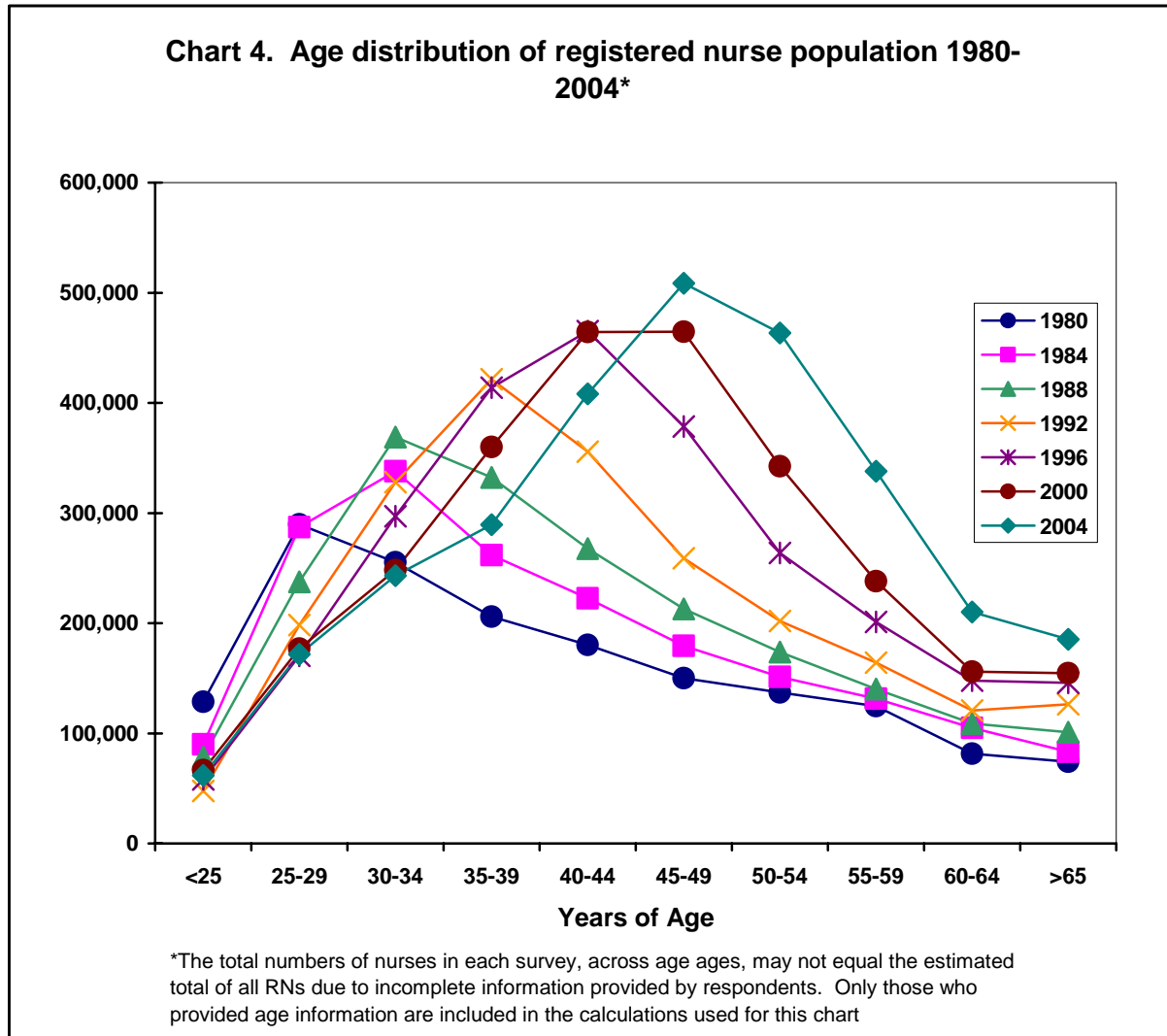


The number of RNs whose highest level of nursing or nursing-related educational preparation was either a master's or a doctorate degree has more than quadrupled since the inception of the NSSRN. In November 1980, RNs with nursing or nursing-related master's or doctorate degrees were estimated at 85,860, while in 2004, they numbered 376,901, an increase of 339 percent. Therefore, the proportion of RNs with master's or doctorate degrees has more than doubled from 5.2 percent of the RN population in 1980 to 13.0 percent of the RN population in 2004. The number of master's and doctorally-prepared nurses has also grown dramatically since 2000, increasing by 101,833 RNs from 275,068, when it was 10.2 percent of the RN population. This change represents an unprecedented 37 percent increase in master's and doctorally prepared nurses over the past 4 years.

AGE

The average age of the RN population continued to climb, increasing to 46.8 years of age in 2004, compared to 45.2 years in 2000, and 44.3 years in 1996.

In 1980, the majority (52.9 percent) of the RN population was under the age of 40, while in 2004 just above one quarter (26.3 percent) were under the age of 40 (See Chart 4). The major drop was among those under the age of 35. In 1980, 40.5 percent of RNs were under the age of 35 compared to just 16.4 percent in 2004. Similarly, in 1980, 25.1 percent of RNs (418,331) were under the age of 30, compared to only 8.0 percent of RNs (233,437) in 2004. The 2004 figure reflects a 4.0 percent decrease from the 243,239 younger RNs estimated under the age of 30 in 2000 (9.0 percent of all RNs). Meanwhile, the percent of nurses over 54 years of age increased to 25.2 percent in 2004, compared to 20.3 percent in 2000 and 16.9 percent in 1980.



GENDER

Men still comprise a very small percentage (5.8 percent) of the total RN population although their numbers have continued to grow. Of the estimated 2,909,357 RNs in the US, 168,181 are men. This represents a 14.5 percent increase over the 2000 NSSRN estimate, when 146,902 RNs were male. This also represents a 273.2 percent increase over 1980, when the number of men in the RN population was estimated at 45,060.

RACIAL/ETHNIC BACKGROUND

Comparisons of the racial/ethnic composition of the RN population in 2004 with previous years should be interpreted with caution. In accordance with Office of Management and Budget (OMB) guidelines issued in 1999, the question regarding racial and ethnic background changed in 2000. Unlike earlier NSSRN surveys, which included a single question and asked the respondent to choose only one racial/ethnic background, the 2000 and 2004 surveys collected this information in two questions. Respondents were asked to indicate whether their ethnic background was either Hispanic or Latino or not; they were also asked to identify all races that described them. The survey information was aggregated into categories similar to those reported in previous years, with one additional category that delineates Hispanic and non-Hispanic RNs who reported two or more races. In 2004, the number of nurses in the two or more races, non-Hispanic category, was estimated to be 41,244 or 1.4 percent of the RN population. In 2004, 7.5 percent of RNs (217,651) did not specify their combined racial/ethnic background, while in 2000 only 1.1 percent of RNs did not specify their combined racial/ethnic background.⁶

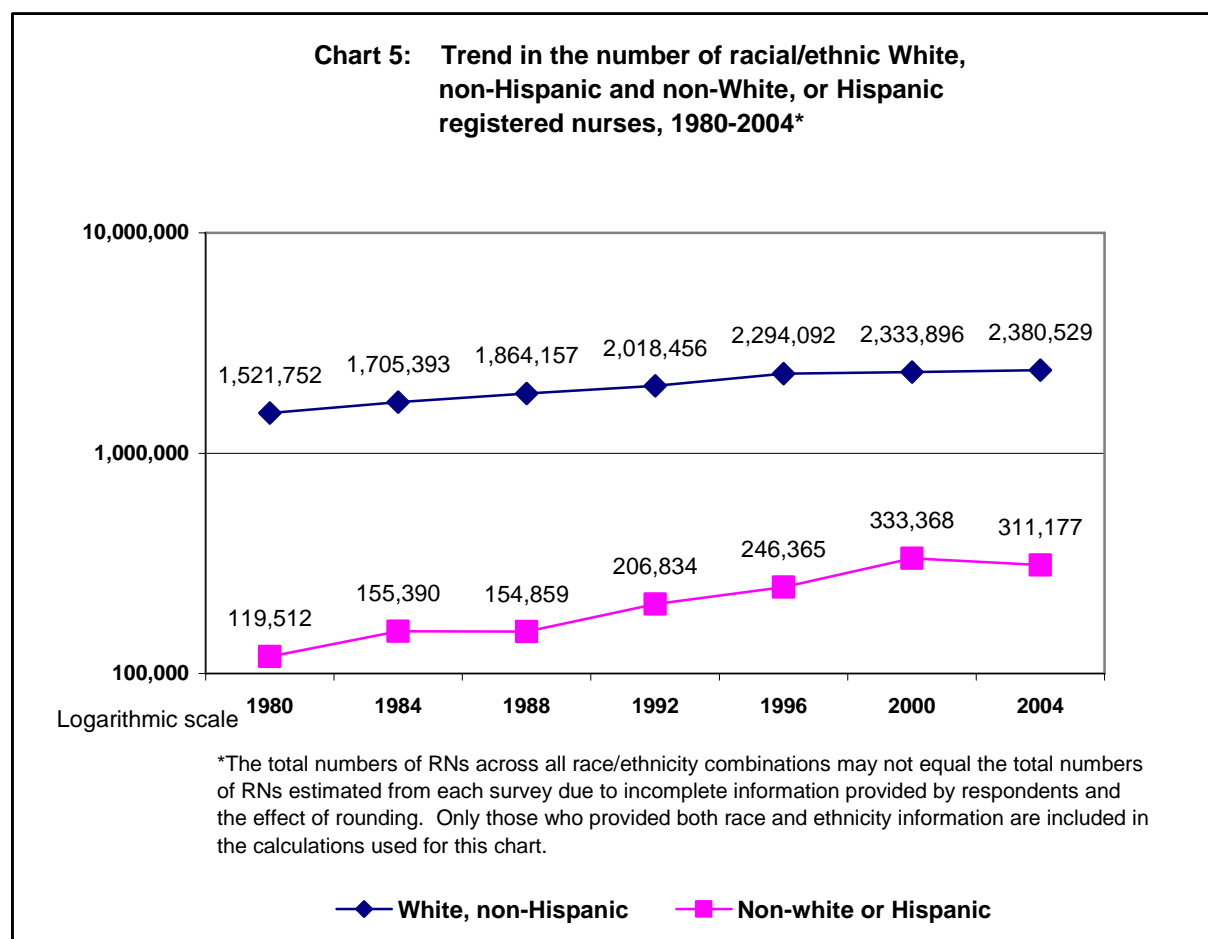
The number of nurses identifying their combined racial/ethnic background as one or more non-white groups, Hispanic, or Latino numbered 311,177 (10.7 percent) in 2004. This change is a decrease of 22,190 RNs from 2000, but nearly triple the number of non-white, Hispanic, or Latino nurses in 1980 (See Chart 5). In 2000, 12.4 percent of all RNs (333,368) came from one or more of the identified racial and ethnic non-white, Hispanic, or Latino groups. It must be noted that this apparent decline may be a result of an increase in the proportion of RNs who did not completely specify their combined racial or ethnic background.⁷

In the past, non-White, Hispanic, or Latino RNs have grown at a greater rate than white, non-Hispanic RNs for all of the years from 1980-2000, except the period from 1984-1988. These growth rates were particularly pronounced between 1996 and 2000, when the number of non-white, Hispanic, or Latino RNs increased about 35.3 percent while the number of white, non-Hispanic RNs increased by 1.7 percent. Most of the increase in the RN population between 1996 and 2000 was a result of the growth in the non-white or Hispanic or Latino nurse population (which increased by 87,003 RNs). However, because the population of white, non-Hispanic nurses is almost 7 times larger than the population of non-white, Hispanic, or Latino nurses, even small percentage changes in the non-white, Hispanic, or Latino nurse

⁶ Of the 217,651 RNs with missing values for race or ethnicity, 27.0 percent (58,859 RNs) did not specify either race or ethnicity, 13.9 percent (30,147) specified ethnicity but not race, and 52.1 percent (128,645) specified race but not ethnicity. Fifty-one percent of those who specified ethnicity but not race (15,231) indicated they are Hispanic or Latino. Of the estimated 128,645 who specified race but not ethnicity, 78.2 percent are White and 21.8 percent (28,067) are racial minorities. Of these registered nurses who specified race but not ethnicity, 56.3 percent are Black or African-American, 4.6 percent are American Indian or Alaska Native, 29.3 percent are Asian or Other Pacific Islander, and the remaining registered nurses checked two or more races. Therefore, a total of 354,475 (12.2 percent of the RN population) can be considered minority by race and/or ethnicity. However, for the purposes of clarity and consistency in this narrative report on minority comparison with White non-Hispanic RNs, only RNs with both race and ethnicity provided are generally being compared in the text, charts, and tables.

⁷ This change reflects, in part, a change in the data retrieval practices for missing variables. In previous NSSRN administrations, missing data were retrieved via a process of re-contacting the respondent by telephone. The 2004 survey limited this practice to certain critical missing variables, not including race.

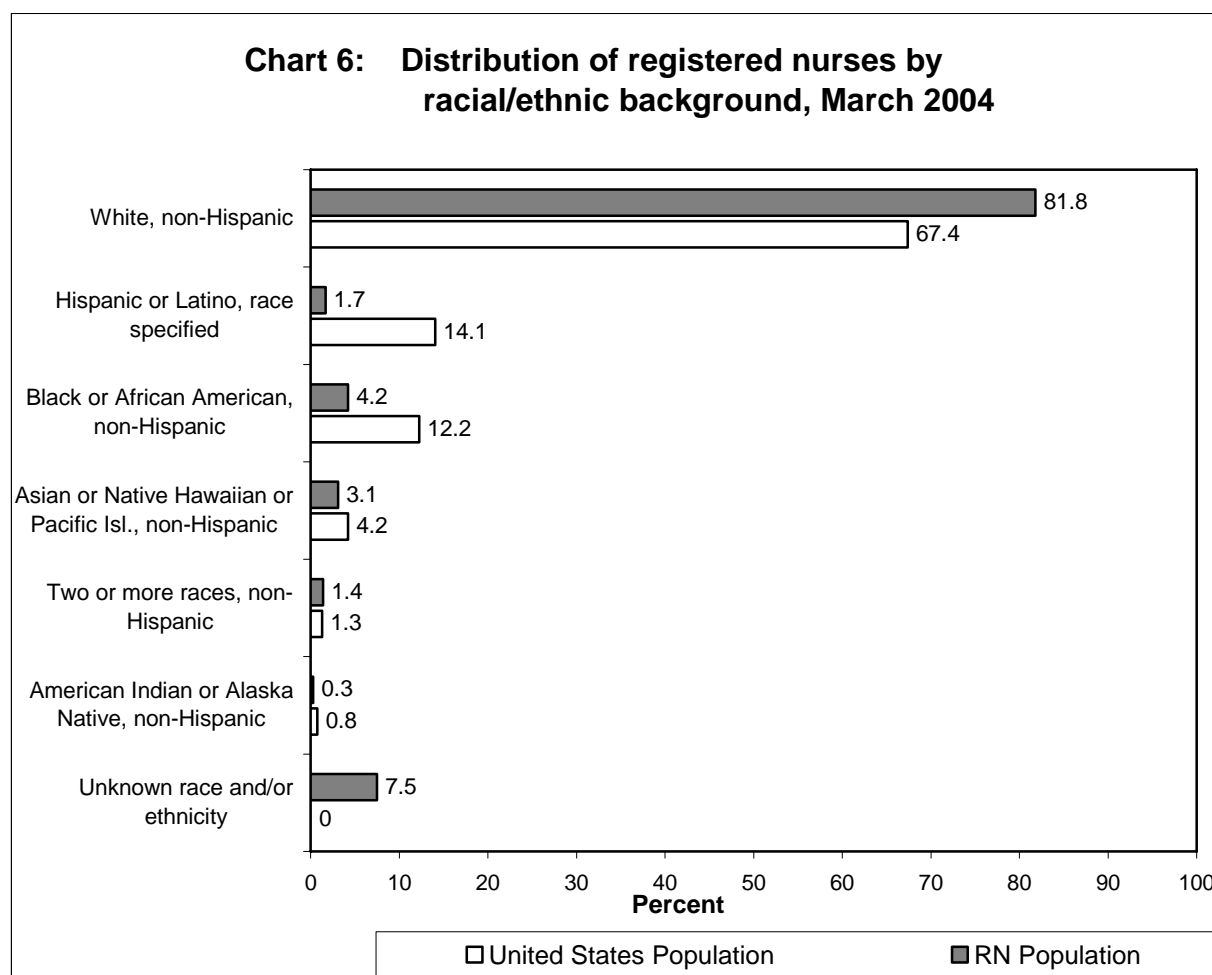
population involve a much larger volume of nurses, and masks the growing presence of non-White, Hispanic, or Latino RNs in the population.



The racial and ethnic groups comprising the non-white or Hispanic or Latino RN population differ in the rates at which their numbers have increased over the past 24 years. The number of nurses from non-Hispanic Asian or Other Pacific Islander backgrounds showed the highest relative increase at 167.8 percent from 33,600 RNs in 1980 to 89,977 RNs in 2004. The number of Hispanic or Latino RNs increased by 203.8 percent, from 20,816 in 1980 to 63,240 in 2004 (including 15,231 who failed to specify any race in 2004). The number of RNs reporting American Indian or Alaska Native non-Hispanic backgrounds increased by 122.5 percent from 4,249 in 1980 to 9,453 in 2004. The increase for Black or African American non-Hispanic RNs over the same period is an estimated 101.3 percent (from 60,845 in 1980 to 122,495 in 2004). Note that despite the impressive growth rates, the actual numbers of non-white, Hispanic, or Latino nurses remain relatively small.

The representation of identified non-White, Hispanic, or Latino nurses among the total nurse population increased from 7.2 percent in 1980 to at least 12.2 percent in 2004, after accounting for those who gave responses in 2004 where either the provided race or ethnicity indicated a minority. Despite these increases, the diversity of the RN population remains far less than that of the general United States

population, where 32.6 percent of the United States population identified themselves as non-White, Hispanic, or Latino in 2004⁸ (see Chart 6).



Hispanic or Latino RNs still remain the most underrepresented group of nurses when compared with the representation in the United States population. After adjusting for those Hispanic or Latino RNs who provided no response to the question on race, only 2.2 percent of the RN population are Hispanic or Latino nurses, although Hispanics or Latinos comprise 14.1 percent of the general population. Note however, that of the 7.5 percent of respondents who did not specify one or both of race and ethnicity, 6.4 percent of respondents were of unknown ethnicity in 2004.

⁸See U.S. Census Bureau Statistical Abstract of the United States, 2006, Resident Population by Sex, Race, and Hispanic Origin Status: 2000 to 2004, Table 13, January 4, 2006, at <http://www.census.gov/prod/2005pubs/06statab/pop.pdf>. Census reports that, of the 293,655,000 in the U.S. population for 2004, 197,841,000 are of White race, only, and non-Hispanic. Thus, while 67.4 percent of the U.S. population are white, non-Hispanic, 32.6 percent are non-White or Hispanic.

FAMILY STATUS

In 2004, 70.5 percent of all RNs were married; 18.1 percent were widowed, divorced or separated; and 9.2 percent were never married. Roughly 42.5 percent of all RNs had children under the age of 18 living in the household, including 14.8 percent who had children less than 6 years of age living in the household. Over half of all RNs, 54.5 percent, had no children under the age of 18 living in the household. The remaining 3.1 percent did not report any information on the presence of children in the household (see Appendix A, Table 6).

Nearly 16 percent (15.9) of all RNs were caring for other adults in their home, and 15.5 percent were caring for other adults living elsewhere (see Appendix A, Table 7). The majority (52.1 percent) of RNs have children and/or other adults at home. Of these RNs and allowing for multiple responses, 28.3 percent have children under age 6 at home, 65.2 percent have children of ages 6 to 18 at home, and 30.6 percent have other adults at home. An additional 14.8 percent of these nurses caring for others at home also have other dependents who do not live at home.

EMPLOYMENT SETTINGS

Substantial changes in the health care delivery system over the past two decades have had major effects on the settings in which nurses are employed. Five major employment settings were identified for RNs: hospitals, nursing homes and extended care facilities, community and public health settings, nursing and other health education, and ambulatory care settings. Community and public health settings include: State and local health departments, visiting nursing services and other health agencies, community health centers, student health services, occupational services and school health. These settings continue to be the major employment settings for nurses, although there have been substantial shifts in the mix since 1980 (see Chart 7). Every NSSRN survey since 1980 has revised the questionnaire and expanded the choices available to nurse respondents for identifying the types of facilities, institutions and service delivery systems in which they were employed. Despite these data collection changes, major employment sectors are sufficiently distinct to allow adjustments in the data in order to analyze trends in the employment settings of nurses over the past 24 years.

Results from the 2004 survey indicate a slight trend away from the hospital as the setting for the principal nursing position, although changes in the structure of hospitals (e.g., more specialty outpatient clinics) may explain some of the change. Hospitals remain the major employer of nurses, although the number of nurses employed in other sectors has increased (see Chart 7). Although the estimated number of RNs whose principal position was in hospitals was greater than in 2000, the percentage of RNs working in hospitals decreased from 2000 to 2004. In March 2004, out of an estimated 2,421,351 RNs employed in nursing, 56.2 percent (1,360,847) worked in hospital settings compared to 59.1 percent (1,300,323) in March 2000. The number of RNs employed in hospitals increased by over one-half million (525,200) between 1980 and 2004. However, the proportion of the nurse workforce employed in hospitals, after a peak of 68.1 percent in 1984, has declined steadily to its current low of 56.2 percent of employed RNs. This percentage decline reflects the growth in nurse employment opportunities in other sectors.

In 1980, 65.6 percent of employed RNs worked in hospitals. From 1980 through 1992, the percentage of nurses employed in hospitals remained relatively stable, ranging only 2.5 percentage points over a 12-year period (65.6 in 1980, 68.1 in 1984, 67.9 in 1988, and 66.5 in 1992). However, since 1992, there has been a significant drop in the percentage of hospital based RNs, declining to 56.2 percent in 2004. The 2.9 percent drop from 2000 to 2004 is the second largest, second only to the 6.4 percent drop from 1992 to 1996.

In contrast, the percent of RNs reporting their principal nursing position in other types of settings, particularly ambulatory care, increased from 2000 to 2004. In 2004, 11.5 percent of RNs were estimated to be employed in ambulatory care settings, including physician-based practices, nurse-based practices, and health maintenance organizations, compared to 9.5 percent in 2000.

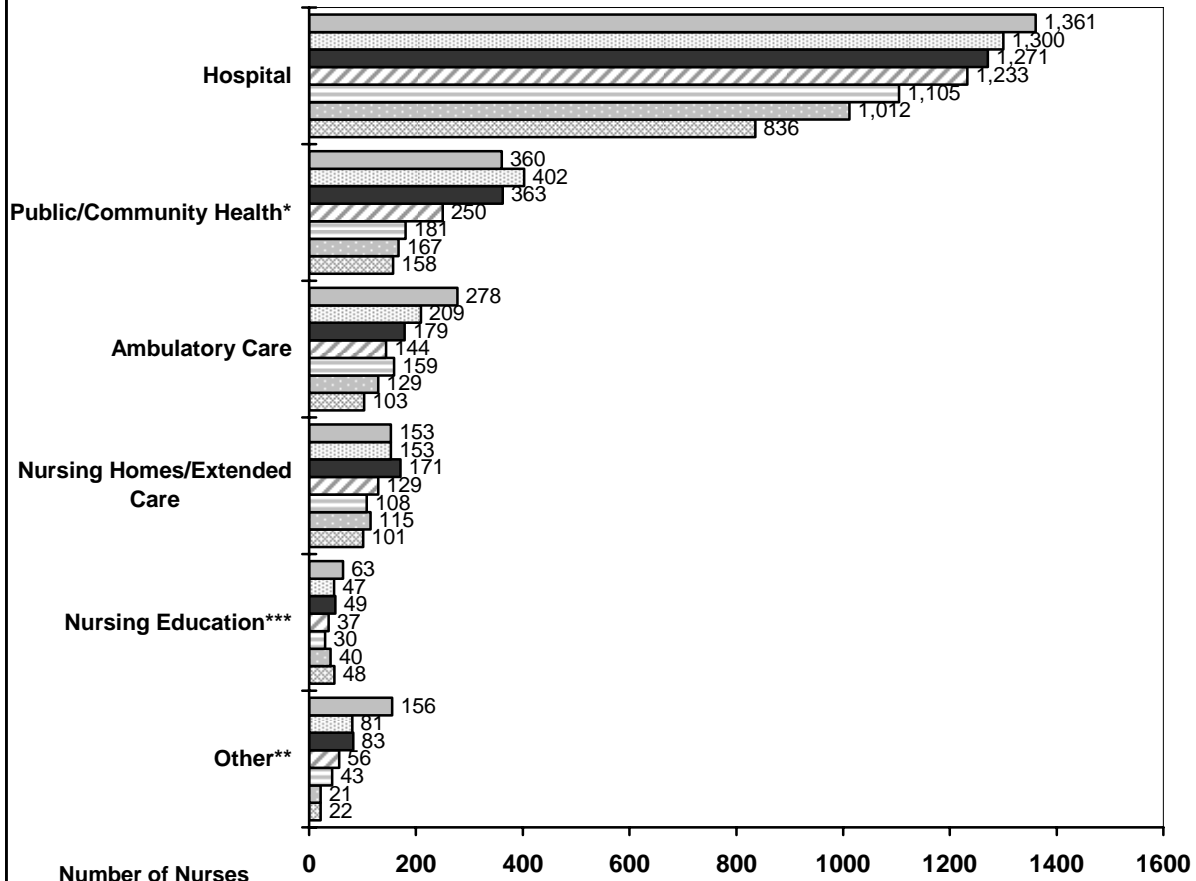
Community and public health settings remained the next largest type of predominant employment for RNs; but the percent of RNs employed in these settings also decreased, from an estimated 18.3 percent of RNs reporting public or community health settings in 2000 to 14.9 percent in March 2004. (For the purpose of these comparisons, both school health services and occupational health settings have been added to traditional community/public health settings.) The percent of RNs reporting nursing homes and extended care facilities as their principal setting remained relatively constant between 2000 (6.9 percent) and 2004 (6.3 percent).

The remaining RNs employed in nursing reported working in such settings as nursing education, Federal administrative agencies, State boards of nursing or other health associations, health planning agencies, prisons/jails, insurance companies, and other miscellaneous settings such as pharmaceutical and durable medical equipment companies (Chart 7). It appears likely that the number and percent of nurses employed in these “other” settings may continue to increase given changes in health care delivery.

Public and community health, ambulatory care, and other non-institutional settings have historically had the largest increases in RN employment. Between 1980 and 2004, RNs employed in ambulatory care settings increased by 168.7 percent (from 103,362 to 277,774) while those employed in public health and community health settings increased by 128.8 percent (from 157,504 to 360,380; see Chart 8).

The number of nurses employed in nursing education has changed little since 1980. This, coupled with an increase in the total number of nurses, has led to a decline in the overall percent of RNs employed as nurse educators. In 1980, 47,507 RNs (3.7 percent of all RNs employed in nursing) were in nursing education settings of RN, LPN/LVN, or nursing aide programs. In 2004, the number of RNs employed in these same nursing education settings had increased to 57,897 (or 2.4 percent of all RNs employed in nursing). The number of nurses employed in nursing homes has increased by 51,963 (or 51.3 percent) since 1980, although the numbers and the percentage of nurses employed in nursing homes and other extended care facilities remained essentially the same between 2000 (152,894) and 2004 (153,172), an increase of 278 RNs. In percentage terms, the share among all RNs dropped from 5.7 percent compared to 5.3 percent, with a drop in its share among employment settings from 6.9 percent to 6.3 percent).

**Chart 7. Distribution of registered nurses
by employment settings,
in thousands, 1980-2004******



* Public/Community Health includes school and occupational health

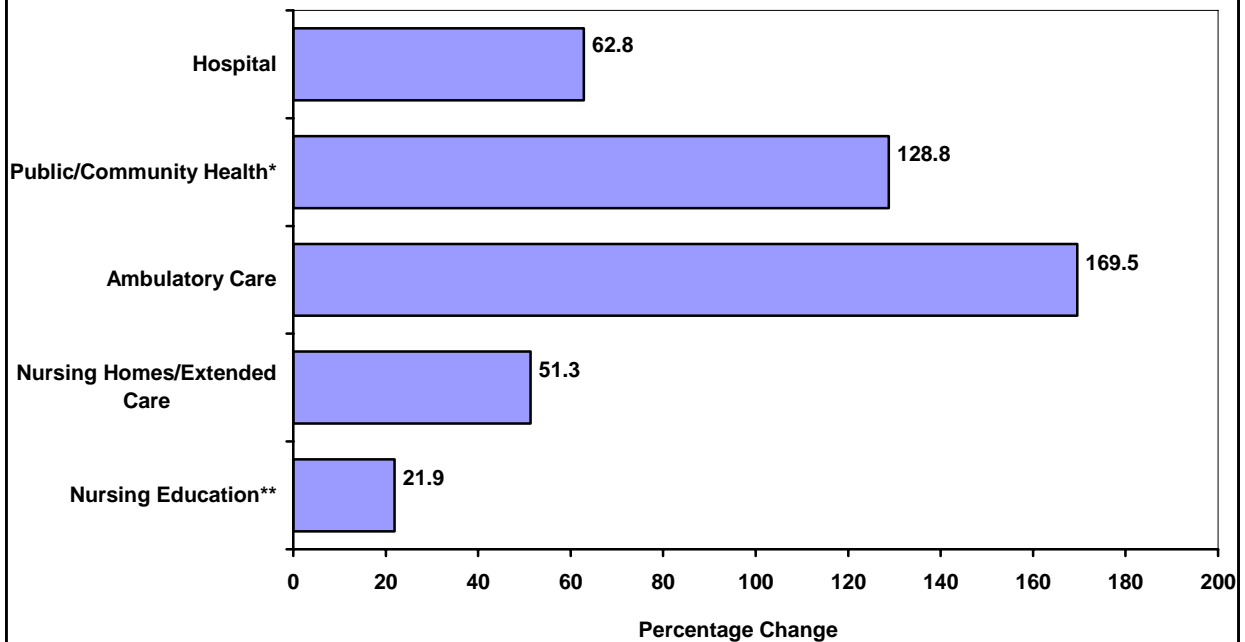
**Other includes positions in insurance claims/benefits, policy/planning/regulatory/licensing, correctional facilities, private duty, and home based self employment.

***For 2004, this Nursing Education category collectively includes not only RN, LPN/LVN, but also allied health, medical school, and consumer education settings. 55,910 are in RN and LPN/LVN education settings in 2004, regardless of position. The difference accounts for some of the increase from earlier surveys in the Nursing Education category.

****The total numbers of RNs across all settings of employment may not equal the total estimated numbers of nurses due to incomplete information provided by respondents on settings and the effect of rounding. Only those who provided setting information are included in the calculations used for this chart.

1980 1984 1988 1992 1996 2000 2004

Chart 8. Percent change in the number of registered nurses employed in selected settings, 1980 to 2004***



*Includes School and Occupational Health

**Nursing Education includes teachers in LPN/LVN, Diploma, Associate Degree, and Bachelors and higher degree programs

***Only those who provided employment setting information are included in the calculations used for this chart.

LONG-TERM TRENDS IN AVERAGE SALARIES/EARNINGS

Changes in overall average earnings⁹ for RNs between November 1980 and March 2004 are shown using two separate measures. The first measure is the “actual” average earnings reported by RNs employed full-time, and the second measure uses the consumer price index (CPI) for urban consumers to adjust for the changes in the purchasing power of the dollar against the actual earnings of full-time employment for obtaining “real” average earnings¹⁰. In examining the extent to which average RN earnings have

⁹ For the purposes of this discussion, the term “earnings” is used to collectively represent salaries and/or earnings self-reported by survey respondents.

¹⁰ Adjustments based on the CPI were made using the geometric-average quartic root. Average yearly increase over 4 years was calculated as $(1 + (\text{percent change in earnings during time period})^{0.25} - 1)$. The geometric median-based annual average CPI increase can be found as: $(1 + (\text{percent of CPI increase over time period})^{0.25} - 1)$. The net geometric median-based real percent increase each year can be found as: $(1 + (\text{percent of salary increase})^{0.25} - (1 + (\text{percent of CPI increase over time period})^{0.25})$.

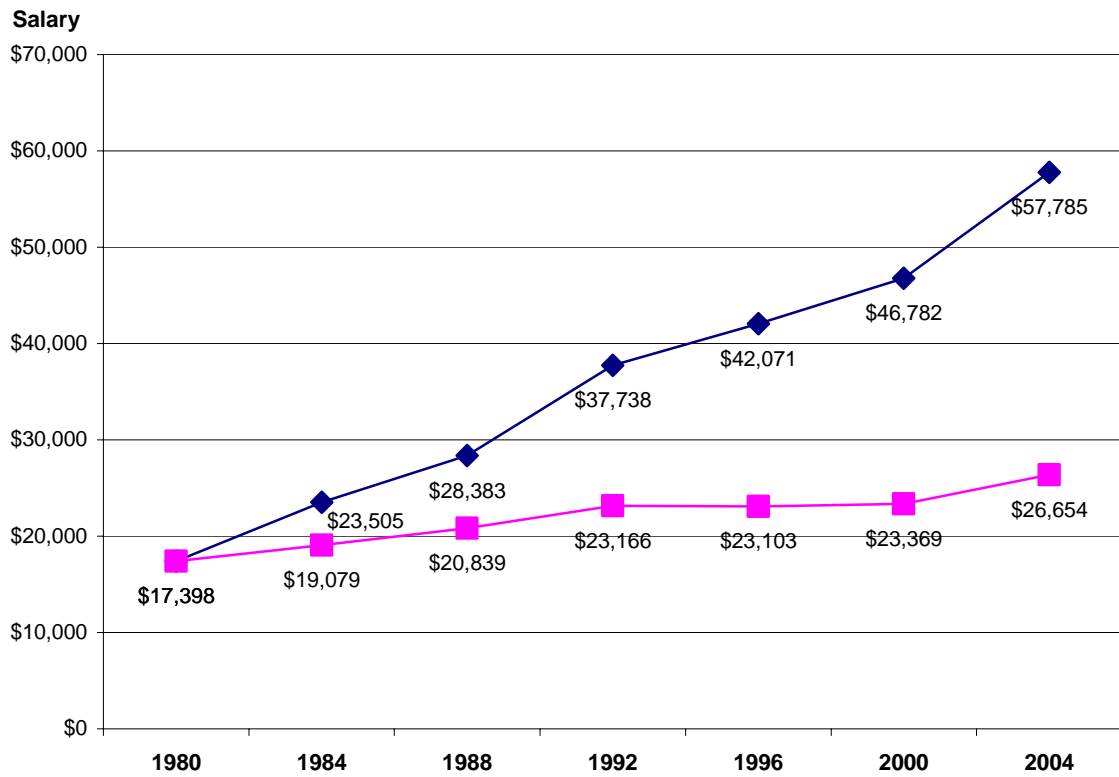
increased over the years, and the related economic demand for RNs, it is important to consider how earnings have increased during times of relatively high inflation as well as during times of relative stability in the cost of living. It is important to note, though, that inflation is only one of the factors influencing the size of increases in RN earnings over time.

The average actual annual earnings of RNs employed full-time in March 2004 was \$57,785, reflecting a 23.5 percent actual earnings increase since March 2000 (See Chart 9). However, it should be noted that there was a change in the context of the question from 2000 to 2004. In 2000, the question asked for income in the year 2000, requiring the RN to estimate income or report for the previous year. In 2004, the question did not ask for income in a specific year, only for annual income. In spite of this wording change, this increase in income is substantially higher than the 11.2 percent actual earnings increase between 1996 and 2000 and the 11.5 percent actual earnings increase between 1992 and 1996. The highest increases in actual annual earnings (35.1 percent) were experienced during the period from 1980 to 1984, with the second highest increase of 33.0 percent increase in average earnings coming between 1988 and 1992. These were times of relatively high increases in the cost of living, as well as periods when nurses were being actively sought for employment. For example, there were substantial increases in the supply of RNs in the workforce from 1977 to 1984 and a perceived nursing shortage from 1988 to 1992.

The real increase in earnings is determined by adjusting the actual earnings by changes in the CPI. Obtaining the trends over time in 'real' increases in RN earnings is possible after accounting for the changes in purchasing power of the dollar from the reported earnings found in each respective NSSRN. In the comparisons over time, 1980 is the starting point of the time frame for analysis of real versus actual earnings. Thus, it is modeled here that, in 1980, real and actual earnings are assumed to be equal (i.e., the 1980 relative Consumer Product Index (CPI) = 100).

From 2000 to 2004, the CPI increase was 9.5 percent. As such, the actual adjusted increase, or real earnings increase, for this period was 14.0 percent (23.5 percent actual increase, less the 9.5 percent CPI). The 14.0 percent increase in real earnings for 2000 to 2004 is the largest since the inception of the NSSRN. Comparatively, the 1996 to 2000 actual earnings increase of 11.2 percent and the 1992 to 1996 actual earnings increase of 11.5 percent can be almost completely attributed to the corresponding 10 percent change in the CPI over each of those 4-year periods. Between 1988 and 1992, RNs experienced a real earnings increase of 11.2 percent and a similar real earnings increase between 1980 and 1984 of 9.7 percent. As in the past, these increased earnings have occurred during periods when the supply of employed nurses increased substantially. This pattern signals the existence of significant economic demand for RNs over this period. Note that any changes in earnings since March 2004 are not reflected.

Chart 9. Actual and "real" earnings for registered nurses, 1980 to 2004*



* Only those who provided earnings information are included in the calculations used for this chart.

—◆— Actual Annual Average Salary —■— Real Annual Average Salary

CHAPTER III

THE REGISTERED NURSE POPULATION 2004

As of March 2004, an estimated 2,915,309 individuals had current licenses to practice as registered nurses (RNs) in the United States. Approximately 2,909,357 of these RNs lived and worked in the United States. This estimate represents an increase of 7.9 percent, or 212,817 above the 2,696,540 estimated number of RNs living and working in the United States in the year 2000. Though this change is greater than the 5.4 percent increase seen across the last survey years (1996 to 2000) it is one of the lowest increases since the inception of the NSSRN. By comparison, the highest increase in the RN population was experienced between 1992 and 1996 when the total number of RNs increased by an estimated 14.2 percent or 319,058 (from 2,239,816 to 2,558,874). The number of RNs working outside the United States declined from 18,131 RNs in 2000 to 5,952 RNs in 2004.

The data in this report focus on the 2,909,357 RNs located in the United States. RNs are considered to be located in the United States if they were employed in nursing in one of the 50 States and the District of Columbia or, if not employed in nursing, were residents of the United States. Of the 2,909,357 RNs located in this country, 83.2 percent or 2,421,351 were employed in nursing (see Appendix A, Table 1). This estimate of the number employed in nursing is an increase of 219,538 RNs (10.0 percent) over the estimated 2,201,813 RNs employed in nursing in 2000.

AGE

The aging of the RN workforce in the United States has continued. As of 2004, the average age of the total RN population (including those who are retired and not employed in nursing) was estimated to be 46.8 years. This is the highest average age since the inception of the survey, more than 1 year older than the average age estimated in 2000 (45.2 years) and more than 2 years older than the average age estimate in 1996 (44.3 years).

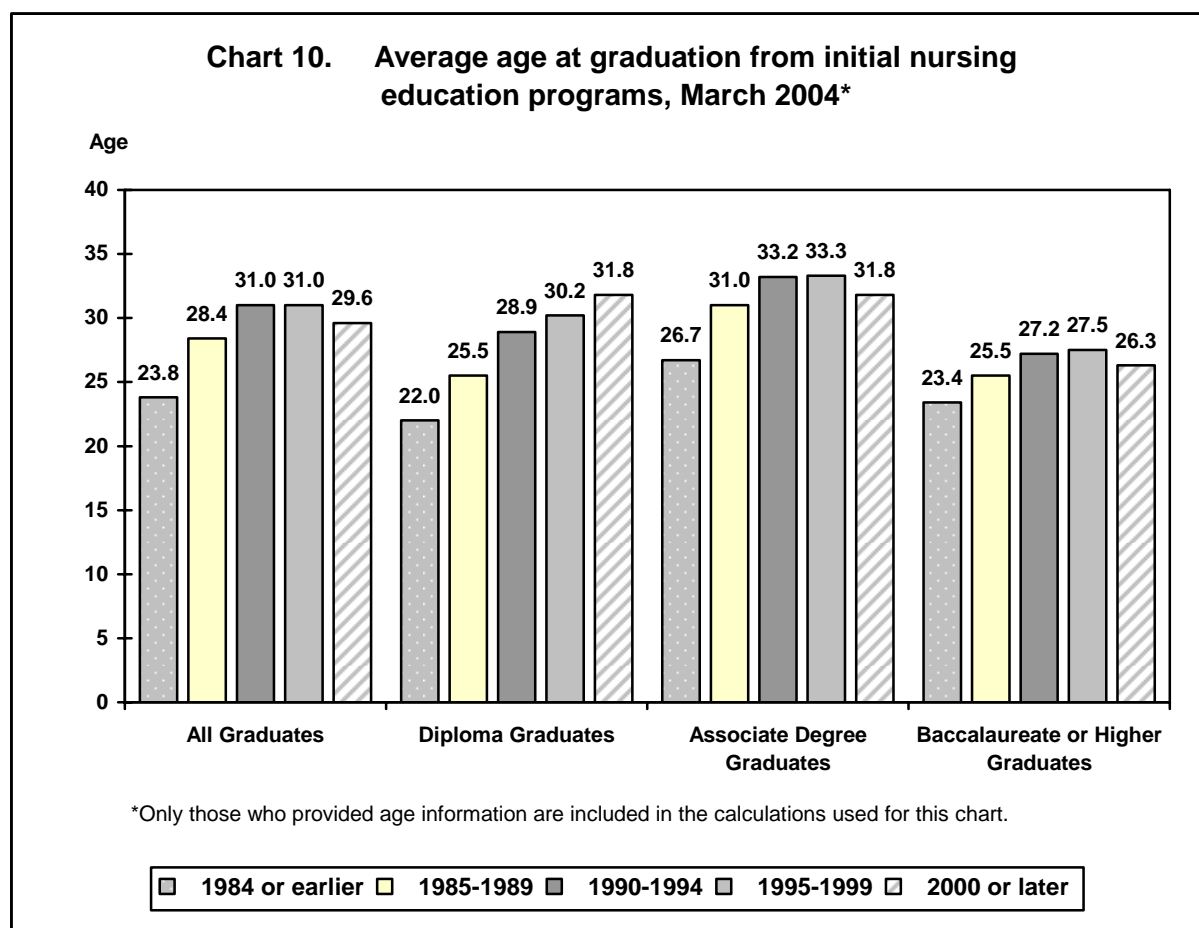
The aging RN workforce reflects fewer young nurses entering the RN population, large cohorts of the RN population moving into their 50s and 60s, and older graduates from initial nursing education programs entering the RN population. In 2004, only 8.0 percent of the RN population was under the age of 30, a decrease from 9.0 percent in 2000 and 25.1 percent in 1980. At the same time, in 2004, 41.1 percent of RNs were 50 years of age or older, a dramatic increase from 33.0 percent in 2000 and 25.1 percent in 1980 (see Appendix A, Table 1). The increase in the number of older nurses who returned to the workforce in response to the higher salaries and reported shortages may have contributed to the trend.

The average age at graduation for recent RN graduates appears to be slightly lower than in 2000. The average age at graduation for RNs during the 5 years prior to the survey was 29.6 years for the 2004 survey compared to 30.9 years in the 2000 survey; however, RNs who graduated between 1995 and 1999

in the 2004 survey were 31.0 years of age at graduation. In 2004, the average age of nurses who graduated from initial nursing education in 1984 or earlier was 23.8 years (see Appendix A, Table 2 for statistics on age at graduation); this is similar to the 23.9 years average age at graduation in 2000.

When the distribution of age at graduation is observed by age groups, the indication that graduates from initial education programs in more recent years are younger becomes clearer. In the 2004 survey, 39.4 percent of those graduating between 2000 and 2004 were under 25 compared to 30.9 percent of RNs under age 25 who completed their initial education between 1990 and 1999. Complementing this increase in younger graduates, 29.7 percent of nurses who completed their initial education between 1990 and 1999 were in the 35 to 49 age interval, while only 21.0 percent of RNs completing their initial education programs between 2000 and 2004 were in the 35 to 49 year age interval.

The average age of RNs at graduation from initial nursing education also varied by type of program. Graduates of diploma and associate degree programs in 2000 or later were the same age (31.8 years) and were older than graduates of bachelor's degree or higher programs (26.3 years) during this time period. In other graduation years, graduates of associate degree programs were older than all other graduates. Across survey years, the age of diploma graduates has steadily been increasing across graduation cohorts. Baccalaureate degree recipients graduating after 1989 were the youngest (see Chart 10). However, the average age at graduation is lower since 2000 among recent graduates of associate degree and bachelor's degree programs (declining by 1.5 years and 1.2 years respectively, compared to those who graduated during the 1990s (see Appendix A, Table 2).

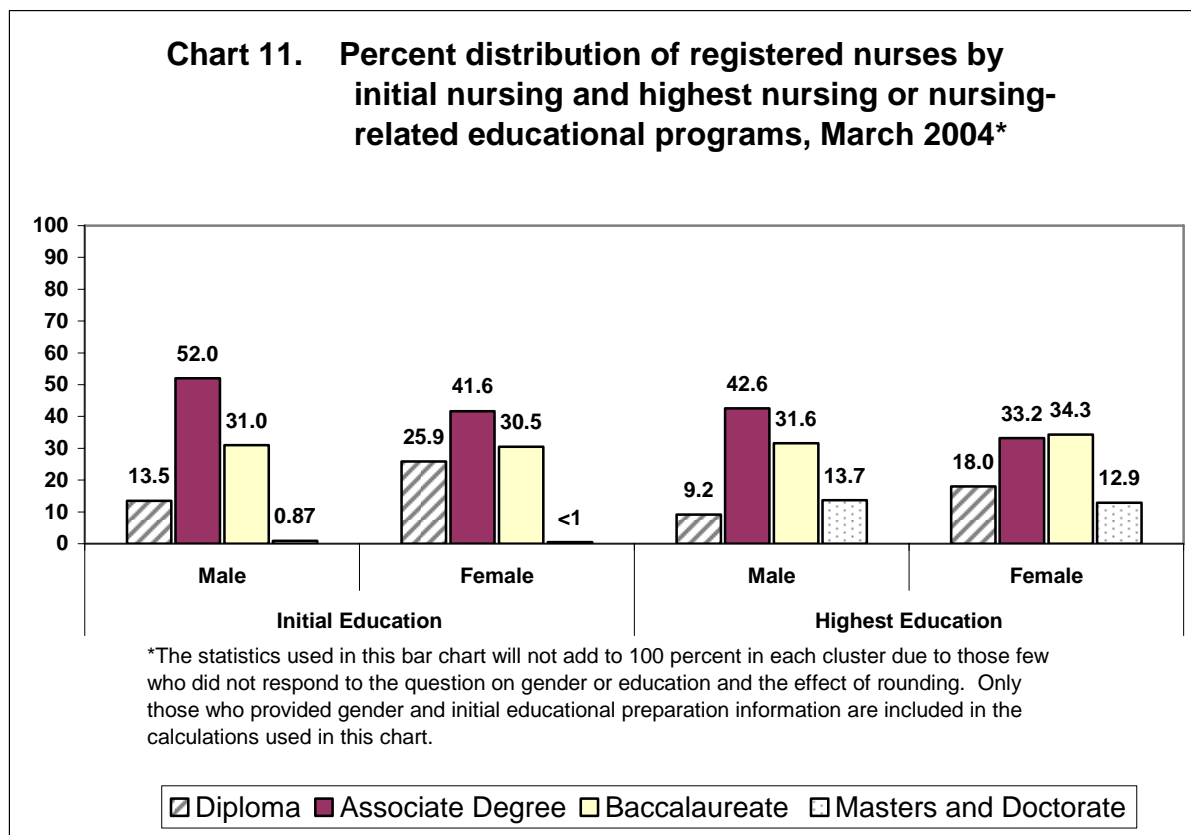


GENDER

Men still comprise a very small percentage of the total number of RNs living and working in the United States, although their numbers have continued to grow. In 2000, 146,902 or 5.4 percent of RNs were men. In 2004, 5.8 percent (168,181 RNs) were male (see Appendix A, Table 1).

Male RNs are more likely to be younger than female RNs, with 30.1 percent of male RNs under the age of 40 compared to 26.1 percent of female RNs, and 65.7 percent of male RNs under the age of 50 compared to 57.4 percent of female RNs. The average age for male RNs was 44.6 compared to female RNs at 47.0 years of age. Male RNs are more likely to be employed in nursing (88.4 percent) compared to female RNs (82.9 percent).

Male and female RNs also differ with respect to the type of program in which they received their initial nursing education. Male and female RNs differ in the proportions graduating with either a diploma or an associate degree, with males more often receiving an associate's degree than a diploma. Approximately 13.5 percent of male RNs graduated from diploma programs, compared with 25.9 percent of female RNs; and 52.0 percent of male RNs graduated from associate degree programs, compared with 41.6 percent of female RNs; and 31.0 percent of male RNs graduated from baccalaureate programs, compared with 30.5 percent of female RNs.



When the highest nursing or nursing-related educational preparation is considered, a similar pattern emerges with respect to education below the baccalaureate degree. Females were nearly twice as likely as compared to males to list a diploma as their highest nursing or nursing-related educational preparation (18.0 percent compared to 9.2 percent). Conversely, 42.6 percent of males listed an associate degree as the highest-related educational preparation, compared to 33.2 percent of female RNs. However, more

female RNs had baccalaureate degrees (34.3 percent) than male RNs (31.6 percent). The percent of male and female RNs completing master's or doctoral programs as their highest nursing or nursing-related education were similar, 13.7 percent and 12.9 percent, respectively (see Chart 11).

RACIAL/ETHNIC BACKGROUND

As explained in Chapter II, due to a change in definitions, caution should be used when comparing the racial/ethnic composition of the RN population to surveys prior to 2000. In accordance with the Office of Management and Budget (OMB), the question regarding racial and ethnic background in the March 2000 survey was changed from the previous surveys. In 2004, as in 2000, nurses were asked to identify their ethnic background and then asked to identify all races that could best describe them. The information was aggregated to categories similar to those reported in previous years, with one additional grouping of two or more races, non-Hispanic. The 2004 and 2000 estimates for these RNs were relatively unchanged (1.4 percent and 1.2 percent, respectively). In surveys prior to 2000, nurses had to choose from one of the racial/ethnic categories presented and could not designate multiple races.

In 2004, 10.7 percent (311,177) of all RNs identified themselves as a racial or ethnic minority in their responses to both the questions on race and ethnicity. However, 354,475 RNs (an additional 43,298, or about 1.5 percent of all RNs) identified themselves in 2004 as a racial or ethnic minority (see Footnote 6), even if their responses were incomplete through missing race or ethnicity information. In 2000, 12.4 percent of the RN population (333,368) was estimated to be members of minority groups. This apparent percentage decline, even after the adjustment for minority respondents who did not provide complete race/ethnicity information, is slight and should be seen in light of the apparent absolute increase in minority RNs. In 2004, 7.5 percent of RNs were of unspecified racial or ethnic background; in 2000, only 1.1 percent of RNs were of unspecified racial or ethnic background. Of the 217,651 RNs in 2004 with missing values for race or ethnicity, 27.0 percent (58,859 RNs) did not specify either race or ethnicity, 13.9 percent (30,147 RNs) specified ethnicity but not race, and 52.1 percent (128,645 RNs) specified race but not ethnicity. This increase in missing information, and the concurrent decrease in minority RNs who specified both race and ethnic demographic information, may in part reflect a change in the data retrieval practices for missing variables.¹¹

Of the RN population who specified both race and ethnicity background, 4.2 percent (122,495) were Black or African American (non-Hispanic); 3.1 percent (89,976) were Asian, Native Hawaiian, or Other Pacific Islander (non-Hispanic); 1.7 percent (48,009) were Hispanic or Latino, with any race specified; and 0.3 percent (9,453) were American Indian or Alaska Native (non-Hispanic). An estimated 1.4 percent (41,244) reported that they were two or more races and non-Hispanic (see Appendix A, Table 1).

These minority distributions in the RN population contrast with the minority distribution of the general United States population. In the United States population for 2004, 12.2 percent were Black or African American (non-Hispanic), 4.1 percent were Asian, Native Hawaiian, or Other Pacific Islander (non-

¹¹ In previous survey years, missing data was retrieved via an additional process of re-contacting the respondent for critical information. The 2004 survey limited the practice of follow-up contact to certain critical variables, not including race. Thus, the results should be interpreted with caution.

Hispanic), 13.7 percent were Hispanic or Latino with any race specified, 0.7 percent were American Indian or Alaska Native (non-Hispanic), and 1.3 percent were of two or more races (non-Hispanic).¹²

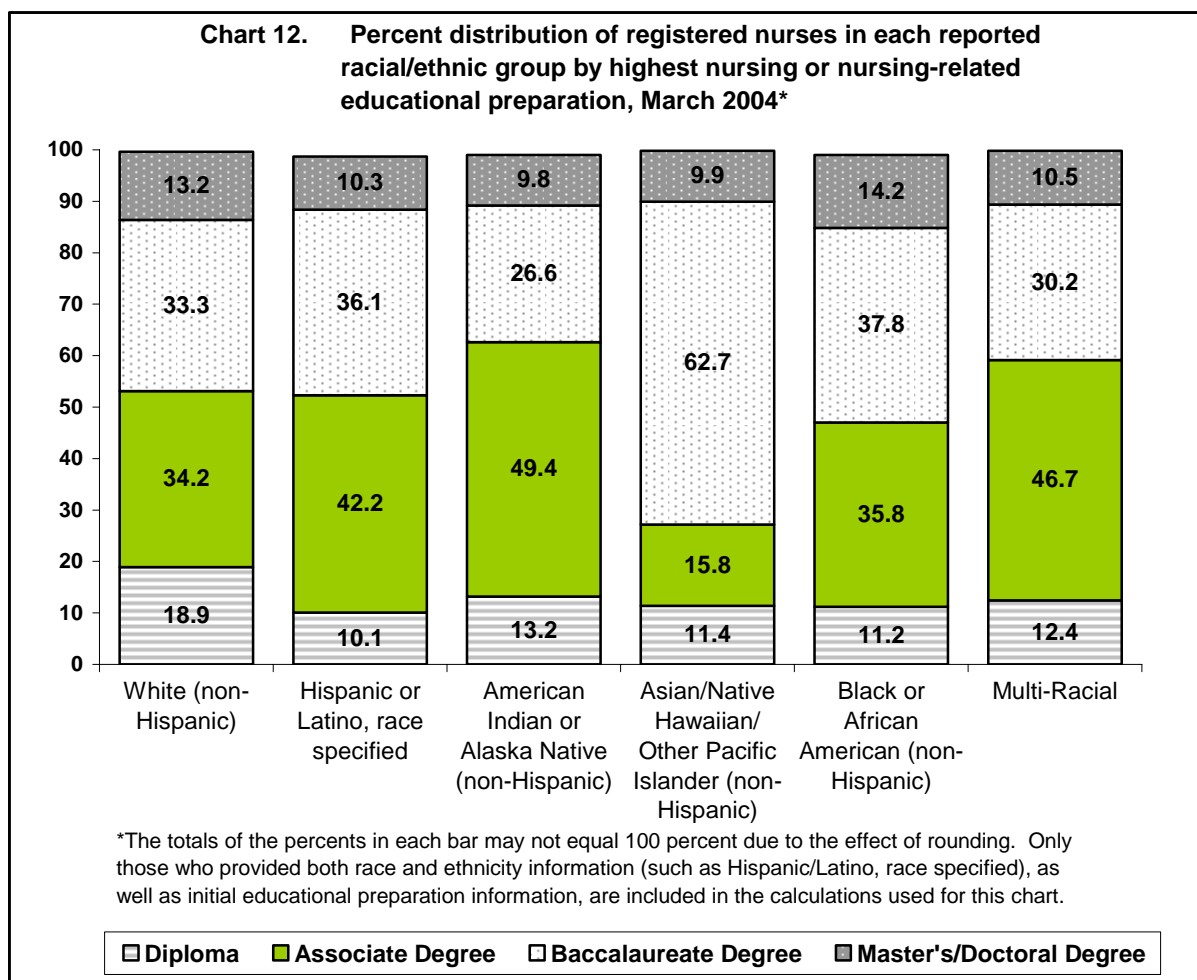
Similar to the 2000 survey, minority RNs were on average younger than white, non-Hispanic RNs (45.5 years of age on average versus 47.1 for White, non-Hispanic RNs). Asian, Native Hawaiian, or Other Pacific Islander RNs were the youngest, at 43.9 years of age, followed by Hispanic or Latino RNs at 44.1 years of age on average. Black or African American, non-Hispanic RNs were on average the oldest, at 47.2 years of age.

RNs from minority backgrounds were more likely than non-minority nurses to be employed in nursing and to work full-time. Nearly 88 percent of non-Hispanic minority nurses and 88.0 percent of Hispanic or Latino nurses were employed in nursing, compared with 82.6 percent of White, non-Hispanic nurses. Minority nurses employed in nursing were also more likely than non-minority nurses to be employed full-time. The percentage of employed RNs working full-time ranged from 75.2 percent for Hispanic or Latino RNs to 81.2 percent for non-Hispanic minority RNs. In comparison, 68.5 percent of employed non-Hispanic White RNs worked full-time.

Most RNs in each racial/ethnic group received their initial nursing education in associate degree programs, with the exception of RNs from Asian, Native Hawaiian, or Other Pacific Islander, non-Hispanic (19.0 percent) backgrounds. RNs from American Indian or Alaska Native, non-Hispanic backgrounds were the most likely to receive their initial nursing education in associate degree programs (60.8 percent) followed by multi-racial RNs (55.1 percent), Hispanic or Latino RNs (54.5 percent), Black or African American non-Hispanic RNs (48.7 percent) and white non-Hispanic RNs (42.4 percent). White, non-Hispanic nurses were more likely than other nurses to have received their initial nursing education in diploma programs. Twenty-seven percent (26.9 percent) of white, non-Hispanic nurses were prepared for RN licensure in diploma programs compared with 14.7 percent of Hispanic or Latino RNs and 17.8 percent of nurses who were non-White non-Hispanic. The majority (64.0 percent) of RNs from Asian, Native Hawaiian, or Other Pacific Islander, non-Hispanic backgrounds received their initial nursing education in baccalaureate programs. It should be recognized, however, that most Philippine-trained nurses had baccalaureate education as their initial nursing preparation.

Chart 12 illustrates how racial/ethnic groups compare in terms of highest nursing or nursing-related educational preparation. White (non-Hispanic) RNs were most likely to have a diploma as the highest educational preparation (18.9 percent). Asian, Native Hawaiian, or Other Pacific Islanders (non-Hispanic), as well as Black or African American (non-Hispanic) RNs were more likely than either Hispanic, Latino, or White (non-Hispanic) RNs to attain at least baccalaureate preparation. Black or African American, non-Hispanic (14.2 percent) and White, non-Hispanic nurses (13.2 percent) were the racial/ethnic groups with the highest percentages of master's and doctoral degrees.

¹² This information was reported in Table 3: Annual Estimates of the Populations by Sex, Race and Hispanic or Latino Origin for the United States: April 1, 2000 to July 1, 2004 (NC-EST2004-03). Population Division, U.S. Census Bureau. Release Date: June 9, 2005.



EDUCATION AND EMPLOYMENT PRIOR TO INITIAL NURSING EDUCATION

Individuals come to nursing through various career paths, and a significant number choose nursing after employment in other health-related fields or after receiving other post high school academic degrees. In 2004, about 1,512,259 (52.0 percent) of all RNs had worked in other health-related occupations prior to attending their initial nursing education (see Appendix A, Table 3). This estimate is an increase from 2000, when 37.3 percent of RNs followed the same path, although a change in question wording can account for this marked increase. In 2000 the questionnaire asked for the respondent's employment status immediately prior to beginning initial nursing education, while the 2004 questionnaire asked for employment status at any time prior to beginning initial nursing education. In 2004, the majority of these nurses who had previously worked did so as nurse aides (974,764 RNs or 64.5 percent), Licensed Practical Nurses/Licensed Vocational Nurses (LPN/LVNs; 364,527 RNs or 24.1 percent) or as clerks in health care settings (208,337 RNs or 13.8 percent). The majority of RNs who were employed before entering an initial nursing education program tended to enroll in associate degree programs (797,925 RNs or 52.8 percent) to prepare for RN licensure. In addition, 29.9 percent of RNs (451,499 RNs) who were employed in a health occupation prior to their initial nursing education received their education in baccalaureate-or-higher degree programs.

While 484,809 RNs were estimated as ever being licensed as an LPN/LVN, 120,282 were NOT employed as LPN/LVNs prior to starting their initial RN preparation program. Some of these 120,282 may have

obtained RN licenses during the period of initial RN education for related employment purposes. In total, there were 364,527 RNs who were employed as LPNs/LVNs prior to beginning their initial nursing education. The majority of all RNs who were once employed as LPN/LVNs (80.2 percent or 292,365 RNs) reported an associate's degree as their initial RN education, 11.5 percent had a baccalaureate-or-higher degree (41,927 RNs; see Appendix A, Table 3). In contrast, only 47.1 percent of RNs employed as nurse aides prior to initial nursing education received an associate degree as their initial nursing education, while 33.4 percent obtained baccalaureate-or-higher degrees.

In 2004, about 16.2 percent of the RN population, or 471,603 RNs, had post-high-school academic degrees prior to entering an initial nursing education program (see Appendix A, Table 5). This is an increase from the 2000 estimate, when 13.3 percent of the RN population had post-high-school academic degrees prior to their initial nursing education. Over half of the 2004 RNs who had a post-high-school academic degree prior to initial nursing education had associate degrees (52.6 percent or 247,962 RNs), and half had bachelors degrees¹³ (50.2 percent or 236,871 RNs; see Appendix A, Table 5). RNs with post-high-school academic degrees prior to their initial nursing education were less likely to report an associate degree as their initial nursing education than RNs who had been employed as LVN/LPNs. Just over 80 percent (80.2 percent) of those previously employed as LVN/LPNs reported an associate degree as initial nursing education, compared to 52.6 percent of RNs with prior academic degrees. This is virtually unchanged since 2000, when 82.1 percent of those previously employed as LVN/LPNs reported an associate degree and 53.0 percent of RNs with prior academic degrees reported an associate degree as their initial nursing education.

NURSING EDUCATIONAL PREPARATION

The initial educational preparation for the largest proportion of RNs is the associate degree. Forty-two percent, or 1,227,256 of the 2,909,357 RNs received their initial nursing education in an associate degree program (see Appendix A, Table 2). Similarly, in terms of the highest level of preparation for nursing, the trend from 1980 to 2004 indicates that an increasing number of RNs receive baccalaureate and master's degrees, even if their initial preparation for nursing was an associates degree or a diploma (see Chart 13; see Appendix A, Table 10).

Of those RNs completing their initial nursing education in the period between 2000 and early 2004, 56.9 percent graduated from an associate degree program and 39.9 percent (including 1.0 percent from masters and doctoral initial programs) graduated from a baccalaureate-or-higher initial RN program; only 2.8 percent graduated from diploma programs (see Appendix A, Table 2).

RNs relied on different sources of funding to finance their initial nursing education. The three primary sources were personal resources, family resources, and federally assisted loans. An estimated 53.0 percent of students used some personal resources, such as earnings and savings; while 48.2 percent used family assistance to help pay for tuition and fees. Over 22 percent (22.1 percent) used federally-assisted loans as a resource. Federal sources of support in the form of traineeships, scholarships or grants were a resource for 13.2 percent of RNs, and employer tuition and reimbursement plans were a resource for about 8.2 percent of RNs attending school.¹⁴ Reliance on Federal resources increased with the educational level. About 60.7 percent of master's and doctoral degree students relied on some type of Federal support

¹³ The numbers in this calculation overlap because respondents were able to name more than one degree.

¹⁴ The percentage of nurses using each source of funding adds to more than 100 percent because more than one source could be named.

compared to about 49.0 percent of baccalaureate students, 37.1 percent of associates degree students and 16.9 percent of diploma students (see Appendix A, Table 9).

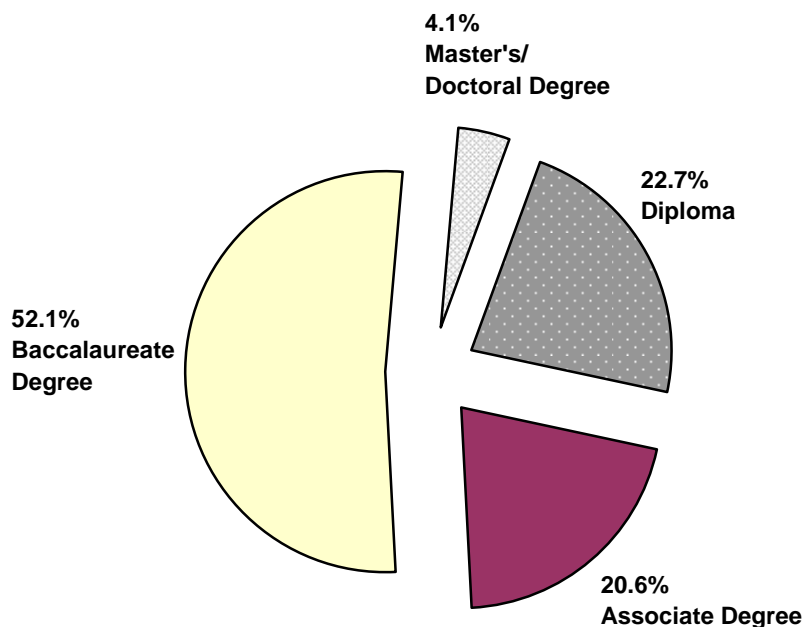
The 2004 survey indicates that the RN population is increasingly prepared with a baccalaureate, a master's, or doctoral degree. The highest level of nursing or nursing-related preparation for an estimated 17.5 percent of RNs (510,209) is a diploma; for an estimated 33.7 percent (981,238) the highest preparation is an associate degree; for 34.2 percent (994,276) it is a baccalaureate degree; and for 13.0 percent (376,901) a master's or doctoral degree is their highest nursing or nursing-related education (see Appendix A, Table 10).

In addition to degrees in nursing, it should be noted that some nurses have advanced degrees that are not in nursing but related to their career in nursing (see Appendix A, Tables 10 and 11). Of the estimated 376,901 RNs with master's or doctoral degrees in nursing or nursing-related areas, 267,963 (71.1 percent) held nursing degrees as their highest nursing or nursing-related degree. At the master's level of highest nursing or nursing-related education attained, 256,415 (73.1 percent) held nursing master's degrees. At the doctoral level of highest nursing or nursing-related education attained, 11,548 (44.2 percent) held nursing doctoral degrees. Nurses reported attaining an additional 105,922 master's degrees and 29,755 doctoral degrees in fields that are not related to a career in nursing. .

The highest increase from 2000 to 2004 was for the number of RNs receiving a nursing or nursing-related master's or doctorate degree (an estimated increase of 101,833 RNs or 37 percent) compared to a decrease of 91,495 nurses or 15.2 percent in the number of RNs whose highest nursing or nursing-related degree was a diploma. Also noteworthy is the 12.9 percent increase in nursing or nursing-related baccalaureates, from 880,997 to 994,276. As illustrated by Chart 13, by 2004 the majority (52.1 percent) of RNs who earned a master's or doctoral degree as their highest nursing or nursing-related educational preparation received a baccalaureate degree as their initial nursing education.

Over the entire period from 1980 to 2004, there was a 43.5 percent decrease (an estimated change from 903,131 RNs to 510,209) in the number whose highest level of nursing or nursing-related education was a diploma, while the number whose highest level of nursing or nursing-related education was a master's or doctorate increased by 339 percent (from 85,860 to 376,901). Similarly, the estimated number of RNs whose highest nursing or nursing-related preparation was a baccalaureate increased by 170 percent (367,816 to 994,276) and the estimated number whose highest nursing or nursing-related preparation was an associate's degree increased by 232 percent, from 295,318 to 981,238 RNs.

Chart 13. Registered nurses whose highest nursing or nursing-related education was a master's or doctoral degree, by type of initial nursing education, March 2004*



*The totals of the initial educational preparation distribution percents for those RNs with advanced education may not equal 100 percent due to the effect of rounding. Only those who provided initial education preparation information are included in the calculations used for this chart.

Of the 1,227,256 RNs initially prepared in associate degree programs, 20.7 percent or an estimated 253,453 of the nurses (i.e., 8.7 percent of all RNs) obtained additional nursing or nursing-related degrees. Of the 733,377 RNs initially prepared in diploma programs, 30.2 percent or an estimated 221,608 (i.e., 7.6 percent of all RNs) obtained post-RN nursing or nursing-related degrees. In addition, of the 887,114 RNs initially prepared in baccalaureate programs, 22.1 percent or an estimated 196,494 (i.e., 6.8 percent of all RNs) subsequently received master's or doctorate nursing or nursing-related degrees.

In terms of overall education, including nursing degrees, nursing-related degrees, and degrees that were unrelated to nursing, an estimated 391,472 RNs received master's degrees and 40,038 RNs received doctoral degrees after becoming RNs (see Appendix A, Table 11). Nearly 44 percent (43.8 percent) of RNs with post-RN master's degrees that may or may not be related to nursing chose clinical practice as their field of study. Nearly 15 percent (14.5 percent) focused on supervision/administration while 13.4 percent studied education. Post-RN doctoral degrees were frequently focused on either education (21.3 percent), research (17.7 percent), or law (11.3 percent). In contrast, clinical practice was the focus of just 5.8 percent of post-RN doctoral degrees (see Appendix A, Table 11).

In 2004, 7.6 percent, or 220,412 RNs, were enrolled in formal education programs leading to an academic degree or a certificate. Most of these award programs were in nursing or would enhance a career in nursing (172,150; see Appendix A, Table 12). The RNs pursuing these academic degree programs useful to a career in nursing were mostly part-time students employed full time in nursing (54.0 percent;). Of the

estimated 166,768 RNs pursuing academic degrees in nursing or related to nursing, an estimated 49.1 percent (81,402 RNs) were currently pursuing baccalaureate degrees, 45.7 percent (75,879 RNs) were pursuing master's degrees, and 5.2 percent (8,617 RNs) were pursuing doctoral degrees. The majority of these formal nursing or nursing-related academic degree programs (138,618) were actually in nursing, while a smaller number (30,151) were in nursing-related academic programs that would enhance a career in nursing. Of the 111,282 RNs initially prepared in associate degree programs that were enrolled in nursing or nursing-related educational programs, 71,373 RNs (64.1 percent) were pursuing baccalaureate degrees. A smaller number are pursuing certificates in nursing or related to nursing (20,048). An additional 23,689 RNs were pursuing formal academic education in other fields not related to enhancing a career in nursing

ADVANCED PRACTICE NURSES

Increased interest in expanding the access and availability of health care services has led to particular emphasis on advanced practice registered nurses (APNs). The APN is an umbrella term used to describe RNs who have met advanced educational and clinical practice requirements beyond the initial nursing education required of all RNs. Many States require APNs to be recognized either by a State agency or certified by a national organization such as the American Nurses Credentialing Center (ANCC) or the relevant specialty nurses association. APNs include clinical nurse specialists, nurse anesthetists, nurse midwives and nurse practitioners. For this study, APNs were defined as such if they reported that they were prepared as an APN in a specific specialty field.¹⁵

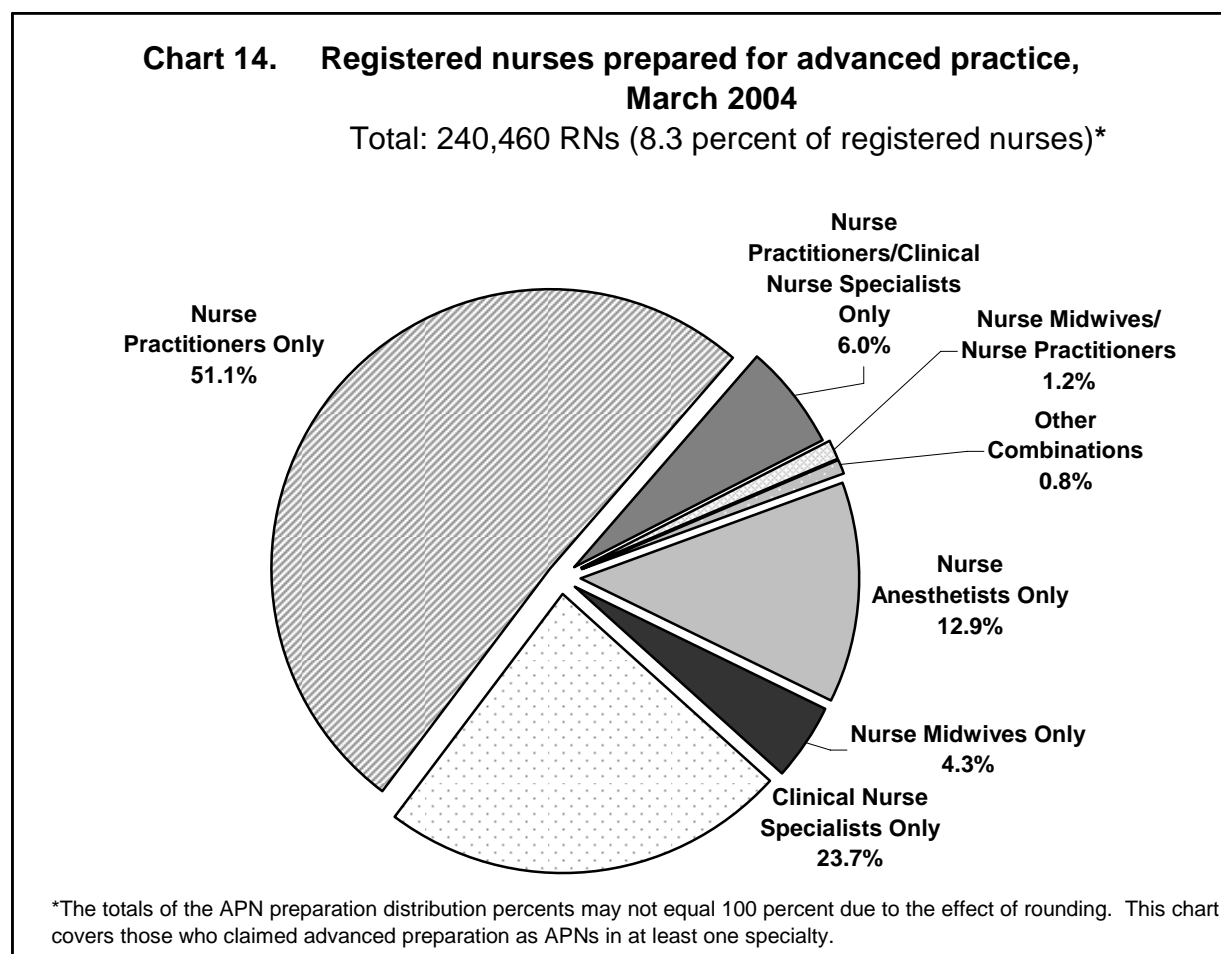
In total, an estimated 240,460 RNs, or 8.3 percent of the RN population, were prepared for advanced practice. This estimate represents a 22.5 percent increase from the 196,279 APNs, or 7.3 percent of RNs estimated in 2000. Almost three in four (74.8 percent or 179,932 APNs) of the 240,460 RNs reported a master's degree for APN educational preparation; an additional 18,631 APNs reported at least one post-master's certificate for their APN educational preparation. Over 70 percent of APNs (70.1 percent or 168,546 APNs) were nationally certified and 61.8 percent (148,647 APNs) were State recognized to practice in the respective State in at least one APN specialty¹⁶ (see Appendix A, Table 13). Others prepared as APNs may have been not actively practicing in 2004 to have required current APN credentials.

As shown in Chart 14, the majority of those who completed APN programs were prepared as nurse practitioners (NPs; 141,209 RNs) followed by clinical nurse specialists (CNSs; 72,521 RNs). A significant portion of RNs were at least dually prepared as both NP and CNS (14,689 RNs). These two groups together, including those with dual or multiple preparations as a nurse practitioner, clinical nurse specialist, nurse midwife, and/or or nurse anesthetist, comprised over 199,000 nurses (or 82.8 percent) of all APNs.

¹⁵ The NSSRN does not sample APNs, per se. Rather, the NSSRN samples RNs who may also claim APN preparation. Constraints to this sampling design limited the pool and representativeness of APNs who were sampled. The resulting sampling weights for APNs from the NSSRN do not scientifically represent the numbers of APNs actually prepared in these four specialties. Furthermore, the numbers of prepared APNs include many who are not currently practicing in their specialty but who were once prepared as and completed an APN program earlier in their careers.

¹⁶ Percents do not add up to 100 because respondents could be certified in multiple specialties by multiple organizations.

An estimated 32,523 of those who completed APN programs were prepared as nurse anesthetists, and an estimated 13,684 APNs were prepared as nurse midwives, with 21.1 percent (2,892 APNs) of nurse midwives being prepared as both NPs and nurse midwives (see Appendix A, Table 13).



The most common specialty among those who completed APN programs was family practice (25.0 percent), followed by adult health/medical/surgical (14.3 percent), anesthesia (13.1 percent), psychiatric/mental health (8.2 percent), pediatrics (8.1 percent), and acute/critical care (6.6 percent). Among APNs with national certification, family practice was the most common specialty APNs were certified in (20.1 percent), followed by anesthesia (12.7) and adult medicine (7.1 percent) (see Appendix A, Table 14).

Nurse Practitioners

The nurse practitioner (NP) group included all RNs prepared beyond initial nursing education in a formal nurse practitioner program of at least three months. Generally, a minimum of a master's degree in nursing is currently required for academic achievement in advance of national certification as a new NP.

In 2004, 141,209 RNs, were prepared to practice as NPs, which included 14,689 NPs with both NP and CNS training. This estimate reflects a 37.3 percent increase (38,380) from the 2000 to the 2004 survey. In 2000, there were an estimated 102,829 NPs, which included 14,643 who were also prepared as CNSs. As reported by the NPs, 77.6 percent (109,582) of APNs with formal preparation as NPs also had national

NP certification. The number with State Board of Nursing recognition was 72.3 percent or 102,142 (see Appendix A, Table 13).

Since the early 1990s, master's degrees have become almost always mandatory for new NPs. The data show that the education of NPs takes place primarily in master's degree programs, with 65.5 percent (92,449) of NPs reporting having completed a master's degree program as part of their formal APN related education. This is an increase in master's degree NP preparation from 2000 (when 62 percent did the same) and 1996 (when 46 percent of NPs had completed a master's degree). In addition to master's NP training, there were others who reported having pursued post-master's certificates as their NP preparation (14,821 or 10.5 percent).

Almost 88 percent (87.7 percent), or 123,857 of the 141,209 NPs were employed in nursing, although only 57.7 percent (81,433) of the NPs (i.e., 65.7 percent of the NPs employed in nursing) were employed with the title of nurse practitioner (see Appendix A, Table 13). The second and third most-common job titles were staff nurse (14,358 or 11.6 percent of those NPs employed in nursing) and professor/instructor (7,715 or 6.2 percent of those NPs employed in nursing), respectively.

Clinical Nurse Specialists

Clinical nurse specialists (CNSs) included those RNs who had formal preparation related to the clinical nurse specialty. Generally, a minimum of a clinical master's degree in nursing has been required as academic achievement in advance of practicing as a CNS.

There were an estimated 72,521 RNs (2.5 percent of all RNs) prepared to practice as CNSs in 2004, including the 14,689 RNs who were prepared as both NPs and CNSs (see below). Between 2000 and 2004, the number of CNSs increased by 5.1 percent (an additional 3,504 CNSs). In 2000, the number of RNs trained as CNSs was 69,017, including 14,643 who were trained as both a NP and a CNS. In 2004, of all CNSs a total of 32,385 had national certification, a 2.1 percent increase over the 2000 level of 31,713 RNs. An estimated 27,379 CNSs had State certification in 2004, a 31.2 percent increase over the 2000 estimate of 20,863 (see Appendix A, Table 13).

The highest education of the vast majority of CNSs takes place primarily in master's degree programs, with 93.3 percent (67,666 CNSs) reported having completed a master's degree program for their CNS educational preparation. An additional 3.8 percent of CNSs (2,731 CNSs) reported having post-master's certificates and 0.3 percent (194 CNSs) reported having doctoral degrees as their CNS educational preparation.

Of all those prepared as CNSs, 85.1 percent (or 61,735 CNSs) were employed in nursing but only 16.5 percent of the prepared CNSs (11,988 and 19.4 percent of those CNSs employed in nursing) used clinical nurse specialist as their position title. Nevertheless, there were numerous respondents who reported having a position title of CNS but who neither appeared from the respondent data to have completed an APN educational program nor otherwise reported completing at least a master's degree in nursing.¹⁷ Among a wide variety of other position titles that prepared CNSs hold were instructor/faculty member

¹⁷ In the July 1999 publication from the National Advisory Council on Nurse Education and Practice (NACNEP) to the Secretary of HHS, "Federal Support For The Preparation Of The Clinical Nurse Specialist Workforce Through Title VIII", NACNEP noted the passing of Federal legislation in 1997 which required that practicing CNSs hold a master's degree in a clinical area of nursing. NACNEP notes, however, that "a substantial proportion of those who have position title as a "clinical nurse specialist" do not have graduate degrees."

(16.2 percent of those employed in nursing or 10,022) and nurse practitioner (15.9 percent of those employed in nursing or 9,802).

Nurse Practitioners and Clinical Nurse Specialists

In 2004, there were 14,689 APNs with preparation as both a NP and a CNS, representing only a slight increase from the 2000 estimate of 14,643. The majority reported to have received APN educational preparation in at least one master's degree program (93.4 percent or 13,716 APNs); this is consistent with the master's educational preparation requirement for CNS's. Others, including some of these 13,716 APNs, reportedly received APN educational preparation through one or more post-master's certificate programs (33.9 percent or 4,973 APNs), or Doctoral degrees (2.6 percent or 377 APNs). Nearly all were employed in nursing (93.4 percent or 13,717 APNs). Most of these nurses prepared as both NP and CNS who were employed in nursing had nurse practitioner as their position title (8,990 APNs or 61.2 percent of those prepared as both NP and CNS and 65.5 percent of those employed in nursing), followed by instructor/faculty member, (1,310 APNs or 9.6 percent of those employed in nursing) and staff nurse (1,072 APNs or 7.8 percent of those employed in nursing). Only 5.7 percent of those employed in nursing (776 APNs) reported clinical nurse specialist as their position title.

Nurse Anesthetists

Nurse anesthetists (NAs) are the third largest group of advanced practice nurses. Included in the nurse anesthetists category were all RNs with formal preparation beyond initial nursing education in which the specialty of anesthesia was studied. Generally, a minimum of a master's degree is currently required for academic achievement in advance of national certification as a new NA. This national certification is a prerequisite to practicing as a NA.

In 2004, 32,523 RNs (1.1 percent of all RNs) were prepared as NAs. In 2000, there were 29,844 NAs, representing a 9.0 percent increase from 2000 to 2004. Virtually all (30,446 or 93.6 percent) NAs had national certification and 24,168, or 74.3 percent, had State recognition in 2004 (see Appendix A, Table 13).

The majority (18,870 or 58.0 percent) of all NAs reported receiving their educational preparation in post-RN certificate/award programs. Just over one-third (12,083 or 37.2 percent) of all nurse anesthetists reported receiving their educational preparation in master's degree programs. An estimated 287 NAs (or 0.9 percent) reported educational preparation through post-master's certificate programs. At least a master's degree is currently required to become a new NA. Almost all NAs, 89.6 percent (29,150 NAs), were employed in nursing, with 26,116 NAs (80.3 percent of all prepared NAs) in positions where the job title was nurse anesthetist. Other job titles included staff nurse (1,142 or 3.9 percent of those employed in nursing) and instructor/faculty member (331 NAs or 1.1 percent of those employed in nursing). NAs who also had formal preparation as a CNS or NP were more likely to be employed with the title nurse anesthetist than either the titles of clinical nurse specialist or nurse practitioner. Many of the rest of those who completed NA programs may be employed in other positions that do not require certification in their specialty.

Nurse Midwives

Among the APNs, there are fewer nurse midwives (NMs) prepared or employed in this specialty than in the other three groups.¹⁸ To assure that NMs were appropriately classified, several screening steps were taken via responses to the survey questionnaire. The formal education beyond initial nursing education had to be at least 9-months in length. A second screen was needed for the relatively large proportion of RNs in the sample who indicated they had formal preparation as NMs and were initially foreign educated. Such nurses usually need additional education to qualify for certification in this country. Generally, a minimum of a master's degree in nursing is currently required for academic achievement in advance of national certification as a new NM. This national certification is a prerequisite to practicing as a NM. After these screening steps were taken, the several hundred RNs who reported NM preparation was ultimately reduced to a corps of 175 who were considered prepared as APNs.

In 2004, there were 13,684 nurses formally prepared as NMs (0.5 percent of all RNs), including 2,892 who had preparation as both NPs and NMs. This estimate, though based on a relatively small sample, represents a 48.2 percent increase in formal NM preparation from 2000, when 9,232 RNs were trained as NMs. Virtually all (93.7 percent or 12,820) of RNs trained as NMs had national certification as NMs and three-quarters (75.2 percent or 10,296) had State Board of Nursing recognition.

The majority of NMs (7,733 or 56.5 percent) reported receiving a master's degree for their educational preparation, while 792 NMs (or 5.8 percent) reported receiving a post-master's certificate and 5,053 NMs (36.9 percent) reported receiving a post-RN certificate. Almost all NMs (89.3 percent or 12,217 NMs) were employed in nursing; with 7,037 NMs (or 57.6 percent of those employed in nursing and 51.4 percent of all NMs) employed with the position title of nurse midwife. Other common job titles included staff nurse (1,636 or 13.4 percent of those employed in nursing) and nurse practitioner (1,131 or 9.3 percent of NMs employed in nursing). Over 10 percent (10.7 percent) were not employed in nursing. NMs who also had formal preparation as a clinical nurse specialist or nurse practitioner were more likely to be employed in the job title of nurse midwife than either the titles of clinical nurse specialist or nurse practitioner. Many of the rest of those who completed NM programs may be employed in other positions that do not require certification in their specialty or may be retired from practice as an NM.

Nurse Practitioners and Nurse Midwives

In 2004, there were 2,892 RNs (less than 1 percent of all RNs) who were prepared as both nurse practitioners and nurse midwives. Comparable information is not available from the 2000 NSSRN as there were not enough observations to make reliable estimates. The largest group reported receiving their APN educational preparation in at least one master's degree programs (45.2 percent or 1,307 NM/NPs), with additional nurses reporting APN educational preparation in at least one post-RN certificate program (33.2 percent or 960 NM/NPs) or post-master's certificate program (536 NM/NPs or 18.5 percent). Most were employed in nursing (80.4 percent or 2,326 NM/NPs) but only 29.9 percent of the prepared NM/NPs and 37.2 percent of those employed in nursing used nurse midwife as their position title (865 NM/NPs). Other common titles were nurse practitioner (29.4 percent of those employed in nursing or 684 NM/NPs) followed by staff nurse (9.0 percent of those employed in nursing or 209 NM/NPs).

¹⁸ In the survey, only 98 RNs responded that they were currently employed with an NM position title.

Non-White, Hispanic, or Latino Advanced Practice Nurses

Only 8.0 percent (19,325 RNs) of APNs were from racial/ethnic minority backgrounds (that is, non-White non-Hispanic, Hispanic, or Latino APNs of any race). Non-White, Hispanic, or Latino nurses were most likely to be found among NPs (8.9 percent or 12,529 NPs). In addition, non-White non-Hispanic, Hispanic, or Latino APNs of any race comprised 7.8 percent (2,538 NAs) of all NAs, 7.6 percent of NMs (1,040 NMs), and 6.3 percent of CNSs (4,547 CNSs).

REGISTERED NURSES IN THE WORKFORCE

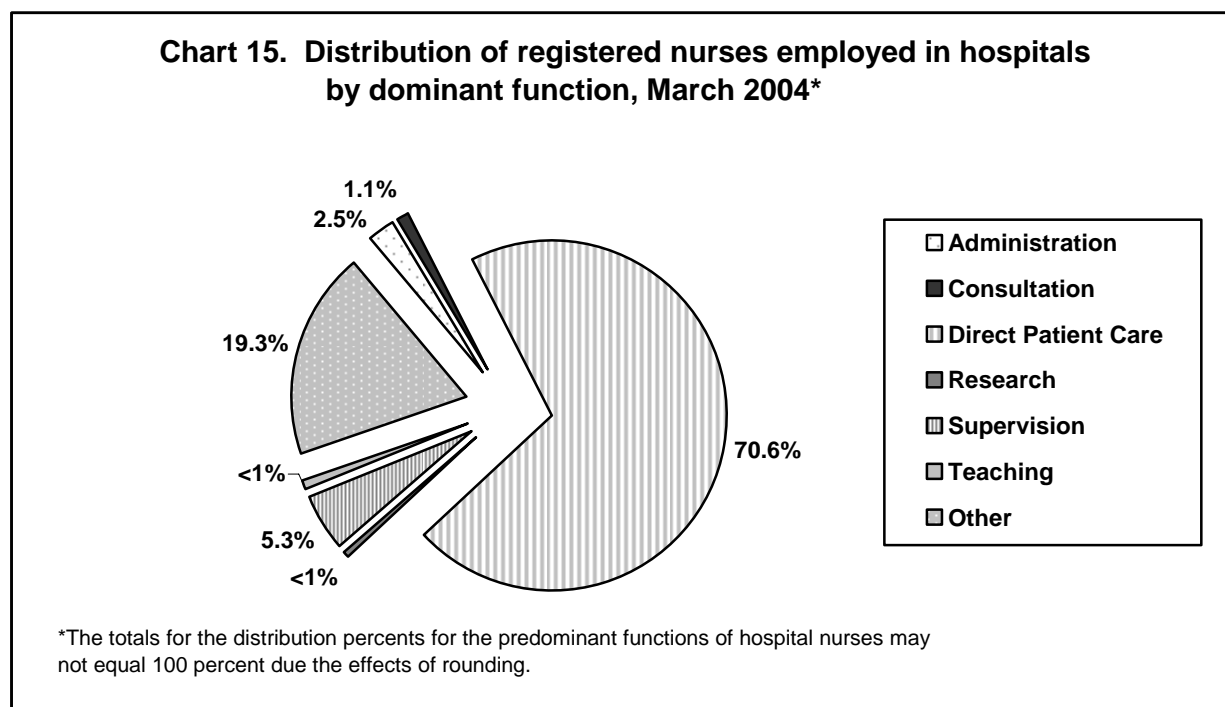
In 2004, 83.2 percent of the RN population, or an estimated 2,421,351 RNs, were employed in nursing. This estimate represents a 10.0 percent increase since 2000 (when 2,201,813 or 81.7 percent of RNs were employed in nursing). Although RNs can be found in all sectors of the health care system, the predominant employment setting remains the hospital, employing 1,360,847 or 56.2 percent of all RNs. The next largest group was ambulatory care settings, with 11.5 percent or 277,774 RNs. Ambulatory care settings include physician-based practices, nurse based practices, and health maintenance organizations. The next largest group was composed of an estimated 259,911 (10.7 percent) who worked in public/community health settings, including State or local health departments, community based home-health agencies, various types of community health centers, student health services, and occupational health services. The fourth largest employer of RNs in 2004 was nursing homes/extended care facilities, which employed a total of 153,172 (6.3 percent) of all RNs employed in nursing. The remainder of employed nurses worked in diverse settings such as nursing education (2.6 percent), school health agencies (3.2 percent), and insurance claims/benefits (1.8 percent; see Appendix A, Table 16). Over 4 percent (4.3 percent) worked in settings categorized as “other”, composed of RNs working in correctional facilities, clinical research, home-based self-employment, private-duty nursing, call-center/telephone triage, and pharmaceuticals/medical-devices settings.

The percent of RNs employed in hospitals decreased slightly between 2000 and 2004, declining from 59.1 percent to 56.2 percent. However, the actual number of RNs employed in hospitals increased by 4.7 percent, from 1,300,323 RNs in 2000 to 1,360,847 in 2004. This is a somewhat greater rate than the 2 percent increase from 1996 to 2000. Ambulatory care showed the greatest gain in RN employment from 2000 to 2004, with a 32.7 percent increase in RNs reporting employment in ambulatory care settings (from 209,324 to 277,774 RNs). Some respondents may have had difficulty in distinguishing between ambulatory in a hospital setting versus ambulatory care outside a hospital setting such as: a clinic within a hospital, an ambulatory surgical center in a hospital or run by a hospital off-site, an ambulatory center nearby a hospital, a doctor’s private office within a hospital, and a doctor’s office nearby a hospital.

Over one quarter (25.1 percent) of all employed RNs (608,940), could not specify one type of patient with whom they worked, as they worked with multiple patient types. The majority of employed RNs who could specify a patient type that they, or their unit, cared for reported providing general adult care (513,834 or 21.2 percent), followed by pediatric care (176,698 or 7.3 percent) and cardiovascular care (171,219 or 7.1 percent; see Appendix A, Table 17). Comparisons cannot be made with the 2000 NSSRN due to a change in the scope of the question to include all employed nurses, instead of nurses only employed in hospital inpatient or outpatient units. Of all employed RNs, 1,584,615 RNs (or 65.4 percent) reported spending more than 50 percent of their time in direct patient care, although 81.9 percent of employed RNs (1,984,224 RNs) spent at least some time (1 percent or more) in direct patient care.

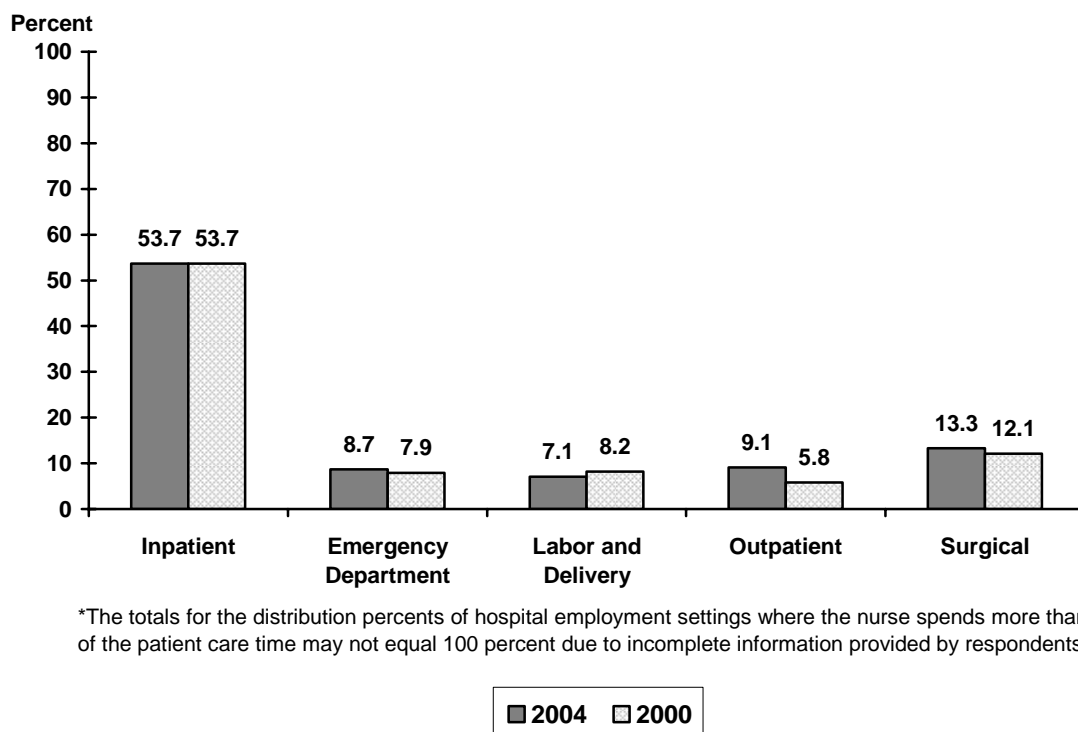
RNs employed in hospitals were asked to report the function in which they spent 50 percent or more of their time. Over 19 percent (19.3 percent) either could not or did not report a dominant function or reported “other” as the dominant function. Over two-thirds of RNs employed in hospitals (70.6 percent)

reported spending more than 50 percent of their time in direct patient care, as illustrated by Chart 15. Just over 5 percent (5.3 percent or 71,696 RNs) of hospital employed RNs reported spending more than 50 percent of their time in supervisory capacities and 2.5 percent (33,446 RNs) reported spending more than 50 percent of their time in administration. However, 89.0 percent of all hospital employed RNs (1,211,632 RNs) reported spending at least some time (1 percent or more) in direct patient care.



As shown in Chart 16, inpatient bed units are where the majority of hospital employed nurses spend more than half their direct patient care time. Among nurses who provided direct patient care services and reported the type of work unit where they spent more than half their patient care time, 53.7 percent reported working in inpatient bed units, similar to 2000 when 53.7 percent of RNs reported working in these units. In 2004, 382,331 RNs reported working in general/specialty inpatient bed units; in 2000, 369,832 RNs reported working in these units, an increase of 3.4 percent. Hospital-employed RNs working in outpatient departments experienced the greatest increase at 76.7 percent, from 69,707 in 2000 to 123,166 in 2004. Hospital-employed RNs working in critical care or step down units increased 18.6 percent, from 272,074 RNs in 2000 to 322,740 RNs in 2004 (see Appendix A, Table 18). Comparisons between the results of the 2000 and 2004 NSSRN surveys with respect to this issue must be interpreted with caution as there was a high number of hospital-based RNs who did not specify a work unit in 2000 (8 percent) relative to 1.3 percent of RNs reporting the same in 2004. In addition to those unknowns without any response by the nurse, other responses did not provide an individual unit for the nominal list of specific units of Table 18. However, in 2000, an additional 4.0 percent reported no specific area or some other specific area, in 2004, 4.5 percent of these hospital nurses providing direct patient care reported working in multiple units, no specific area, or other specific area.

Chart 16. Selected hospital work units for registered nurses providing some direct patient care, 2000 and 2004*



Characteristics within Employment Setting

An estimated 29.7 percent or 720,283 of the 2,421,351 RNs employed in nursing were employed in nursing part-time. In general, family status made a difference in whether nurses were employed full-time or part-time. Employed married nurses with children, particularly those with children under the age of six, were more likely than other employed nurses to be employed on a part-time basis. Overall, nearly 30 percent (29.8 percent) of the 2,421,351 employed RNs were working on a part-time basis. However, slightly over 45 percent (45.4 percent) of employed married nurses with children younger than 6 worked part-time. Married nurses with children under 6 years of age represented 13.8 percent of all employed nurses (see Appendix A, Table 6). In addition, these married nurses with children under 6 years of age were 10.7 percent of all RNs employed full-time in nursing as well as 7.5 percent of all employed RNs.

The employment status (i.e., full-time or part-time employment) of nurses varied according to the employment setting. The highest percentage of part-time employees was found among RNs working in school health (37.6 percent of all RNs employed in school health) and ambulatory care settings (34.4 percent of all RNs employed in ambulatory care). The lowest percentage of part-time workers was found among nurses working in the insurance/claims/benefits field (12.5 percent of all RNs employed in this setting) and policy/planning/licensing/regulatory agencies (14.8 percent of all RNs employed in this setting; see Appendix A, Table 19).

In 2004, after excluding the hours of work information of those nurses with any on-call hours, the average scheduled work hours per year for full-time nursing positions, including paid vacations, holidays, and sick

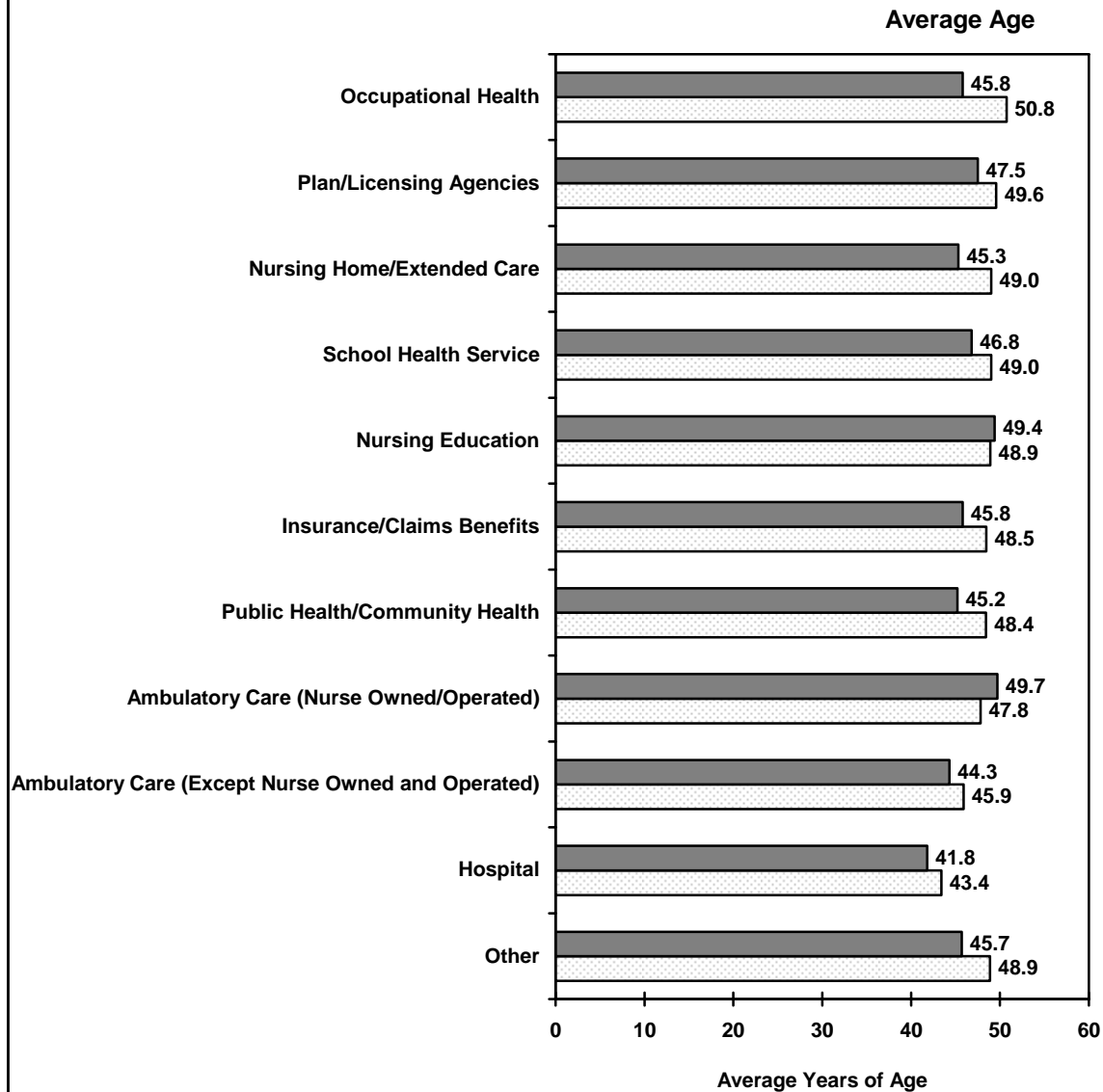
leave was 2,160 hours; for part-time nursing positions it was 873 hours (see Appendix A, Table 19). Full-time nurses worked an average of 7.5 hours of overtime per week, while part-time nurses worked an average of 5.6 hours of overtime (see Appendix A, Table 20). Due to a difference in data collection practices, overtime hours cannot be accurately compared with the data collected in 2000¹⁹.

Nurses in all employment settings tended to work more hours than they were scheduled. However, the greatest amount of overtime for full-time nurses were in nursing education (8.5 hours per week). The least amount of weekly overtime hours for full-time nurses was found in the occupational health (5.7 hours) and ambulatory care settings (5.3 hours). For part-time nurses, there were not enough data points for a reliable analysis (see Appendix A, Table 20). For full-time employed RNs with overtime, 32.5 percent, or 2.4 of their average weekly 7.5 overtime hours, were mandatory. Staff nurses worked fewer hours of overtime and a slightly smaller proportion of this overtime was mandatory than for all other RNs. This finding may be partly due to the differences between hourly and salaried nurses, the latter of whom may be required to work, or believed they are required to work, additional hours per week as part of their job duties and base salary. For full-time staff nurses, 31.7 percent of their average weekly 7.5 hours of overtime were mandatory; for all other RNs, 35.5 percent of their 7.5 average weekly hours of overtime were mandatory (see Appendix A, Table 21). This finding held true for staff nurses in hospitals, where the average amount of weekly overtime for staff nurses was 7.5 hours compared to 7.9 hours for non-staff nurses. Additionally, for a greater percent of non-staff nurses employed in hospitals, compared with staff nurses employed in hospitals, overtime was mandatory (39.4 percent for non-staff nurses versus 29.4 percent for staff nurses).

As indicated in earlier surveys, younger nurses were more likely than older nurses to be employed in hospitals. In 2004, the average age of the hospital nurse was 43.4, 2 years less than the average age of 45.4 for all employed RNs. Nurses in occupational health had the highest average age at 50.8 years (see Chart 17). Across all settings, staff nurses were on average younger than non-staff nurses, 43.6 years of age on average versus 48.0 years of age. This finding held true of nurses employed in hospitals, where staff nurses were 42.1 years of age on average versus 47.2 years of age for non-staff nurses.

¹⁹ In 2000, the questionnaire asked two questions, “16a. Approximately how many hours are you usually scheduled to work during a normal workweek (as defined by the organization) at your principal nursing position? 16b. How many hours did you actually work during the week beginning on March 20, 2000? (Include overtime but exclude holidays, sick leave, vacation, and time not worked.)” Overtime hours were derived by subtracting hours scheduled from hours worked. In 2004, the questionnaire asked to specify in this question “Please provide information on the number of hours you worked in your last full workweek at your principal nursing position in nursing a) Number of hours worked in your last full workweek (including paid hours of on call duty and overtime); b) Number of hours reported in Item33a that were paid on-call; c) Number of hours reported that were paid as overtime; and d) Number of overtime hours reported that were mandatory/unscheduled.

**Chart 17. Average age of employed registered nurses
for selected employment settings,
March 2000 and March 2004***



*Only those who provided employment setting and age information are included in the calculations used for this chart.

□ 2004 Average ■ 2000 Average

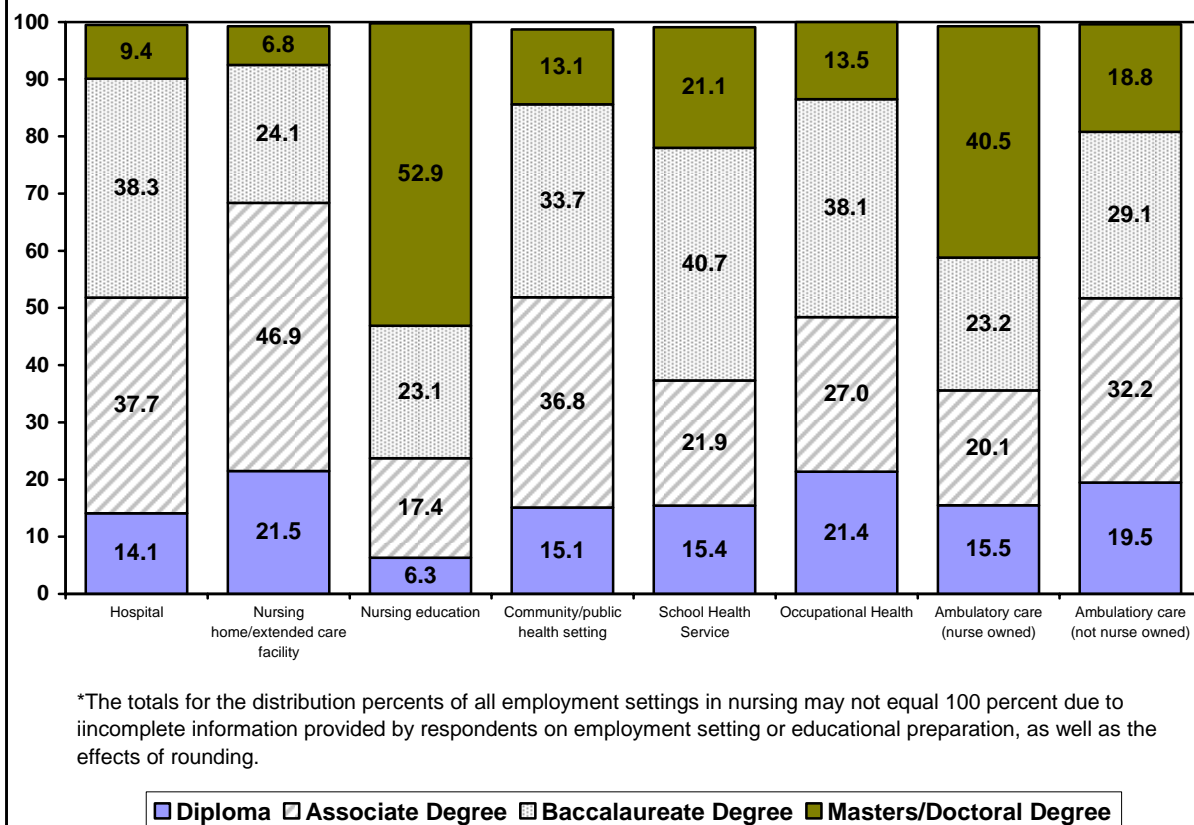
Over three-fourths (77.6 percent) of employed RNs under the age of 30 worked in hospitals. In contrast, less than half (46.2 percent) of employed RNs over the age of 50 worked in hospitals (see Appendix A, Table 22).

In most employment settings, the majority of nurses had an associate or baccalaureate degree as their highest nursing or nursing-related educational preparation (see Chart 18 and Appendix A, Table 23). Seventy-six percent of the nurses working in hospitals had an associate (37.7 percent) or baccalaureate degree (38.3 percent). Nursing homes and extended care facilities were less likely than other patient care service settings to have nurses with baccalaureate and higher degrees. Less than a quarter (24.1 percent) of nurses employed in nursing home/extended care facilities had baccalaureate degrees, while these settings drew 68.4 percent of their nurses from among those whose highest preparation was that of a diploma (21.5 percent) or associate degree (46.9 percent). The majority of those in nursing education (52.9 percent) had a master's or doctoral degree. Nursing education had the largest proportion of RNs with baccalaureate degrees or higher (76.0 percent), while nursing homes/extended care facilities had the least (30.8 percent).

Registered Nurses in Nursing Faculty Positions

One issue that has received considerable attention in recent years is the shortage of nurses in faculty positions involved with the educational preparation of registered nurses. Based on the setting and principal nursing position categories used in the 2004 NSSRN, the faculty position is being defined for those nurses with principal position titles of dean, professor or instructor involved with nursing education of RNs in diploma, associate, baccalaureate, and/or higher nursing degree program settings. It is estimated that 30,470 RNs in March 2004 were employed as nursing faculty in principal nursing positions within these RN programs settings. Of these faculty nurses, 4.8 percent were in diploma programs, 39.4 percent were in associate degree programs, and 55.8 percent were in baccalaureate and/or higher degree programs. The average age of faculty nurses was 51.6 years, but the estimated average age of faculty nurses with doctorates in nursing or a related field was 55.4 years. However, the age group with the highest percent of faculty was the 50 to 54 year age group with 24.9 percent of faculty in this age group. An additional 27.2 percent were in the age groups 40 to 50 and 5.4 percent of RNs in faculty positions were in the age group 25 to 34 years. Although only 8.0 percent of faculty nurses were in the under 40 age group, 39.4 percent were over age 55.

Chart 18. Distribution of employed registered nurses by highest nursing or nursing-related educational preparation for selected employment settings, March 2004*



Base of Employment

The vast majority of employed RNs (90.2 percent or 2,184,921) were employees of the facility in which they worked. About 5.5 percent of RNs were self-employed, and 2.3 percent worked in their principal nursing position through a temporary employment service (see Appendix A, Table 24).

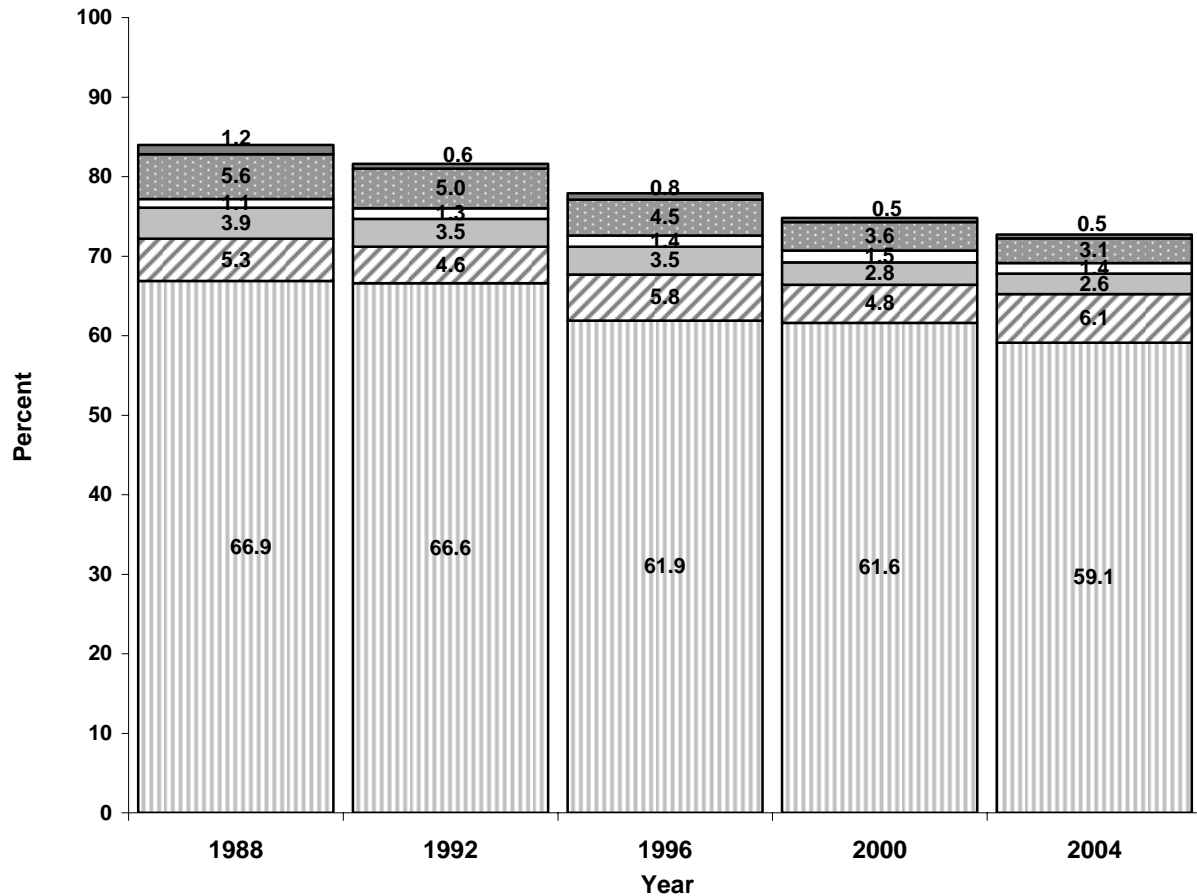
Approximately 54,493 nurses were employed in their principal position through a temporary employment service in 2004, and 3,039 of these nurses were employed in both a principal and secondary nursing position through this kind of agency. This temporary employment principal position level reflects a 37.9 percent increase in the comparable number in 2000 (39,505) and continues the increasing trend which the NSSRN first observed in 1996. In 2004, an additional 37,263 RNs were employed by a temporary agency for a secondary position aside from their primary nursing position. Considered together, the total number of nurses employed through temporary employment services in 2004 was 91,756, or 3.2 percent of all RNs. RNs employed through temporary services for their primary nursing position worked an average of 35.6 hours per week. The majority of RNs employed through temporary services for secondary nursing positions (58.9 percent) worked less than 500 hours per year.

Position Levels

Over fifty-nine percent (59.1 percent), or 1,431,053 of the 2,421,351 employed nurses in 2004 were in staff nurse positions. This category included charge nurse, float nurse, public health nurse, school nurse, travel nurse, and team leader positions (see Appendix A, Tables 25 and 26). Although the number of staff nurses increased by 5.4 percent from 1,357,349 in 2000, their proportion of the total nurse workforce has declined from 61.6 percent in 2000 and 66.9 percent in 1988. A total of 222,411, or 9.2 percent of employed RNs, were in head nurse or supervisory positions in 2004 and 125,011 or 5.2 percent were in administrative positions.

Charts 19a and 19b illustrate the shifts that have occurred in the distribution of RNs by selected position titles since the late 1980s. In addition to the decline in the percentage of employed nurses who are staff nurses, there has been a notable decline in the percentage of those with the position title of supervisor (from 5.6 percent to 3.1 percent during the period from 1988 to 2004). At the same time, significant increases have occurred in the percentage of those with the position title of nurse practitioner, growing from 1.3 percent of employed RNs in 1988 to 3.5 percent in 2004.

Chart 19a. Distribution of registered nurses by selected position titles, 1988-2004*



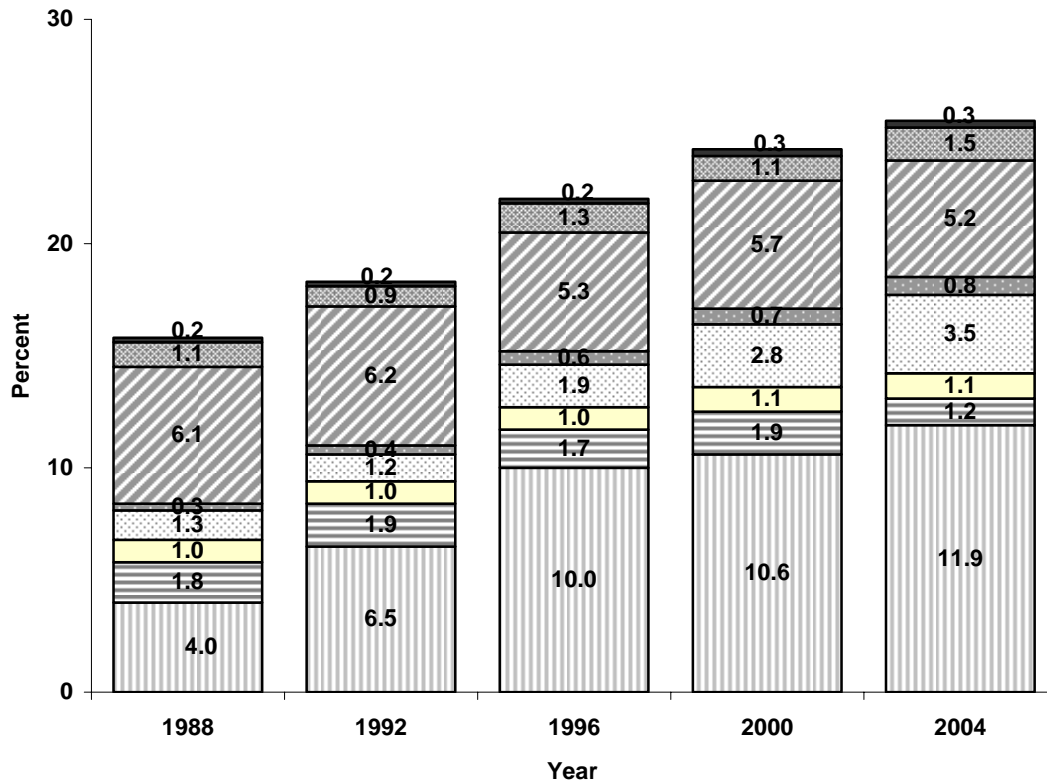
*The totals for the distribution percents of all positions in nursing may not equal 100 percent due to incomplete information provided by respondents and the effects of rounding.

**In 2004, the definition of instructor included some subcategories outside of traditional nursing programs.

☐ General Duty/Staff Nurse
☐ Instructor **
☐ Supervisor

☐ Head Nurse
☐ Nurse Clinician
☐ Private Duty Nurse

Chart 19b. Distribution of registered nurses by selected position titles, 1988-2004*

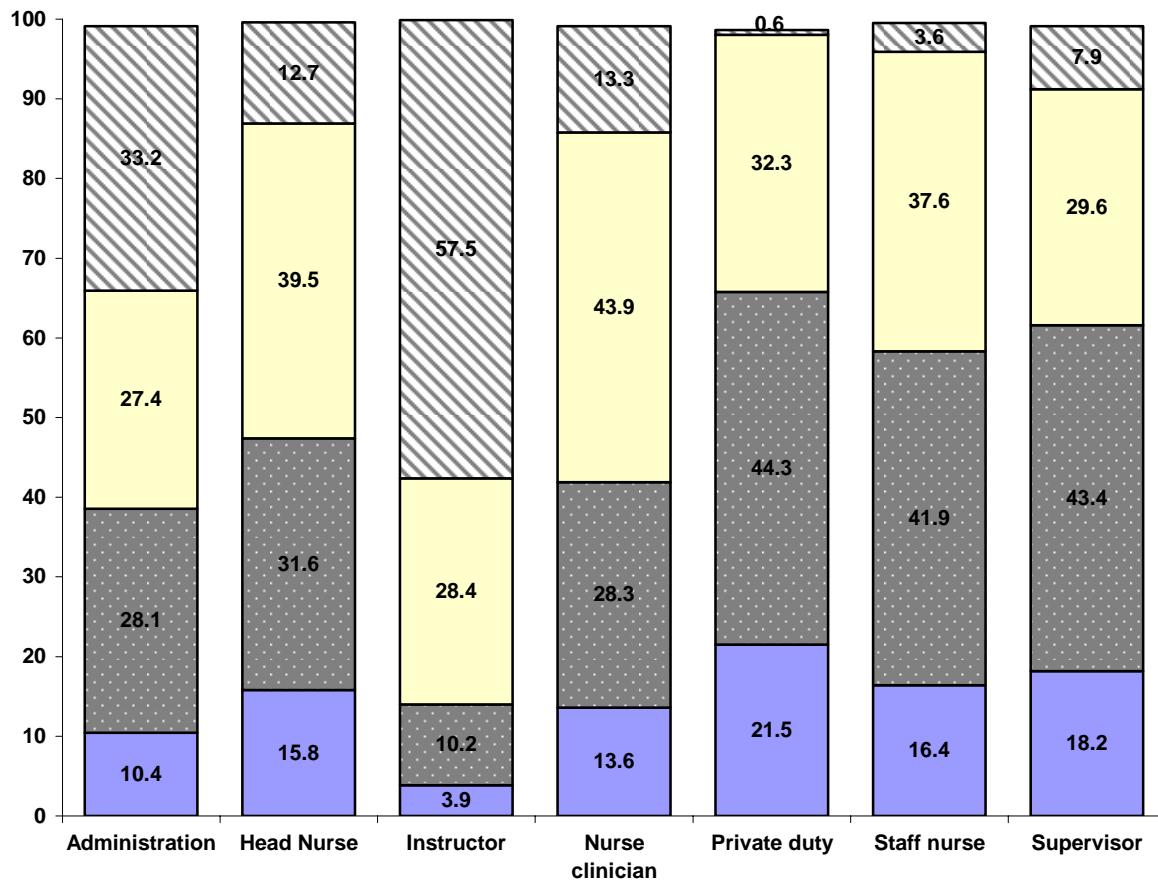


*The totals for the distribution percents of all positions in nursing may not equal 100 percent due to incomplete information provided by respondents and the effects of rounding.

Other	Clinical Nurse Specialist	Nurse Anesthetist
Nurse Practitioner	Researcher	Administrative
Consultant	Nurse Midwife	

The variation in educational preparation according to position title is illustrated in Charts 20a and 20b and Table 27 in Appendix A. The majority of those with each of the following respective position titles had less than baccalaureate preparation: private duty nurse (65.8 percent), supervisor (61.6 percent), staff nurse (58.3 percent), and home health nurse (58.6 percent). Nearly half of head nurses (47.4 percent) had less than baccalaureate preparation. In Chart 20b, about 50 percent of those reporting principal positions as a CNS do not also report having at least a master's degree, which is usually required in most States to fully practice as a CNS. See also footnote 17 for past acknowledgment of this perceived inconsistency in reporting of CNS education and position title.

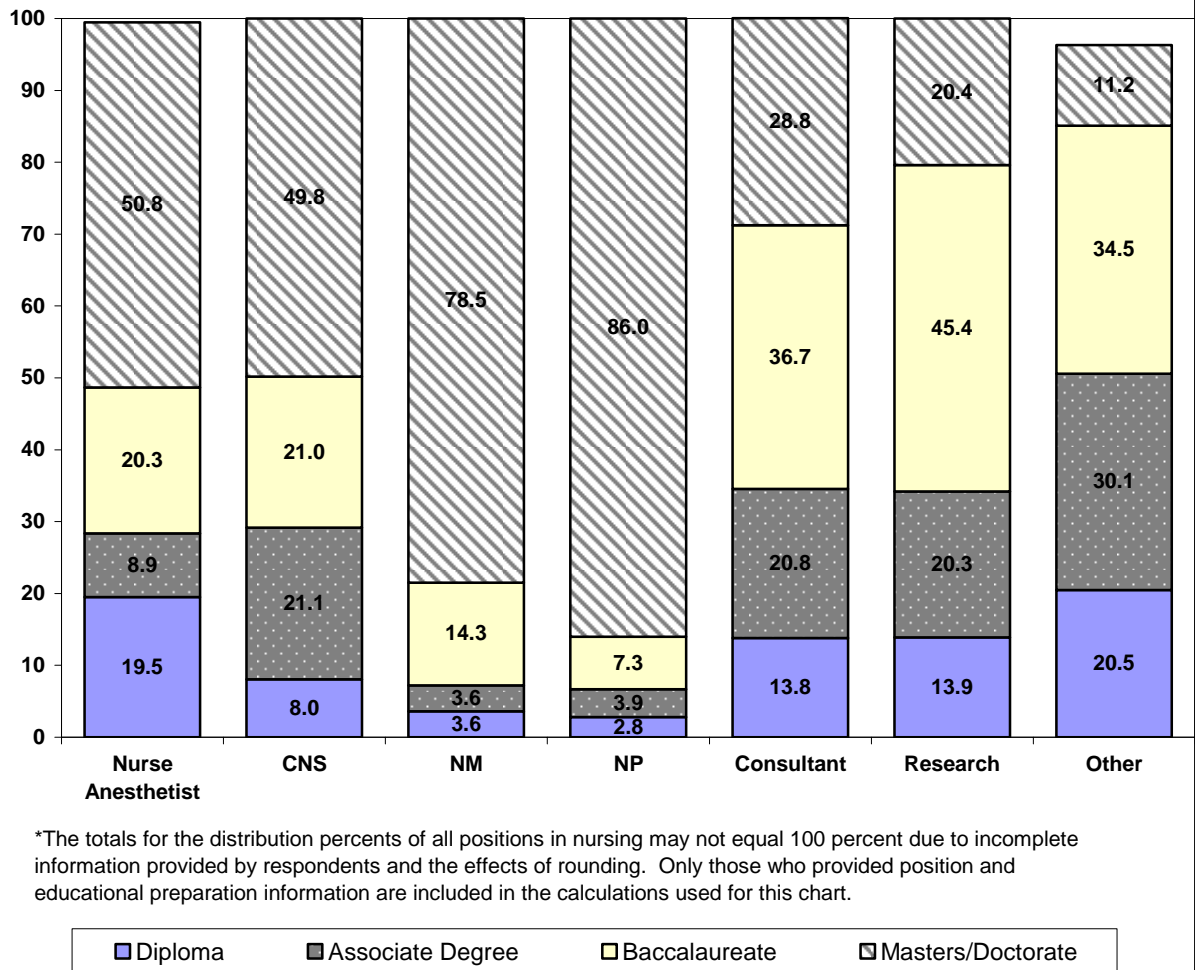
Chart 20a. Distribution of registered nurses with selected position titles by highest nursing or nursing-related educational preparation, 1988-2004*



*The totals for the distribution percents of all positions in nursing may not equal 100 percent due to incomplete information provided by respondents and the effects of rounding. Only those who provided position and educational preparation information are included in the calculations used for this chart.



Chart 20b. Distribution of registered nurses with selected position titles by highest nursing or nursing-related educational preparation, 1988-2004*

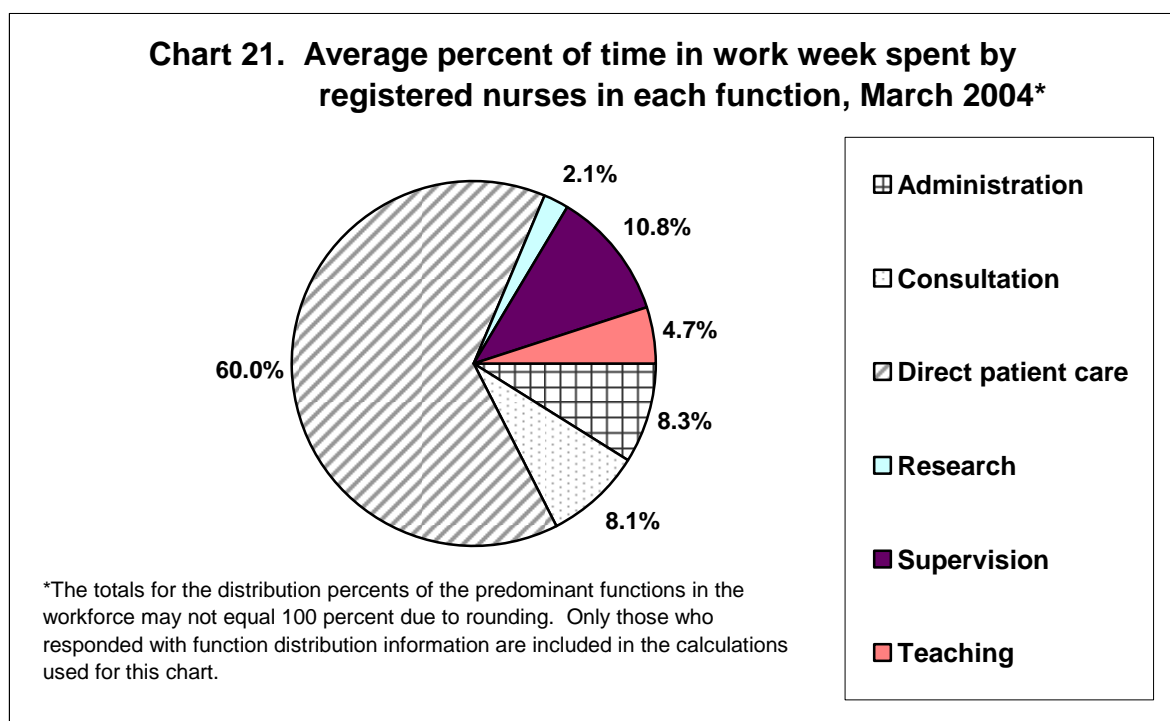


Functions During Usual Workweek

Overall, the aggregate percent of time RNs spent in direct patient care was 60 percent in 2004, with significant percents of overall time spent in supervision (10.8 percent) and administration (8.3 percent). (See Chart 21). These are slight reductions from 2000 for two of these functions, where the direct patient care percentage of time was 63 percent and administration was 11 percent.

In 2004, an estimated 65.4 percent of RNs (1,584,615) employed in nursing spent at least 50 percent of their usual workweek in direct patient care activities; down from the 2000 estimate of 68.6 percent of RNs spending at least 50 percent of their workweek in direct patient care, and down from the 1996 estimate of 66.9 percent of all RNs spending their workweek in this manner. Nearly half of RNs employed in nursing, 49.8 percent (1,205,389) spent at least 75 percent of their time in direct patient care activities (see Appendix A, Table 28). Nurses with less than a master's degree averaged 60.8 to 64.5 percent of their usual workweek in direct patient care activities, and from 10.6 to 11.4 percent of their workweek on

supervisory activities (see Appendix A, Table 29). Nurses with master's degrees averaged 44.5 percent of their time in direct patient care, 15.6 percent of their time in administration, and 11.4 percent in teaching. Nurses with doctorates averaged 16.5 percent of their time in direct patient care, 27.7 percent of their time in teaching, and 23.4 percent in administration. Doctorally prepared nurses were the only group that spent significant time (e.g., over 10 percent) in research. In 2004, they averaged 12.8 percent of their usual workweek in research, a slight increase over the 2000 average of 11.4 percent and the 1996 average of 9.5 percent.



Recent Indices of Annual Salaries/Earnings Trends

In March 2004, the overall average annual earnings of full-time employed registered nurses in their principal nursing positions was \$57,785 (see Appendix A, Table 30). This is a 23.5 percent actual increase in earnings from the 2000 NSSRN average of \$46,782. However, as noted in Chapter II, there was a change in the context of the question from 2000 to 2004. In 2000, the question asked for income in the year 2000, requiring the RN to estimate income or report for the previous year. In 2004 the question did not ask for income in a specific year, only for annual income without respect to the time of the response²⁰. The 2004 question text also specified that RNs should include overtime and bonuses but exclude sign on bonuses. The 2000 questionnaire text did not address this kind of income. As indicated below and in the respective Appendix A Tables, annual earnings varied by level of nursing education, position, employment setting, and geographic location.

²⁰ The 2004 questionnaire text was "Please estimate your current gross annual earnings (pre-tax) from your principal nursing position, include overtime and bonuses, but exclude sign on bonuses." In 2000 the questionnaire text was "Please specify the annual salary/earnings for your principal nursing position only. What is your gross annual salary before deductions for taxes, social security, etc.? If you do not have a set annual salary (for example, you are part-time, private duty, or self-employed), estimate your annual earnings for 2000."

Average annual earnings varied according to the highest level of nursing or nursing-related educational preparation (see Appendix A, Table 31). The pattern of earnings is predictable in most instances, with nurses with advanced degrees achieving higher earnings. For almost all positions where master's-prepared RNs were employed in significant numbers, their average earnings were higher than those with diploma, associate, or baccalaureate degrees. The earnings of master's-prepared nurses averaged \$74,377. Nurses educated at the doctoral level averaged slightly higher earnings at \$80,795.

In those categories where the educational preparation was less than the master's level, the average earnings were noticeably lower. The overall average annual earnings for those whose highest nursing or nursing-related educational preparation was a diploma was \$56,504. Those whose highest nursing education was a baccalaureate degree had slightly higher average annual earnings than for those who held a diploma (\$57,081). Earnings for those with diplomas and baccalaureate degrees as their highest nursing or nursing-related educational preparation were about 7.4 and 8.5 percent higher, respectively, than the average earnings for those with associate degrees (\$52,610) as the highest nursing or nursing-related education. Earnings and education patterns appear to be more complex than simply assuming that higher levels of education automatically translate to higher earnings. Earnings and education patterns are complex and subject to many variables. For example, larger proportions of diploma nurses in the workforce have more years of experience than do those with baccalaureate or associate degrees. These circumstances of the workforce may at least partly explain why diploma earnings appear to be competitive with baccalaureate earnings.

Comparisons of nurses' earnings from 2000 and 2004 were made among each of the levels of nursing education, to determine whether the increases were consistent across degree of highest preparation. Increases were also adjusted for changes in the CPI,²¹ to determine the real increase in RN earnings. Adjustments for changes in the CPI were made based on average annual CPI rate of increase of 2.3 percent, with a resulting 13.9 percent real increase between 2000 and 2004.

The average annual increase in RN salaries overall was estimated at 5.4 percent from 2000 to 2004, based on an overall actual average earnings increase of 23.5 percent from 2000 to 2004. However, with an adjustment for the average yearly increase of CPI through this time period (2.3 percent), the real average annual rate of increase was 3.1 percent. There was a wide range in the rate of increases in earnings across the levels of highest nursing or nursing-related educational preparation, as RNs with baccalaureate and doctoral degrees experienced the largest increases. Nurses whose highest nursing or nursing-related education was either a diploma or associate degree received average annual increases of 4.9 percent and 5.4 percent (e.g., CPI adjusted average annual earnings increases of 2.6 and 3.1 percent), respectively. RNs with baccalaureate degrees as their highest nursing or nursing-related education had average annual earnings increases of 5.2 percent (2.9 percent when adjusted for the CPI). Those with nursing or nursing-related master's degrees received average annual increases of 5.0 percent (CPI-adjusted real earnings were at a 2.7 percent rate of increase), and those with doctoral degrees experienced the biggest average actual annual earnings increase with 6.2 percent overall (3.9 percent when adjusted for the CPI).

²¹ Adjustments for changes in the CPI were made based on average annual rates of increase (2.3 percent) and an overall real percent increase between 2000 and 2004 of about 14 percent. When an average annual increase is adjusted for CPI, the average increase is calculated and the average annual increase in the CPI is subtracted from this number. When an overall percent increase is adjusted for CPI, the percent increase is calculated, and then the percent increase in CPI is subtracted from it.

There are large variations in actual earnings by position type from 2000 to 2004. Staff nurses, the largest group of employed nurses, had average earnings of \$53,086 in 2004. The staff nurse earnings level is about 8 percent below the overall average earnings for all RNs with full-time employment in nursing. However, this is an improvement over 2000, when staff nurses earned \$42,133, on average 10 percent less than RNs as a whole.

APNs had earnings that were higher than the average for RNs overall. Nurse anesthetists had the highest average earnings (\$129,530) among RNs in all employment settings and position types. Nurse midwives had average earnings of \$73,254; NPs had average earnings of \$70,581; and CNSs with master's degrees had average earnings of \$70,470²². Nurse anesthetists experienced a 38.1 percent increase in average earnings from the 2000 survey, with NPs reporting the second largest increase at 17.4 percent.

Annualized growth rates in actual earnings from 2000 and 2004 were compared for selected positions. While the average reported earnings for all full-time nurses increased by 5.4 percent on an annual basis between 2000 and 2004, there was a broad range to the level of increase across positions. Categories of nursing positions that experienced annual rate increases which were higher than the average rate of increase include: certified nurse anesthetist (8.4 percent) clinical nurse specialist (6.2 percent), and staff nurse (5.9 percent). For staff nurses, this is a difference from the 2000 NSSRN when staff nurses experienced among the lowest annual increases (at 2.2 percent). Staff nurse earnings in hospitals increased by 6.1 percent. The greater increases for staff nurses than RNs in general (whose earnings increased by 5.4 percent) may indicate that demand for staff nurses is beginning to be reflected in the compensation for these RNs.

Annual earnings varied according to the setting in which the RN was employed. At \$59,963, the average annual earnings for those working full-time in the hospital setting were higher than the overall full-time earnings average across all types of settings. Those settings where RNs earned less than the overall average included public health settings, at \$52,347; nursing homes, at \$53,796; and school health services, with the lowest average annual earnings of \$42,249. However, the average earnings of RNs employed in nursing homes increased by 22.9 percent between 2000 and 2004.

The hospital setting earnings average of \$59,963 in 2004, when compared to the 2000 average of \$47,759, reflect a substantive real increase of 16.1 percent over the CPI, based on a 25.6 percent actual increase. The average annual rate of increase of 5.9 percent is also greater than the overall 5.4 percent annual rate of increase for RNs in general. Of note, the information in Appendix A, Table 30 indicates that hospital-based RNs of each position type generally average higher earnings than their position counterparts in other employment settings such as public health nursing, nursing homes, ambulatory care, occupational health services, and student health services.

Looking at the full-time earnings of staff nurses working in the hospital setting across the country, RNs with associate degrees as the highest nursing or nursing-related education had average earnings of \$53,514. For those whose highest nursing or nursing-related education was a diploma, the average earnings were \$58,413. For the baccalaureate-prepared hospital staff nurse, the average earnings were \$55,392. It is important to note that these numbers do not take into account years of experience in nursing, an important factor to be considered when conducting an analysis of earnings and differences in education.

²² Due to the mandated educational requirements for CNSs (see footnote 17) this analysis was run on the average earnings of CNSs with master's degrees only.

A significant percent of employed nurses work either part-time in their principal job or work more than one job in nursing. An estimated 14.5 percent of all employed RNs held other paid nursing positions in addition to their principal nursing position. For all RNs employed in nursing (regardless of whether they had more than one position and if they worked full-time or part-time in their principal position), the average total annual earnings were \$52,080. This is lower than the \$57,749 for nurses employed full-time in their principal nursing position and only slightly greater than the average annual earnings of those with only one full-time or part-time position (\$50,452). If RNs were employed in more than one nursing position, the average earnings increased to \$61,111. Those RNs employed part-time in nursing only had overall average earnings of \$34,184; those who worked in more than one part-time position earned \$44,633; and those who worked only one part-time position earned \$32,002 (see Appendix A, Table 32).

Job Satisfaction

The level of job satisfaction indicates the general attitude of RNs toward their work. There is a wealth of empirical literature linking job satisfaction and other important workplace features, such as employee turnover. Correspondingly, there is an emerging body of work linking job satisfaction with quality of patient care.

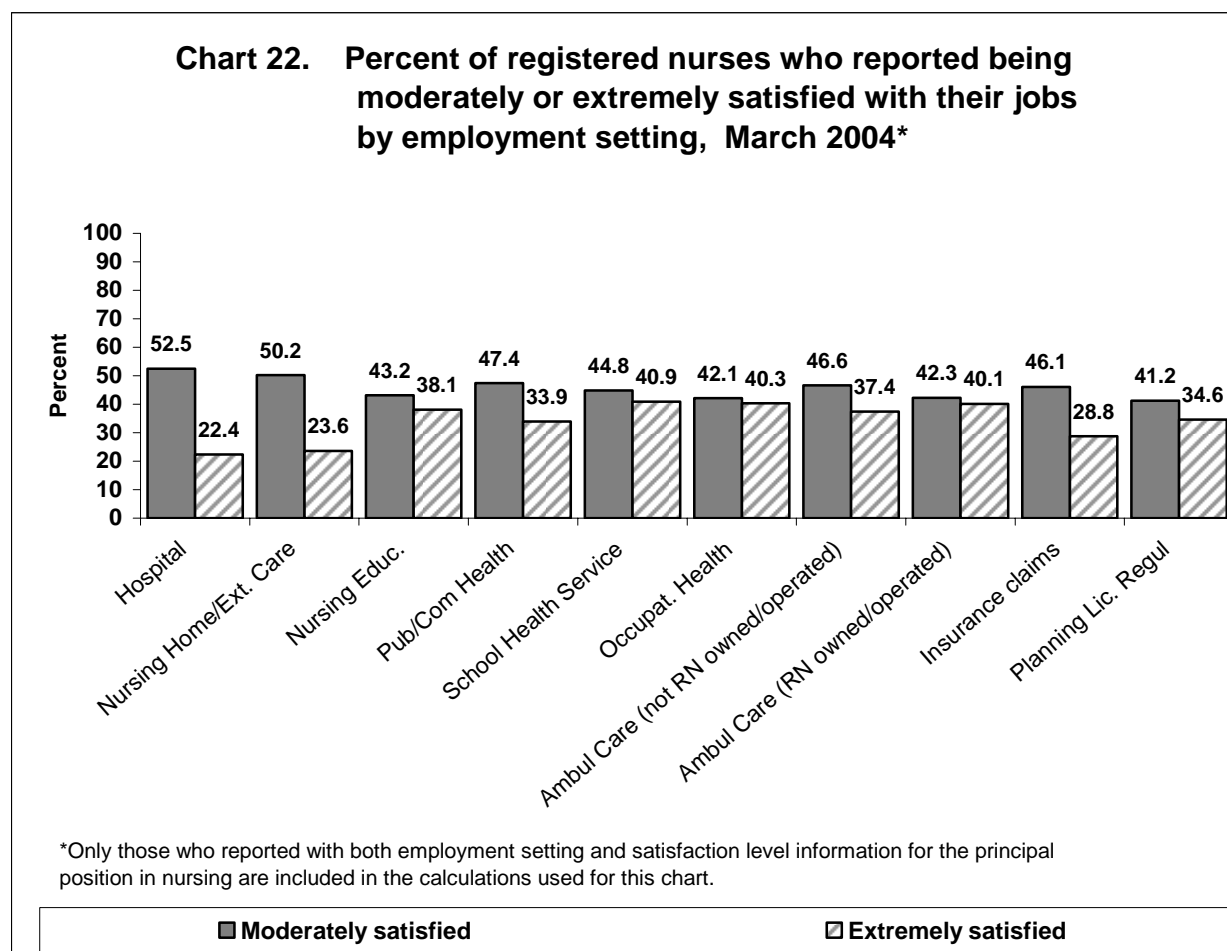
The 2004 survey also examined job satisfaction and reasons for not working in nursing or for changing positions, of the nurses currently employed in nursing. Across the entire sample, just over three-quarters of nurses (76.4 percent) reported being either extremely satisfied (26.9 percent) or moderately satisfied (49.5 percent) in their current position (see Appendix A, Table 33). Only 13.5 percent of nurses employed in nursing were dissatisfied (2.8 percent extremely dissatisfied and 10.7 percent moderately dissatisfied). The 76.4 percent of RNs moderately or extremely satisfied with their jobs is greater than the 69.5 percent of RNs who were moderately or extremely satisfied in 2000,²³ but is lower than levels seen in the employed general population. Data from the General Social Survey of the National Opinion Research Center indicate that in 2002²⁴, 89.1 percent of employed individuals in the U.S were moderately or extremely satisfied with their jobs.

Levels of job satisfaction vary by employment (see Chart 22). Nurses working in nursing homes/extended care facilities reported the lowest levels of job satisfaction, with 73.8 percent saying they were extremely satisfied (23.6 percent) or moderately satisfied (50.2 percent) with their jobs. RNs working in hospital and insurance claims/benefits settings also reported lower levels of overall job satisfaction at 74.9 percent each, although there were differences in the levels of moderate or extreme job satisfaction. For RNs working in hospitals, 52.5 percent were moderately satisfied with their jobs compared with 46.1 percent of RNs working in insurance claims/benefits settings. Comparatively, 22.4 percent of RNs working in hospitals were extremely satisfied with their jobs, compared with 28.8 percent of RNs working in

²³ Comparisons with the 2000 questionnaire should be made with caution, as the wording of the question was changed between 2000 and 2004 such that the 2000 questionnaire measured change in job satisfaction, while the 2004 questionnaire measured satisfaction at that point in time. In 2000 the question asked: "Compared to a year ago, how would you best describe your feeling about your nursing job"; in 2004 the question asked "How would you best describe your feelings about your principal nursing position".

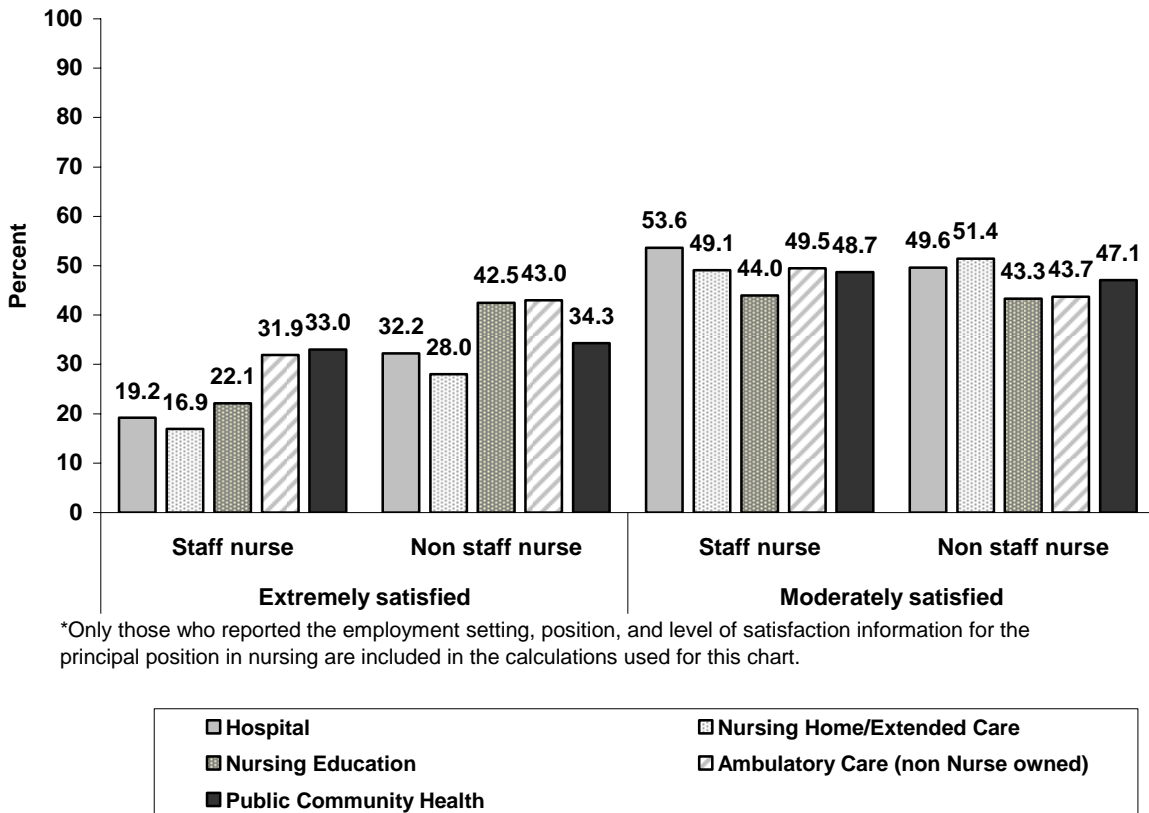
²⁴ Davis, James A., Tom W. Smith, and Peter V. Marsden. General Social Surveys, 1972-2004: [Cumulative File] [Electronic file]. 2nd ICPSR version. Chicago, IL: National Opinion Research Center [producer], 2005. Storrs, CT: Roper Center for Public Opinion Research, University of Connecticut /Ann Arbor, MI: Inter-university Consortium for Political and Social Research / Berkeley, CA: Computer-assisted Survey Methods Program (<http://sda.berkeley.edu>), University of California [distributors], 2005.

insurance claims/benefits. The highest job satisfaction rates came from RNs working in school health settings (85.7 percent either moderately or extremely satisfied, 44.8 percent and 40.9 percent respectively), ambulatory care settings (83.9 percent either moderately or extremely satisfied, 46.6 percent and 37.4 percent respectively), and occupational health settings (82.4 percent either moderately or extremely satisfied, 42.1 percent and 40.3 percent respectively).



Across employment settings, two factors appear to play powerful roles in level of job satisfaction: education level and position (such as whether the respondent is a staff nurse or not). In general, fewer staff nurses reported being moderately or extremely satisfied with their jobs than non-staff nurses overall (74.1 percent versus 82.0 percent). Nearly 16 percent (15.9 percent) of staff nurses report being moderately or extremely dissatisfied with their jobs. This difference holds true across employment settings; fewer staff nurses report being moderately or extremely satisfied with their jobs across employment settings (see Appendix A, Table 33 and Chart 23).

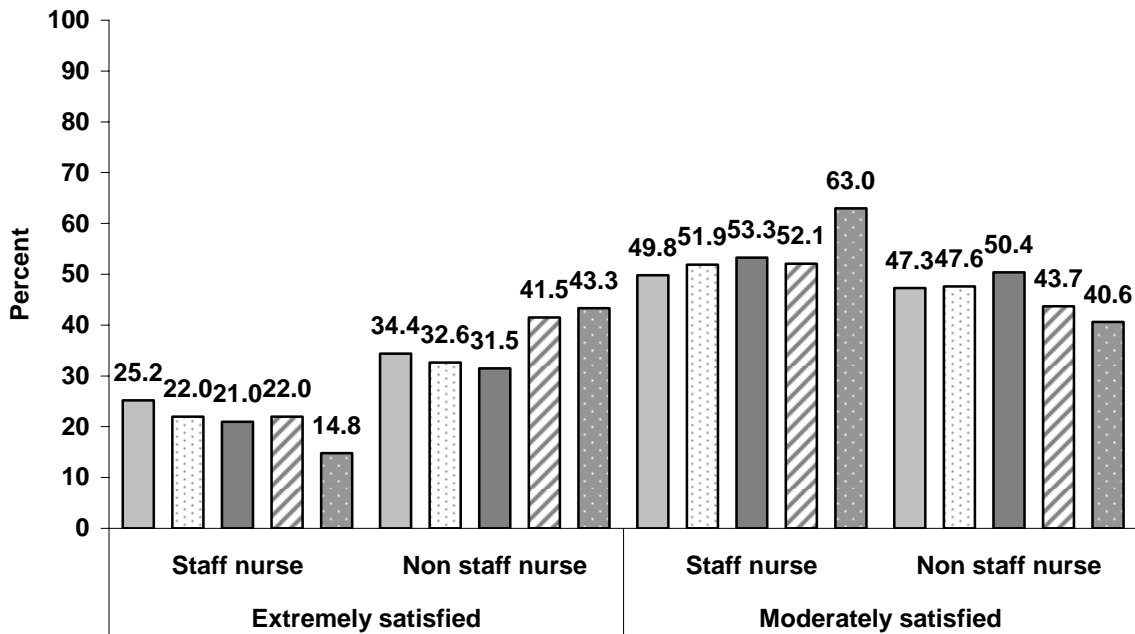
Chart 23. Percent of staff nurses and non staff nurses satisfied in their jobs by employment setting, March 2004*



Job satisfaction also varies by level of nursing or nursing-related education, with associate degree nurses reporting the lowest overall level of job satisfaction (75.7 percent) and master's/doctorally-prepared nurses reporting the highest level (83.2 percent; see Appendix A, Table 34).

In each educational group, staff nurses report lower levels of job satisfaction compared to their counterparts who are not staff nurses. This finding was true across all levels of educational preparation (see Chart 24). For example, 81.7 percent of non-staff nurses whose highest educational preparation was diploma reported being either extremely satisfied (34.4 percent) or moderately satisfied (47.3 percent) with their jobs, while only 75.0 percent of staff nurses with the same educational preparation reported the same (25.2 percent extremely satisfied, 49.8 percent moderately satisfied).

Chart 24. Percent of staff and non-staff RNs satisfied in their jobs by highest nursing or nursing-related educational preparation, March 2004*



*Only those who reported the educational preparation, principal position in nursing, and level of satisfaction with that position were included in the calculations used for this chart.

■ Diploma □ Associate Degree ■ Baccalaureate Degree ▨ Master's Degree ■ Doctorate

Position appears to be a greater factor regarding job satisfaction than function. Non-staff nurses who spend more than 50 percent of their time in direct patient care report higher moderate/extreme job satisfaction (84.3 percent) than staff nurses spending similar amounts of time with patients (74.9 percent).

REGISTERED NURSES NOT EMPLOYED IN NURSING

In March 2004, 16.8 percent (488,006) of the 2,909,357 individuals with a license to practice nursing in the United States were not employed in nursing. This estimate represents both a percentage and a numerical decrease from 2000 (1.6 percent or 6,721 decrease) among those not employed in nursing. About 6.2 percent of these RNs (30,278) were looking for employment in nursing (see Appendix A, Table 35). RNs not employed in nursing were older than RNs overall. On average, RNs not employed in nursing were 54.1 years old, much older than the average age for RNs employed in nursing at 45.4 years of age.

In 2004, 204,006 or 41.8 percent of RNs who were not employed in nursing had been employed in nursing at some time within the 5-year period preceding the survey. Both the number and proportion of RNs not employed in nursing with the past 5 years has declined from 2000, when 263,856 or 53.3 percent of RNs were not employed in nursing within the 5-year period preceding the survey. The proportion of RNs not currently employed in nursing and who have never worked in nursing remained similar; 1.4 percent in 2000 and 1.3 percent in 2004 (see Appendix A, Table 35). In the last two surveys (e.g. 2000

and 2004) a little over 22 percent of those not currently employed in nursing had not worked in nursing for more than 10 years. Furthermore, only 9.1 percent of those not working in nursing for more than 10 years were currently seeking employment in nursing (see Appendix A, Table 35).

RNs who had most recently not worked in nursing were most likely to be actively seeking employment in nursing. Nearly 19 percent (18.9 percent) of RNs who had left the nursing workforce within the year preceding the survey were actively seeking nursing employment at the time of the survey (see Appendix A, Table 35). This estimate is unchanged from the 2000 survey. The average age of RNs recently not employed in nursing, 51.2 years of age, was younger than RNs not employed in nursing overall (54.1 years of age). Of the estimated 14 percent of RNs (488,006) who are not working in nursing, and allowing for multiple responses, 49.3 percent were estimated to have left nursing for personal or family reasons, 49.5 percent for personal career reasons, 42.7 percent for reasons connected with the workplace, and 33.8 percent due to retirement.

Further analysis, by age distribution, of RNs not employed in nursing was undertaken (see Appendix A, Table 36). Of those RNs not employed in nursing and over 65 years of age, the period of time since they have been employed in nursing is well-distributed across all ranges, particularly between 1 and 19 years. For all other age groupings between 30 and 64 years, the largest numbers of nurses were in the 1-to-4 year range since last nursing employment compared to any of the other ranges of time since last nursing employment. Of those nurses not employed in nursing, 250,769 (51.4 percent) were 55 years or older and 56.0 percent of the nurses not employed in nursing for 5-or-more years (115,103 RNs) are over 55 years of age.

Nurses Seeking Nursing Employment

The 30,278 RNs not employed in nursing yet actively seeking nursing employment represent 1.0 percent of all RNs in the United States. This percentage has not changed since the 2000 survey. These RNs were more likely to have been employed in nursing more recently than other RNs not working in nursing. Nearly 67 percent (66.5 percent) of RNs not employed in nursing but actively seeking nursing employment at the time of the survey had been employed in nursing within the 5 years prior to the survey, with most (41.3 percent) having been employed in nursing less than a year prior (see Appendix A, Table 35).

The majority of RNs not employed in nursing seeking employment as RNs are searching for part-time employment (15,918 or 52.6 percent). Twenty-six percent of RNs actively seeking employment in nursing are seeking full-time employment (see Appendix A, Table 37). Just over 18 percent (18.1 percent) were looking for either full or part-time employment.

Nurses Employed in Non-Nursing Occupations

An estimated 120,512 (4.1 percent) of all licensed RNs were employed in non-nursing occupations in March 2004. This represents an 11.2 percent decrease in the number of RNs employed in non-nursing occupations in 2000, reversing a trend of increased employment in non-nursing occupations that began in 1992. The RNs employed in non-nursing occupations include 2,209, or 1.8 percent, who have never worked in nursing.

Over half (52.3 percent) of RNs employed in non-nursing occupations were working in health-related occupations; almost 44 percent (43.9) reported working in non-health-related occupations (see Appendix A, Table 38). This is different from 2000, when these percentages were reversed.

The most often reported health-related occupations outside of nursing were administration/management (at 25.2 percent) and health-related service providers (21.1 percent). Pharmaceutical and medical hardware services employed the third greatest portion of RNs in health-related occupations at 12.4 percent. RNs employed outside of nursing in non-health-related occupations were most often employed in retail sales/services (19.7 percent), and administration/management (14.6 percent; see Appendix A, Table 39).

Like the 2000 survey, RNs employed in health-related non-nursing occupations were more likely to be employed full-time. Nearly 71 percent (70.6 percent) of RNs employed in non-nursing health-related occupations were employed full-time. In contrast, 45.5 percent of RNs employed in non-nursing non-health-related occupations were employed full-time (see Appendix A, Table 38).

RNs employed in non-nursing occupations predominantly cited career change (65.8 percent), burnout/stressful work environment (44.9 percent), and scheduling problems/working too many hours (41.4 percent) as the reasons why they were not employed in nursing at the time of the survey. Significant portions also cited salary/pay better outside of nursing (34.0 percent), inadequate staffing (33.3 percent), and taking care of home and family (29.6 percent) and physical demands of the job (28.1 percent; see Appendix A, Table 40).

Registered Nurses Not Employed in Nursing and Not Seeking Nursing Employment

The largest segment of RNs not employed in nursing were RNs neither employed in nor seeking employment in nursing, which for the purposes of this study will be referred to as non-active RNs. This group constituted 326,526 RNs, or 66.9 percent of all RNs not employed in nursing and 11.2 percent of all RNs. Most of the non-active RNs were older nurses, at 55.3 years of age on average, compared to the 54.1 average age for all RNs not employed in nursing and 46.8 average age for all RNs overall. Slightly less than half (46.4 percent) were at least 60 years of age. Only 14.5 percent were under the age of 40.

Overall, 75.1 percent of non-active RNs were married. However, of the non-active RNs younger than 40, 88.2 percent were married. Nearly 30 percent (29.9 percent) of all non-active RNs had children under the age of 18 in their household. This was particularly true of married non-active RNs younger than 40. An estimated 72.1 percent of these married RNs had children younger than age 6. An additional 15.9 percent only had children over age 6 but younger than age 18 (see Appendix A, Table 41). Twelve percent of non-active RNs were caring for other adults in their home, and 15.3 percent were caring for others outside of their home (see Appendix A, Table 42). Overall, 24.7 percent of non-active RNs were providing care for someone inside or outside their home.

GEOGRAPHIC AND EMPLOYMENT MOBILITY

The survey instrument provided for the exploration of a number of changes that registered nurses might experience during the course of their careers in nursing and the reasons for such changes. Among the changes assessed were geographic location, movement in and out of the nursing workforce, and changes in employment setting or employer within the field of nursing.

Location of Initial Nursing Education

One third (903,206 RNs or 33.3 percent) of RNs with current licenses to practice nursing in the United States had received their initial nursing education in a different State than the State in which they were located at the time of the survey (see Appendix A, Table 43).

As would be expected, the longer the time lapse since graduation from the initial nursing education program, the more likely that the RN had moved to a different State. Nearly thirty-nine percent (38.7 percent) of the nurses who had graduated more than 15 years prior to the survey were in a different location compared to 22.5 percent of those who had graduated within the past 5 years.

There were noticeable differences among the graduates from the different types of initial nursing educational programs. Associate degree graduates were most likely to be located in the State where they received their initial nursing education (74.0 percent). Sixty-one percent of both diploma and baccalaureate graduates (61.0 percent) were located in the same State in which they had received their initial nursing education (see Appendix A, Table 43).

Registered Nurses Educated Outside the United States

The number of RNs who received their initial RN education outside the United States increased about 1.3 percent, from 99,456 in 2000 to 100,791 in 2004.²⁵ Most foreign educated RNs were educated in the Philippines (50.2 percent), followed by Canada (20.2 percent) and the United Kingdom (8.4 percent; see Appendix A, Table 44). The same pattern was present in 2000, where 40.1 percent of foreign trained RNs came from the Philippines, followed by Canada (16.6 percent), and the United Kingdom (9.3 percent). Fully 59.5 percent (59,972) of foreign educated RNs were from an ethnic or racial minority background, 31.3 percent were white non-Hispanic (31,514), while 9.2 percent (9,305) did not report a race/ethnicity. The most often represented minority group among foreign educated RNs was Asian non-Hispanic (48.9 percent or 49,297). The second most common was Black or African American non-Hispanic (6,707 or 6.7 percent) and Hispanic or Latino (2,110 or 2.1 percent). Not surprisingly, about 68.5 percent of foreign-educated RNs speak at least one language other than English, most often Filipino (47.9 percent of foreign-educated RNs). Over half of the foreign-educated nurses (54.7 percent) speak only one language other than English, 12.1 percent speak two languages, and 1.6 percent speak three or more languages. A large number (4.3 percent) speak Spanish, and almost equal numbers speak French or an Asian language other than Filipino (3.7 percent and 3.6 percent, respectively).

The majority of foreign educated RNs received baccalaureate degrees as their initial nursing education (48,781 or 48.4 percent) followed by diplomas (41,898 or 41.6 percent). In contrast, 30.5 percent of all RNs received their initial nursing education in baccalaureate programs, and 42.2 percent of RNs received their initial nursing education in associate degree program. Over half of the foreign-educated RNs were estimated to have baccalaureate or higher degrees (59.2 percent), two percent of whom have doctorate degrees. Over two percent of foreign-educated nurses in the 2004 survey (an estimated 2,446) were APNs, of whom 65.8 percent were NPs, another 13.1 percent were CNSs, 11.1 percent were NP/CNS, and 10 percent were NMs.

Nearly 90 percent (89.2 or 89,860 RNs) of foreign educated RNs were employed in nursing. Although all States employ foreign educated RNs, the majority were concentrated in a handful of States in 2004. Nearly seventy percent (69.7 percent) of foreign educated RNs worked in six States; California (28.6 percent), Florida (10.7 percent), New York (10.4 percent), Texas (7.5 percent), New Jersey (6.9 percent), and Illinois (5.6 percent; see Appendix A, Table 45). Overall, foreign educated RNs are more likely than RNs overall to be employed in hospitals (64.7 percent versus 56.2 percent of employed RNs overall) and

²⁵ This excludes 3,083 RNs educated in U.S. territories such as Guam, Puerto Rico, and the U.S. Virgin Islands.

more likely to be staff nurses (72.6 percent versus 59.1 percent of employed RNs overall; see Appendix A, Table 46).

Residence in March 2004 and 2003

At the time of the survey, most nurses were in same State in which they lived in 2003 (89.2 percent). Only about 3 percent (2.6 percent) had changed their State of residence in the past year (between 2004 and 2003) (8.1 percent did not report if they had changed their State of residence). The youngest nurses and the oldest nurses were the least likely to have changed their State of residence. Eight percent of the nurses who changed their State of residence were less than 25 years old. Over 9 percent (9.3 percent) of RNs aged 55-59, 5.3 percent of RNs age 60-64, and 3.3 percent of RNs over age 65 had changed their State of residence between 2003 and 2004 (see Appendix A, Table 47).

Employment Status in 2004 and 2003

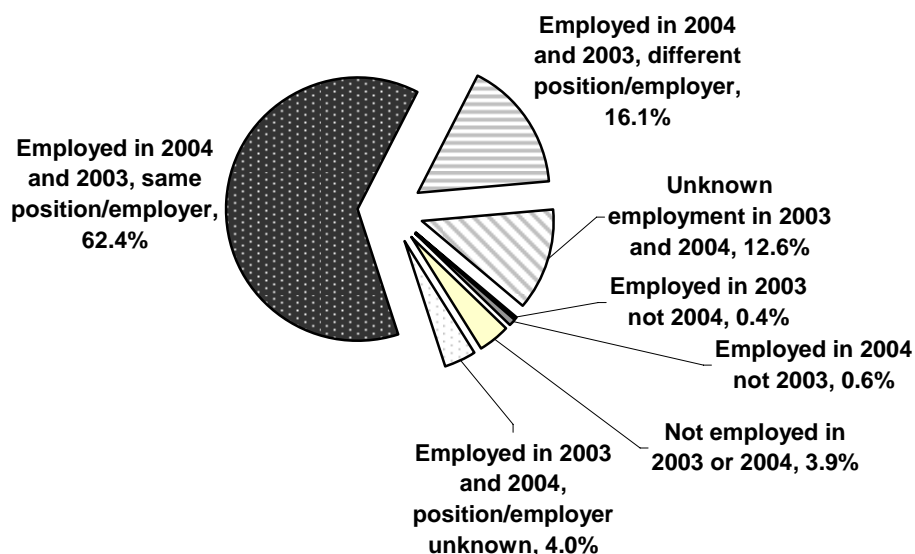
Among the 2,909,357 RNs living in the United States in 2004, most had the same employment status in 2003 and March 2004. Over nine out of ten (90.9 percent) of those employed full-time in nursing in 2004 were also employed full-time in nursing in 2003 (1,455,968 RNs). Over 13.2 percent of the 712,770 RNs employed part-time in 2003 had changed their nursing employment status to full-time in 2004 and 5.5 percent of RNs employed full-time in nursing in 2003 had changed their status to part-time in 2004 (see Appendix A, Table 48). Among the 480,831 RNs who were not employed in nursing in March 2003, about 23.3 percent (112,954) were employed in nursing in March 2004. However, if those who were newly licensed in 2003 or 2004 are excluded (60,853 or 12.7 percent of those not employed in nursing in 2003 and 2.1 percent of all RNs), only 52,101 (10.8 percent) of the RNs licensed before 2003 were not employed in nursing in 2003 had become employed in 2004.

Employment Setting Changes

The majority of nurses were employed in the same setting in 2004 as they were in 2003. Eighty-nine percent (88.8 percent) of registered nurses who were working in a hospital in 2004 were also working in a hospital in 2003 (see Appendix A, Table 49).

In order to get more data on job market conditions for RNs, the NSSRN asked the nurses whether they had changed employers or positions between 2003 and 2004 and if so, why. As Chart 25 shows, 62.4 percent of those in the RN population in March 2004 were employed both years in the same position. Sixteen percent of nurses (16.1 percent or 467,566) were employed both years but changed employers and/or positions. The remaining 21.5 percent were either unemployed in 2003 and/or 2004 or their status was unknown in 2003. The majority of these nurses who were employed in the same positions in both 2003 and 2004 were moderately satisfied (51.0 percent) or extremely satisfied (27.6 percent) with their principal nursing position; only 13.3 percent were estimated to be moderately or extremely dissatisfied with their positions. In addition, of the nurses who changed employers, 73.2 percent (202,283) were satisfied with their current position (47.5 percent were moderately satisfied and 25.7 percent were extremely satisfied). RNs who switched employer and or positions in the past year were asked to report the reasons for the change. Of all RNs who reported making an employer or position change within the past year, a large proportion, 82.7 percent, cited a workplace issue as a reason for the change. The second most common reason for changing employers/positions was for career considerations (57.4 percent; see Appendix A, Table 50).

Chart 25. Changes in registered nurses' employment status, 2003 to 2004*



*The totals for the distribution percents of the various combinations of 2003/2004 employment in nursing may not equal 100 percent due to the effects of rounding.

GEOGRAPHIC DISTRIBUTION OF THE REGISTERED NURSE POPULATION

The country as a whole had a 5.5 percent increase in the ratio of employed RNs to population ratio from 782 per 100,000 in 2000 to 825 per 100,000 in 2004. In 2004, as was true in 2000, the New England region of the country had the highest concentration of employed nurses in relation to the area's population, with 1,107 employed RNs per 100,000 population. The West North Central area had the next greatest concentration with 1,026 employed RNs per 100,000 population. The West South Central area had one of the lowest concentrations, 677 RNs per 100,000 population. The Pacific region had the lowest comparative concentration, with 645 employed RNs per 100,000 population in 2004. This largely reflects the impact of the low ratio present in California, which had 589 RNs per 100,000 in 2004, up from 544 RNs per 100,000 in 2000. By comparison, the next lowest State ratio within the Pacific region was Hawaii, with 739 RNs per 100,000 in 2004 and 703 RNs per 100,000 in 2000. The distribution of the State-by-State ratios of employed nurses per 100,000 population is shown in Appendix A, Table 51.

Comparison of the ratios for each of the nine geographic regions or areas of the country shows that New England had 71.6 percent more employed nurses per 100,000 population than did the Pacific area. In terms of overall gains, the Pacific region ratio had the second largest increase (8.2 percent) since 2000 (when the ratio was 596 per 100,000). The East North Central region had the largest increase at 9.3 percent (from 831 RNs per 100,000 to 908 RNs per 100,000).

Distribution by State

The number of employed nurses per 100,000 residents varied by State in 2004 from a low of 589 in California to a high of 2,093 in the District of Columbia. The proportion of the RN population employed in nursing in each State in 2004 (i.e., the ratio of employed nurses in that State to the number of RNs

residing in that State) ranged from a low of 76.3 percent in Connecticut to a high of 95.6 percent in the District of Columbia. However it should be noted that the District of Columbia has a large number of RNs who do not reside in the District of Columbia, but are employed there. (Note: Approximately 4.3 percent of employed RNs, or 105,136 RNs, were employed in a State other than the one in which they resided; a disproportionately large number of these RNs, 10,039 (9.6 percent), were employed in the District of Columbia).

The RN population in each State ranged from a low of an estimated 4,498 in Wyoming to a high of 255,858 in California. Eight States had nurse populations of over 100,000 while six States had fewer than 10,000 nurses (see Appendix A, Table 51). The States with more than 100,000 nurses were New York, Pennsylvania, Texas, Florida, Illinois, Ohio, Michigan, and California. The States with fewer than 10,000 nurses were Wyoming, Delaware, North Dakota, Montana, Alaska, and Vermont. The RN population increased in all but four States between 2000 and 2004. The four States are Massachusetts, Pennsylvania, Louisiana, and Wyoming. In one other State, West Virginia, there were marginal changes between 2000 and 2004. California, the State with the largest RN population, and part of the Pacific area, had a 13.0 percent increase in RN population (translating to an additional 29,506 RNs).

As shown in Table 52 of Appendix A, the proportion of employed nurses who worked on a part-time basis also varied considerably from State to State. The proportion of nurses employed on a part-time basis varied from a low of 17.9 percent in Arkansas to a high of 44.6 percent in Vermont. Five additional states had high proportion of part-time employed RNs; Minnesota (44.2 percent), Massachusetts (42.3 percent), Wisconsin (41.5 percent), Oregon (41.0 percent), Washington (39.5 percent). All six of these States had high proportions of part-time employed RNs in 2000.

Metropolitan Areas

The majority of RNs (83.9 percent) resided in metropolitan areas. This proportion varied across geographic areas of the country as would be expected given the distribution of metropolitan areas across the Nation. The highest concentrations of RNs living in metropolitan areas were found in the Middle Atlantic (91.0 percent) and Pacific regions (90.2 percent), while the lowest were in the West North Central (69.6 percent; see Appendix A, Table 53). As Table 53 further illustrates, RNs who were located in metropolitan areas were slightly more likely than those in non-metropolitan areas (83.3 percent versus 82.4 percent) to be employed in nursing. This difference was particularly strong in the East North Central region, where 87.1 percent of the RNs in metropolitan areas were employed versus 81.7 percent of RNs in non-metropolitan areas.

Educational Background

RNs in the New England and the Middle Atlantic regions (at 21.7 and 21.2 percent respectively) were more likely to report a diploma as their highest nursing or nursing-related education relative to other regions. In fact, over one quarter of Pennsylvania RNs (27.5 percent) and 25.0 percent of Connecticut RNs reported a diploma as their highest degree. RNs in the East South Central region were most likely to report having an associate degree as their highest educational preparation (46.6 percent of all RNs in this region held this as their highest degree). This is mainly from the high percentage of RNs with associate degrees located in Mississippi (53.4 percent), and Kentucky (52.2 percent), far above the United States average. On the other hand, North Dakota had the lowest percentage (16.0 percent) of RNs with an associate degree as the highest educational preparation.

With respect to baccalaureate degrees, the regions were relatively similar, ranging from 31.0 percent of RNs in the East South Central region to 38.2 percent in the Pacific region. However, there was great variation between the States; ranging from 23.2 percent of RNs in Iowa to 51.6 percent in North Dakota.

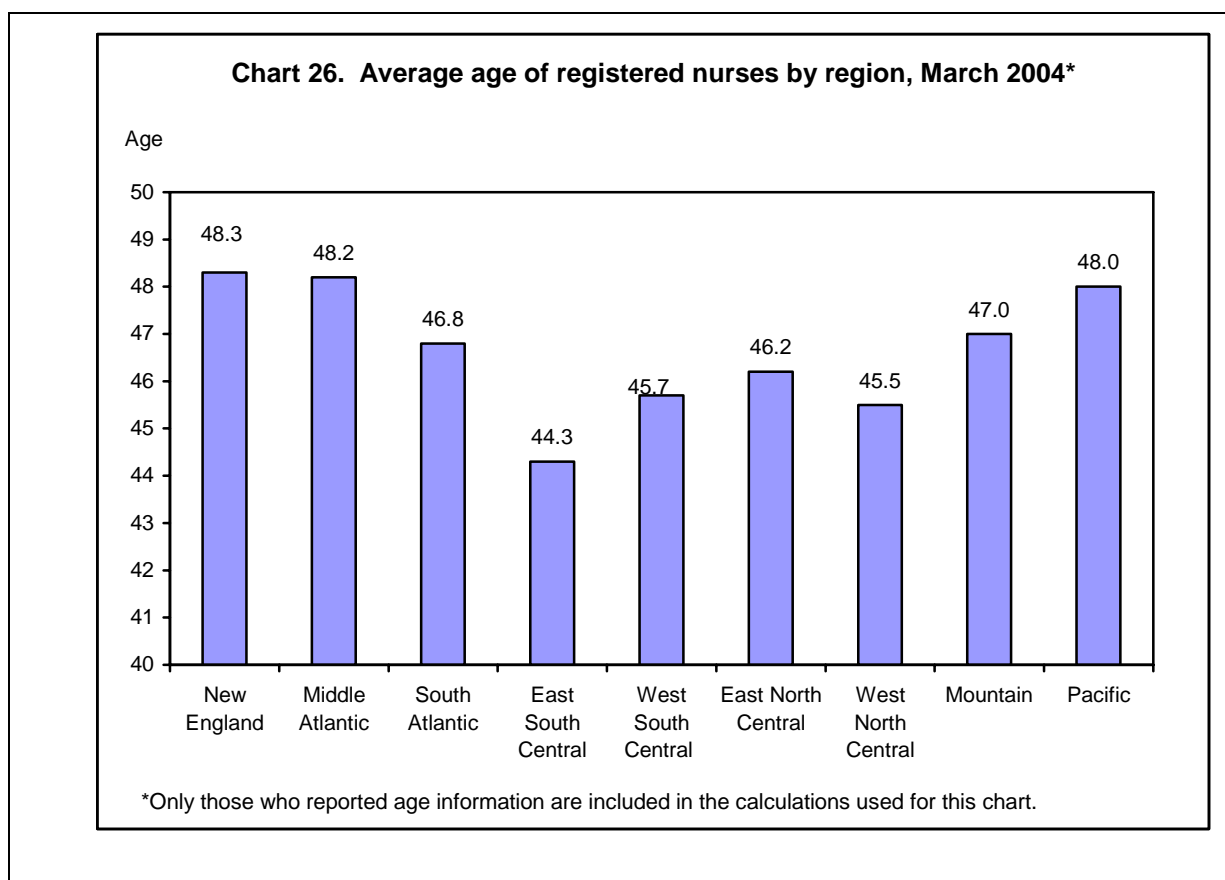
New England had the most RNs with master's and doctoral degrees (at 16.5 percent, compared with the lowest rates in the West North and West South Central regions (both at 10.7 percent; see Appendix A, Table 54).

Racial/Ethnic Background

The Pacific area had the highest proportion of minority (that is, non-white, Hispanic, or Latino) nurses at 19.0 percent. The predominant minority nurse group in the Pacific area were those of Asian background; 9.0 percent of the nurse population. In addition to the Pacific area, Asian nurses were also more likely to be a part of the nurse population in the Middle Atlantic and West South Central areas (3.3 and 3.0 percent respectively) than in other parts of the country. Black or African American (non-Hispanic) nurses were more prevalent among the nurse populations in the South Atlantic (7.3 percent), West South Central (6.4 percent), and East South Central (6.3 percent) areas than elsewhere. Hispanic or Latino nurses, although a relatively small proportion of any area's nurse population, were more likely to be found among the nurses in the Pacific (3.6 percent), West South Central (3.5 percent) and Mountain (2.7 percent) areas (see Appendix A, Table 55).

Age Distribution

Nurses in the East South Central area of the country were more likely to be younger than were those in other parts of the country, with an average age of 44.3 (compared to 46.8 for the Nation overall). New England and Middle Atlantic RNs were the oldest at an average of 48.3 and 48.2 years old respectively (see Chart 26). About 34.4 percent of East South Central RNs were less than 40 years old, compared with 22 to 30 percent of nurses in other areas of the country. New England and Middle Atlantic region nurses were the least likely to be in this younger age group; in both areas, only 22 percent were less than 40 years old (see Appendix A, Table 56).



Employment Settings

As expected, the predominant employment setting for the nurses in each area was a hospital setting. The proportion of the nurse supply working in hospitals in each area ranged from a low of 50.3 percent of New England RNs to a high of 59.0 percent in the Pacific region. The New England and West North Central areas were more likely than the other areas to have higher proportions of their nurses employed in nursing homes or other extended care facilities (9.8 and 8.4 percent respectively). At 12.2 percent, New England had the highest proportion of nurses employed in public/community health settings, the West North Central and Pacific regions had the least (at 9.8 percent each). New England also had the highest percentage of RNs employed in school health settings at 6.3 percent, while the East South Central region had the least (1.9 percent). Every region but New England (9.8 percent) had more than 10 percent of their registered nurses employed in ambulatory care settings. Compared with the other regions, the Mountain region, at 13.0 percent, had the highest proportion of RNs employed in ambulatory care (see Appendix A, Table 57).

Changes in Employers and/or Positions

As reported previously, 16.1 percent of the entire RN population was employed in both 2003 and 2004 but changed employers and/or positions between those dates. Nurses from the Mountain (19.6 percent) and West South Central (19.1 percent) sections of the country were more likely to have changed employers or positions than other regions. Nurses in New England were the least likely to have made a change (14.6 percent). Nurses in different regions of the country gave approximately the same percentages of reasons for changing employers or positions. The top reason cited overall was an interest

in another position or job, with 51.4 percent of all RNs that changed jobs citing that reason. This is a large increase from 2000, when only 17.8 percent of RNs who changed jobs cited that reason. (However, this may be partly due to the change in questionnaire specifications where the 2004 question allowed multiple categories to be chosen by the respondent for the first time.) The other top reason listed by nurses overall was burnout/stressful work environment, with 46.0 percent of all RNs that changed jobs naming this as their principal reason for change (see Appendix A, Table 50).

Average Earnings within Geographic Area for Staff Nurses

The average annual earnings of full-time staff nurses in each of the nine geographic regions were examined to get some indication of variations in earnings across the country. The average earnings for full-time staff nurses in their principal positions ranged from \$46,108 in the West North Central area to \$64,685 in the Pacific area (see Appendix A, Table 58). The areas where earnings reached above the national average for full-time staff nurses, \$53,086, included the Middle Atlantic (\$56,960), New England (\$57,451), and Pacific regions (\$64,685).

There were some geographic variations in the rate at which earnings increased among the nine regions. Earnings of full time staff nurses in the Mountain (6.9 percent) and Pacific (6.7 percent) regions increased at a higher annual rate than those in the remaining regions.

Compact States

By 2004, a total of 17 States had entered into a formal arrangement, called the “Nurse Licensure Compact”, or “Compact” such that RNs who are living and licensed in one Compact State, can practice in other Compact States without needing additional license(s). An estimated 22.9 percent of RNs reported permanent residency and licensure in Compact States. The seven largest States, which together cover more than three-quarters of the nurses eligible under Compacts, are: Texas (24.5 percent of the 665,593 nurses in Compacts), North Carolina (13.3 percent), Wisconsin (9.4 percent), Tennessee (8.8 percent), Maryland (7.9 percent), Arizona (6.8 percent), and Iowa (5.6 percent).

APPENDIX A

TABLES

Table 1. Registered nurse population, by employment status, gender, racial/ethnic background, and age group: March 2004

Gender, racial/ethnic background and age group	Total						Employment status					
	Number in sample	Number	Estimated	Percent	Number in sample	Number	Employed in nursing Estimated	Percent	Number in sample	Number	Not employed in nursing Estimated	Percent
Total	35,635	2,909,357		100.0	30,233	2,421,351		100.0	5,402	488,006		100.0
Gender												
Male	2,166	168,181		5.8	1,937	148,642		6.1	229	19,539		4.0
Female	33,454	2,740,144		94.2	28,283	2,271,717		93.8	5,171	468,427		96.0
Not known	15	1,033		0.0	13	993		0.0	2	40		0.0
Racial/ethnic background												
White (non-hispanic)	29,561	2,380,529		81.8	24,958	1,966,330		81.2	4,603	414,199		84.9
Black/African American (non-hispanic)	1,297	122,495		4.2	1,146	106,644		4.4	151	15,850		3.2
Asian (non-hispanic)	963	84,383		2.9	863	75,943		3.1	100	8,440		1.7
Native Hawaiian/Pacific Islander (non-hisp)	65	5,594		0.2	55	4,613		0.2	10	981		0.2
American Indian/Alaska Native (non-hisp)	157	9,453		0.3	141	8,347		0.3	16	1,106		0.2
Hispanic/Latino (any race)	512	48,009		1.7	450	42,262		1.7	62	5,747		1.2
Two or more races (non-hispanic)	519	41,244		1.4	451	35,554		1.5	68	5,690		1.2
Not known	2,561	217,651		7.5	2,169	181,658		7.5	392	35,993		7.4
Age group												
Less than 25	609	61,778		2.1	588	59,592		2.5	21	2,186		0.4
25-29	2,117	171,659		5.9	1,981	159,676		6.6	136	11,983		2.5
30-34	3,053	243,182		8.4	2,794	221,052		9.1	259	22,130		4.5
35-39	3,646	289,525		10.0	3,280	256,967		10.6	366	32,557		6.7
40-44	4,996	408,248		14.0	4,481	360,249		14.9	515	47,999		9.8
45-49	6,407	508,708		17.5	5,718	449,797		18.6	689	58,910		12.1
50-54	5,816	463,565		15.9	5,160	406,748		16.8	656	56,817		11.6
55-59	4,099	338,078		11.6	3,361	271,264		11.2	738	66,814		13.7
60-64	2,477	210,196		7.2	1,667	136,191		5.6	810	74,006		15.2
65 and over	2,085	185,254		6.4	928	75,305		3.1	1,157	109,949		22.5
Not known	330	29,165		1.0	275	24,511		1.0	55	4,655		1.0
Average age		46.8				45.4				54.1		
Median age		47.0				46.0				55.0		

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 2. Year of graduation from initial nursing education and the average age at graduation for the registered nurse population, by type of initial nurse education: March 2004

Year of graduation/age at graduation from initial nursing education	Number in sample	Total Estimated Number*	Type of Initial Nursing Education					
			Diploma	Associate Degree	Baccalaureate and higher degree	Diploma	Associate Degree	Baccalaureate and higher degree
			Number	Percent	Number	Percent	Number	Percent
Total	35,635	2,909,357	733,377	100.0	1,227,256	100.0	902,625	100.0
Year of graduation from initial nursing education								
2000 or later	3,103	265,243	7,377	1.0	151,005	12.3	105,922	11.7
1995-1999	4,968	386,296	22,360	3.0	218,476	17.8	144,766	16.0
1990-1994	4,971	383,182	32,629	4.4	230,913	18.8	118,072	13.1
1985-1989	4,157	336,771	43,476	5.9	173,976	14.2	117,783	13.0
1984 or earlier	17,780	1,483,436	623,368	85.0	442,643	36.1	411,283	45.6
Not known	656	54,430	4,169	0.6	10,244	0.8	4,800	0.5
Average age at graduation by year of graduation	A							
2000 or later	All Graduates	Diploma	Associate Degree	Baccalaureate and Higher				
1995-1999	29.6	31.8	31.8	26.3				
1990-1994	31.0	30.2	33.3	27.5				
1985-1989	31.0	28.9	33.2	27.2				
1984 or earlier	28.4	25.5	31.0	25.5				
	23.8	22.0	26.7	23.4				

* Includes 14,979 nurses whose initial nursing education was in a master's degree program, 532 in a doctoral degree program, and 46,098 for whose initial nursing education was not known.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 3. Health occupation prior to initial nursing education, by type of initial nursing education: March 2004

Health occupation prior to initial nursing education**	Total						Type of Initial Nursing Education					
	Number in sample	Estimated		Diploma	Associate Degree		Diploma	Associate Degree		Baccalaureate and higher degree		
		Number*	Percent		Number	Percent		Number	Percent		Number	Percent
Total	19,160	1,512,066	100.0	257,530	17.0	797,925	52.8	451,499	29.9			
Nursing Aide	12,631	977,354	100.0	186,929	19.1	460,759	47.1	326,650	33.4			
Licensed practical/vocational nurse	4,729	364,527	100.0	28,644	7.9	292,365	80.2	41,927	11.5			
Allied health	2,327	184,266	100.0	19,886	10.8	115,161	62.5	48,427	26.3			
Manager in health care setting	455	37,922	100.0	3,712	9.6	25,125	66.1	8,921	23.5			
Clerk in health care setting	2,574	208,797	100.0	26,110	12.5	117,074	56.1	64,973	31.1			
Allied health position	490	38,429	100.0	5,896	15.3	20,215	52.6	12,070	31.4			
Volunteer	190	16,392	100.0	7,786	47.5	4,014	24.5	4,565	27.8			
Home health/personal services aide	226	19,739	100.0	1,868	9.5	10,265	52.0	7,606	38.5			
Student nurse	123	9,772	100.0	1,447	14.8	1,901	19.5	6,328	64.8			
Counselor/social worker/activity therapists/Chaplain	131	10,667	100.0	856	8.0	5,431	50.9	4,162	39.0			
Other services or support aide personnel in health care	122	8,934	100.0	3,555	39.8	2,642	29.6	2,664	29.8			
Armed services medic/corpsman or similar role	176	13,486	100.0	2,088	15.5	7,377	54.7	3,919	29.1			
Other non-health related work	56	4,687	100.0	1,042	22.8	2,318	49.4	1,328	28.3			
Other health	491	40,260	100.0	6,379	15.8	19,152	47.6	14,481	36.0			

*Includes 5,304 nurses whose initial education was unknown

**Health occupation entries may add to more than the total because more than one occupation may have been named by an individual RN
NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 4. Registered nurses who were ever licensed as practical/vocational nurse,
by type of initial nursing education: March 2004**

Year of graduation/age at graduation from initial nursing education after being LPN/LVN	Number in sample	Total Estimated		Type of Initial Nursing Education						Baccalaureate and higher degree	
		Number*	Percent	Diploma Number	Percent	Associate Degree Number	Percent	Degree Number	Percent	Number	Percent
Total	6,186	484,809	100.0	45,633	100.0	362,046	100.0	75,061	100.0		
Year of graduation from initial nursing education											
2000 or later	740	53,273	11.0	533	1.2	47,931	13.2	4,760	6.3		
1995-1999	1,017	72,399	14.9	2,879	6.3	61,745	17.1	7,557	10.1		
1990-1994	1,252	86,635	17.9	3,852	8.4	71,823	19.8	10,906	14.5		
1985-1989	1,049	83,038	17.1	6,260	13.7	63,501	17.5	12,780	17.0		
1984 or earlier	2,036	182,414	37.6	31,539	69.1	111,488	30.8	38,570	51.4		
Not known	92	7,050	1.5	570	1.2	5,558	1.5	488	0.7		
Average age at graduation by year of graduation		Average age		Average age		Average age		Average age			
2000 or later		33.9		42.3		34.0		32.5			
1995-1999		35.2		36.0		35.3		34.2			
1990-1994		34.8		33.9		35.2		32.3			
1985-1989		32.7		28.7		34.0		27.9			
1984 or earlier		27.6		25.1		29.4		24.3			

* Includes an estimated 62,340 nurses who are also included in Table 3, and an estimated 2,070 nurses for whom type of basic education was not reported.
NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 5. Characteristics of registered nurses with post-high school academic degree before entering initial nursing education, by type of initial nursing education: March 2004

Characteristics of nurses with prior degrees	Type of Initial Nursing Education									
	Number in sample	Total Estimated		Diploma		Associate Degree		Baccalaureate and higher degree		
		Number*	Percent	Number	Percent	Number	Percent	Number	Percent	
Total	5,807	471,603	100.0	42,380	100.0	245,484	100.0	181,325	100.0	
Degree obtained before initial nursing education										
Associate degree	2,994	247,962	52.6	20,840	49.2	153,255	62.4	72,785	40.1	
Baccalaureate	2,944	236,871	50.2	22,379	52.8	98,363	40.1	114,885	63.4	
Master's degree	250	19,441	4.1	1,582	3.7	9,616	3.9	8,121	4.5	
Doctorate	21	1,413	0.3	38	0.1	814	0.3	561	0.3	
Other	55	3,170	0.7	203	0.5	2,891	1.2	67	0.0	
Major field of study before initial nursing ed										
Health related field	1,544	126,083	26.7	11,472	27.1	67,090	27.3	47,213	26.0	
Biological or physical science	1,019	79,921	16.9	6,396	15.1	33,746	13.7	39,121	21.6	
Business management	548	45,012	9.5	3,895	9.2	28,093	11.4	12,929	7.1	
Education	469	38,655	8.2	4,243	10.0	23,962	9.8	10,137	5.6	
Liberal arts	1,805	150,821	32.0	13,909	32.8	75,702	30.8	60,568	33.4	
Law	24	1,718	0.4	40	0.1	1,188	0.5	490	0.3	
Computer science	43	2,976	0.6	646	1.5	1,547	0.6	783	0.4	
Social work	109	8,489	1.8	197	0.5	5,130	2.1	2,944	1.6	
Other non-health-related field	162	11,210	2.4	677	1.6	5,802	2.4	4,551	2.5	
Year of graduation from initial nursing education										
2000 or later	852	69,977	14.8	2,084	4.9	37,555	15.3	29,766	16.4	
1995-1999	1,381	107,784	22.9	6,579	15.5	55,734	22.7	45,006	24.8	
1990-1994	1,165	89,163	18.9	5,693	13.4	51,704	21.1	31,408	17.3	
1985-1989	734	61,737	13.1	5,820	13.7	33,410	13.6	22,373	12.3	
1984 or earlier	1,613	137,915	29.2	22,121	52.2	63,883	26.0	51,328	28.3	
Not known	62	5,027	1.1	83	0.2	3,197	1.3	1,443	0.8	
Average age at graduation by year of graduation										
2000 or later	Average age		Average age		Average age		Average age			
		32.6		32.8		34.2		30.7		
1995-1999	32.9		33.1		34.3		31.0			
1990-1994	33.8		32.9		35.3		31.4			
1985-1989	31.5		30.2		32.9		29.7			
1984 or earlier	27.8		26.6		29.2		26.5			

* Includes 2,413 RNs for whom type of initial nursing education was not reported

NOTE: The number of degrees may add to more than the totals because more than one degree may have been named

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 6. Marital status and presence of children, by employment status
in principal nursing position: March 2004**

Marital status and presence of children	Total			Employed in nursing				Employment status				Employed in nursing				Not employed in nursing			
	Number in sample	Estimated Number	Percent	Number in sample	Number	Estimated Number	Percent	Number in sample	Number	Estimated Number	Percent	Number in sample	Number	Estimated Number	Percent	Number in sample	Number	Estimated Number	Percent
Total	35,635	2,909,357	100.0	21,196	1,696,807	100.0	8,993	720,283	100.0	44	4,261	100.0	5,402	488,006	100.0				
Married	25,339	2,050,659	70.5	14,116	1,115,716	65.8	7,237	577,238	80.1	27	2,553	59.9	3,959	355,154	72.8				
Children under 6 only	2,774	225,572	7.8	1,351	106,620	6.3	1,087	88,714	12.3	4	275	6.5	332	29,963	6.1				
Children 6-18 only	8,074	650,793	22.4	4,698	369,212	21.8	2,496	202,398	28.1	8	778	18.2	872	78,405	16.1				
Children in both age groups	2,099	162,791	5.6	1,012	75,269	4.4	809	63,202	8.8	2	304	7.1	276	24,016	4.9				
No children	12,192	994,588	34.2	6,967	557,527	32.9	2,798	219,749	30.5	12	1,181	27.7	2,415	216,131	44.3				
Children unknown	200	16,916	0.6	88	7,087	0.4	47	3,175	0.4	1	15	0.4	64	6,639	1.4				
Widowed/separated/divorced	6,415	526,370	18.1	4,284	342,527	20.2	1,135	92,121	12.8	7	566	13.3	989	91,156	18.7				
Children under 6 only	173	13,300	0.5	127	9,902	0.6	32	2,183	0.3	0	0	0.0	14	1,214	0.2				
Children 6-18 only	1,675	137,283	4.7	1,275	102,696	6.1	248	20,678	2.9	3	350	8.2	149	13,558	2.8				
Children in both age groups	184	14,683	0.5	143	11,992	0.7	33	2,175	0.3	0	0	0.0	8	516	0.1				
No children	4,321	355,309	12.2	2,708	215,502	12.7	812	66,124	9.2	4	216	5.1	797	73,468	15.1				
Children unknown	62	5,795	0.2	31	2,435	0.1	10	960	0.1	0	0	0.0	21	2,400	0.5				
Never married	3,147	268,747	9.2	2,348	200,166	11.8	451	36,591	5.1	2	142	3.3	346	31,848	6.5				
Children under 6 only	106	9,131	0.3	82	7,480	0.4	22	1,552	0.2	0	0	0.0	2	99	0.0				
Children 6-18 only	223	18,657	0.6	182	15,184	0.9	29	2,517	0.3	0	0	0.0	12	956	0.2				
Children in both age groups	33	2,854	0.1	24	2,172	0.1	6	405	0.1	0	0	0.0	3	277	0.1				
No children	2,743	234,208	8.1	2,034	173,018	10.2	389	31,706	4.4	2	142	3.3	318	29,342	6.0				
Children unknown	42	3,897	0.1	26	2,311	0.1	5	411	0.1	0	0	0.0	11	1,175	0.2				
Not known	734	63,581	2.2	448	38,399	2.3	170	14,333	2.0	8	1,000	23.5	108	9,849	2.0				

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 7. Marital status and caring for other adults at home or others elsewhere, by employment status in principal nursing position: March 2004

Marital status and caring for adults at home or others elsewhere	Total			Employment status					
	Number in sample	Estimated Number	Percent	Employed in nursing full-time			Employed in nursing part-time		
				Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent
Total	35,635	2,909,357	100.0	21,196	1,696,807	100.0	8,993	720,283	100.0
Marital status/presence of adults									
Married	25,339	2,050,659	70.5	14,116	1,115,716	65.8	7,237	577,238	80.1
Adults at home	3,809	326,689	11.2	2,424	204,921	12.1	870	72,779	10.1
No adults at home	21,330	1,707,054	58.7	11,604	903,707	53.3	6,320	501,283	69.6
Not known if adults at home	200	16,916	0.6	88	7,087	0.4	47	3,175	0.4
Widowed/separated/divorced	6,415	526,370	18.1	4,284	342,527	20.2	1,135	92,121	12.8
Adults at home	1,113	98,303	3.4	822	70,507	4.2	162	15,151	2.1
No adults at home	5,240	422,271	14.5	3,431	269,585	15.9	963	76,010	10.6
Not known if adults at home	62	5,795	0.2	31	2,435	0.1	10	960	0.1
Never married	3,147	268,747	9.2	2,348	200,166	11.8	451	36,591	5.1
Adults at home	407	37,716	1.3	308	28,744	1.7	62	5,396	0.7
No adults at home	2,698	227,134	7.8	2,014	169,110	10.0	384	30,783	4.3
Not known if adults at home	42	3,897	0.1	26	2,311	0.1	5	411	0.1
Marital status/care for others living elsewhere									
Married	25,339	2,050,659	70.5	14,116	1,115,716	65.8	7,237	577,238	80.1
Others living elsewhere	4,308	350,292	12.0	2,538	200,216	11.8	1,115	90,152	12.5
No others elsewhere	20,831	1,683,452	57.9	11,490	908,412	53.5	6,075	483,911	67.2
Unknown if others	200	16,916	0.6	88	7,087	0.4	47	3,175	0.4
Widowed/separated/divorced	6,415	526,370	18.1	4,284	342,527	20.2	1,135	92,121	12.8
Other living elsewhere	1,020	82,689	2.8	727	57,989	3.4	157	12,543	1.7
No other elsewhere	5,333	437,886	15.1	3,526	282,103	16.6	968	78,618	10.9
Unknown if other	62	5,795	0.2	31	2,435	0.1	10	960	0.1
Never married	3,147	268,747	9.2	2,348	200,166	11.8	451	36,591	5.1
Other living elsewhere	203	17,359	0.6	143	12,482	0.7	31	2,273	0.3
No other elsewhere	2,902	247,491	8.5	2,179	185,373	10.9	415	33,907	4.7
Unknown if other	42	3,897	0.1	26	2,311	0.1	5	411	0.1
Not known	734	63,581	2.2	448	38,399	2.3	170	14,333	2.0

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 8. Distribution of registered nurses according to total household income, by marital and employment status: March 2004

Marital status and household income	Total			Employed in nursing full-time			Employed in nursing part-time			Employment status full-time/part-time unknown			Not employed in nursing		
	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent
Total	35,635	2,909,357	100.0	21,196	1,696,807	100.0	8,993	720,283	100.0	44	4,261	100.0	5,402	488,006	100.0
\$ 15,000 or less	370	30,676	1.1	12	977	0.1	99	7,423	1.0	0	0	0.0	259	22,276	4.6
\$ 15,001 - \$ 25,000	640	54,302	1.9	41	3,545	0.2	247	18,332	2.5	1	102	2.4	351	32,324	6.6
\$ 25,001 - \$ 35,000	1,325	103,379	3.6	399	29,123	1.7	445	32,448	4.5	1	122	2.9	480	41,686	8.5
\$ 35,001 - \$ 50,000	4,499	354,601	12.2	2,670	206,593	12.2	1,086	82,163	11.4	6	395	9.3	737	65,449	13.4
\$ 50,001 - \$ 75,000	9,436	739,763	25.4	6,375	492,525	29.0	2,084	160,498	22.3	8	730	17.1	969	86,011	17.6
\$ 75,001 - \$100,000	8,046	658,044	22.6	5,226	421,851	24.9	2,050	167,119	23.2	9	781	18.3	761	68,294	14.0
\$100,001 - \$150,000	6,416	541,889	18.6	4,167	348,209	20.5	1,630	137,260	19.1	3	309	7.2	616	56,111	11.5
More than \$150,000	2,693	237,572	8.2	1,330	113,103	6.7	741	64,182	8.9	3	412	9.7	619	59,876	12.3
Not reported	2,210	189,130	6.5	976	80,882	4.8	611	50,858	7.1	13	1,411	33.1	610	55,980	11.5
Married															
\$ 15,000 or less	122	9,676	0.3	6	267	0.0	40	2,926	0.4	0	0	0.0	76	6,483	1.3
\$ 15,001 - \$ 25,000	223	17,429	0.6	16	860	0.1	83	5,627	0.8	1	102	2.4	123	10,840	2.2
\$ 25,001 - \$ 35,000	579	44,507	1.5	125	8,343	0.5	193	13,943	1.9	1	122	2.9	260	22,099	4.5
\$ 35,001 - \$ 50,000	2,061	157,010	5.4	931	68,737	4.1	628	44,839	6.2	3	186	4.4	499	43,248	8.9
\$ 50,001 - \$ 75,000	5,859	447,802	15.4	3,402	253,115	14.9	1,699	129,391	18.0	2	230	5.4	756	65,066	13.3
\$ 75,001 - \$100,000	6,802	549,292	18.9	4,233	335,411	19.8	1,897	153,898	21.4	9	781	18.3	663	59,202	12.1
\$100,001 - \$150,000	5,886	493,862	17.0	3,748	310,755	18.3	1,573	131,506	18.3	3	309	7.2	562	51,293	10.5
More than \$150,000	2,516	221,349	7.6	1,196	101,275	6.0	720	61,986	8.6	3	412	9.7	597	57,677	11.8
Not reported	1,291	109,732	3.8	459	36,953	2.2	404	33,122	4.6	5	411	9.6	423	39,246	8.0

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 9. Financial resources used for tuition and fees for initial nursing education, by type of initial nursing degree: March 2004

Financial resources used	Number in sample	Total		Type of Initial Nursing Education							
		Number**	Percent	Estimated	Diploma	Associate Degree	Baccalaureate	Masters/Doctorate	Estimated	Percent	Estimated
				Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total*	35,635	2,909,357	100.0	733,377	100.0	1,227,256	100.0	887,114	100.0	15,511	100.0
Personal resources	19,245	1,541,250	53.0	270,866	36.9	833,475	67.9	421,972	47.6	9,841	63.4
Family resources	16,816	1,401,009	48.2	483,948	66.0	335,719	27.4	570,848	64.3	5,958	38.4
Employer tuition, reimbursement plan	3,074	239,588	8.2	32,483	4.4	151,087	12.3	53,550	6.0	1,559	10.1
Federal traineeship, scholarship or grant	5,088	384,303	13.2	51,854	7.1	182,204	14.8	145,419	16.4	3,561	23.0
Federally assisted loan	8,527	643,097	22.1	71,651	9.8	274,093	22.3	289,296	32.6	5,848	37.7
State or local government scholarship, loan or grant	6,699	529,382	18.2	80,326	11.0	229,723	18.7	214,961	24.2	2,839	18.3
Non-government scholarship, loan or grant	6,422	495,006	17.0	122,544	16.7	160,518	13.1	207,039	23.3	3,566	23.0
Other sources	1,730	136,916	4.7	40,697	5.5	50,434	4.1	44,102	5.0	551	3.6
Unknown sources	479	41,563	1.4	2,202	0.3	2,793	0.2	1,389	0.2	0	0.0

* Source of fundings may add to more than the total because more than one financial resource may be named

**Includes an estimated 46,098 for whom initial nursing degree not known

NOTE: Estimated numbers may not equal total and percents may not add to 100 because of rounding

Table 10. Registered nurse population, by initial nursing and highest nursing or nursing-related education: March 2004

Highest nursing or nursing-related education	Total			Type of Initial Nursing Education						Baccalaureate		
	Number in sample	Estimated Number*	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent
Total	35,635	2,909,357	100.0	8,660	733,377	100.0	15,100	1,227,256	100.0	11,142	887,114	100.0
Diploma	6,047	510,209	17.5	6,047	510,209	69.6	0	0	0.0	0	0	0.0
Associate degree	12,048	981,238	33.7	103	9,579	1.3	11,934	970,752	79.1	0	0	0.0
Baccalaureate in related field	838	71,580	2.5	476	41,042	5.6	358	30,106	2.5	0	0	0.0
Baccalaureate in nursing	11,506	922,696	31.7	1,013	85,329	11.6	1,812	145,797	11.9	8,670	690,620	77.9
Masters in related field	1,155	94,386	3.2	337	29,357	4.0	289	22,770	1.9	524	41,633	4.7
Masters in nursing	3,182	256,415	8.8	567	46,189	6.3	632	51,318	4.2	1,794	143,113	16.1
Doctorate in related field	169	14,552	0.5	55	5,818	0.8	30	2,472	0.2	82	6,198	0.7
Doctorate in nursing	146	11,548	0.4	48	4,294	0.6	14	990	0.1	72	5,549	0.6
Not known	544	46,733	1.6	14	1,560	0.2	31	3,051	0.2	0	0	0.0
Total employed in nursing	30,233	2,421,351	100.0	6,579	540,941	100.0	13,386	1,072,626	100.0	9,650	756,554	100.0
Diploma	4,527	369,741	15.3	4,527	369,741	68.4	0	0	0.0	0	0	0.0
Associate degree	10,709	861,949	35.6	81	7,270	1.3	10,619	853,991	79.6	0	0	0.0
Baccalaureate in related field	646	53,979	2.2	360	30,459	5.6	285	23,439	2.2	0	0	0.0
Baccalaureate in nursing	9,976	787,575	32.5	831	68,810	12.7	1,620	127,571	11.9	7,517	590,525	78.1
Masters in related field	891	70,937	2.9	233	19,482	3.6	228	17,442	1.6	427	33,651	4.4
Masters in nursing	2,784	219,924	9.1	461	36,802	6.8	579	46,117	4.3	1,579	123,214	16.3
Doctorate in related field	124	9,371	0.4	37	3,813	0.7	20	1,142	0.1	65	4,353	0.6
Doctorate in nursing	128	10,243	0.4	44	4,110	0.8	12	804	0.1	62	4,811	0.6
Not known	448	37,634	1.6	5	454	0.1	23	2,120	0.2	0	0	0.0
Total not employed in nursing	5,402	488,006	100.0	2,081	192,436	100.0	1,714	154,631	100.0	1,492	130,560	100.0
Diploma	1,520	140,468	28.8	1,520	140,468	73.0	0	0	0.0	0	0	0.0
Associate degree	1,339	119,290	24.4	22	2,310	1.2	1,315	116,761	75.5	0	0	0.0
Baccalaureate in related field	192	17,601	3.6	116	10,583	5.5	73	6,667	4.3	0	0	0.0
Baccalaureate in nursing	1,530	135,121	27.7	182	16,519	8.6	192	18,226	11.8	1,153	100,095	76.7
Masters in related field	264	23,449	4.8	104	9,874	5.1	61	5,329	3.4	97	7,982	6.1
Masters in nursing	398	36,492	7.5	106	9,387	4.9	53	5,200	3.4	215	19,899	15.2
Doctorate in related field	45	5,181	1.1	18	2,005	1.0	10	1,331	0.9	17	1,846	1.4
Doctorate in nursing	18	1,305	0.3	4	184	0.1	2	186	0.1	10	738	0.6
Not known	96	9,098	1.9	9	1,106	0.6	8	932	0.6	0	0	0.0

* Includes 14,979 nurses whose initial nursing education was in a master's degree program, 532 in a doctoral degree program, and 46,098 whose initial nursing education was not known. Also includes 170 initial masters in nursing updated to doctorate in nursing, of which all are employed in nursing. In addition, includes 13 initial masters in nursing upgraded to non-nursing doctorates, of which all are employed in nursing

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 11. Primary focus of post-RN master's and doctoral degree*: March 2004

Primary focus of degree	Master's degree**			Doctoral degree**		
	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent
Total	4,802	391,472	100.0	465	40,038	100.0
Clinical practice***	2,132	171,320	43.8	25	2,330	5.8
Education	633	52,359	13.4	106	8,530	21.3
Supervision/administration	670	56,788	14.5	39	3,794	9.5
Research	15	960	0.2	87	7,106	17.7
Law	3	270	0.1	51	4,538	11.3
Informatics	19	1,404	0.4	0	0	0.0
Business	220	18,998	4.9	5	512	1.3
Public health	272	20,849	5.3	13	942	2.4
Social science	57	4,995	1.3	22	2,079	5.2
Humanities	40	3,069	0.8	6	454	1.1
Basic sciences	35	2,813	0.7	2	167	0.4
Computer science	10	789	0.2	0	0	0.0
Social work	41	3,228	0.8	0	0	0.0
Other	256	20,577	5.3	35	3,146	7.9
Not known	399	33,053	8.4	74	6,441	16.1

* Includes degrees in nursing or nursing-related areas

**Nurses may have reported multiple masters or doctorate degrees. In such cases the masters/doctorate in nursing takes precedence and is the only degree at that level shown here.

***Excludes 14,797 nurses whose initial education was in a master's degree program and 532 in a doctoral degree program, which are all in clinical practice.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 12. Current enrollment of registered nurses in nursing or nursing-related academic degree educational programs*, by employment status and student status: March 2004

Employment and student status	Number in sample	Current enrollment	
		Estimated Number	Percent
Total	2,125	172,150	100.0
Employed in nursing full-time			
Total	1,524	124,256	72.2
Full-time student	363	27,753	22.3
Part-time student	1,121	92,916	74.8
Student status not known	40	3,587	2.9
Employed in nursing part-time			
Total	452	35,068	20.4
Full-time student	146	11,202	6.5
Part-time student	290	22,664	13.2
Student status not known	16	1,202	0.7
Employed in nursing ft/pt unknown			
Total	3	403	0.2
Full-time student	1	122	0.1
Part-time student	1	159	0.1
Student status not known	1	122	0.1
Not employed in nursing			
Total	146	12,422	7.2
Full-time student	58	4,083	2.4
Part-time student	78	7,484	4.4
Student status not known	10	855	0.5

*Of the approximately 220,000 RNs pursuing formal educational programs, this table excludes the 24,446 currently enrolled in certificate programs, the 27,960 whose certificate or academic programs were in a field not related to nursing, and those whose failed to indicate the type of formal program being pursued.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 13. Distribution of advanced practice nurses by employment status, and by national certification and State nursing board recognition: March 2004

Type of advanced practice nurse and employment status	Total Estimated		National Certification		State Board of Nursing Recognition	
	Number*, **	Percent	Number	Percent	Number	Percent
Total Nurses with advanced practice nurse preparation	240,460	100.0	168,546	100.0	148,647	100.0
Clinical nurse specialists						
Total	72,521	100.0	32,385	100.0	27,379	100.0
Employed in nursing	61,735	85.1	29,224	90.2	25,684	93.8
With position title	11,988	16.5	7,267	22.4	6,890	25.2
Without position title	49,747	68.6	21,957	67.8	18,793	68.6
Not employed in nursing	10,786	14.9	3,161	9.8	1,695	6.2
Nurse practitioners						
Total	141,209	100.0	109,582	100.0	102,142	100.0
Employed in nursing	123,857	87.7	99,762	91.0	92,540	90.6
With position title	81,433	57.7	73,812	67.4	68,895	67.5
Without position title	42,425	30.0	25,950	23.7	23,646	23.1
Not employed in nursing	17,352	12.3	9,820	9.0	9,601	9.4
Nurse anesthetists						
Total	32,523	100.0	30,446	100.0	24,168	100.0
Employed in nursing	29,150	89.6	27,734	91.1	22,350	92.5
With position title	26,761	82.3	26,116	85.8	21,377	88.5
Without position title	2,389	7.3	1,618	5.3	973	4.0
Not employed in nursing	3,373	10.4	2,712	8.9	1,818	7.5
Nurse midwives						
Total	13,684	100.0	12,820	100.0	10,296	100.0
Employed in nursing	12,217	89.3	11,466	89.4	9,363	90.9
With position title	7,037	51.4	7,010	54.7	5,934	57.6
Without position title	5,181	37.9	4,457	34.8	3,429	33.3
Not employed in nursing	1,466	10.7	1,353	10.6	933	9.1

* Estimated numbers of individual specialties of advanced practice nurses and their percents may add up to more than the total numbers of nurse who have achieved advanced practice nurse status because registered nurses may have had preparation in more than one advanced practice nurse specialty.

** The most frequent pairings of APN specialties are nurse practitioners with clinical nurse specialists and nurse practitioners with nurse midwives. The table below shows the weighted number and percent of nurses who have various combinations of specialties. Note that each pairing includes, but is not limited to, the specialties listed

	Total	
	Number	Percent
Total Nurse practitioners and clinical nurse specialists	14,689	100.0
Employed in nursing	13,717	93.4
With nurse practitioner position title	8,990	66.1
With clinical nurse specialist position title	776	5.7
With other position title	3,842	28.2
Not employed in nursing	972	6.6
Total Nurse practitioners and nurse midwives	2,892	100.0
Employed in nursing	2,326	80.4
With nurse practitioner position title	684	31.0
With nurse midwife position title	865	39.2
With other position title	655	29.7
Not employed in nursing	567	19.6
Total Nurse practitioner, clinical nurse specialist and nurse midwife	48	
Total Nurse practitioner, clinical nurse specialist and nurse anesthetist	205	
Total Nurse midwife and clinical nurse specialist	433	
Total Clinical nurse specialist and nurse anesthetist	679	

Table 14. Distribution of registered nurses with specialties in advanced practice nursing preparation and credentials: March 2004

Type of primary specialty completed at advanced practice level	Advanced practice nurses	
	Number*	Estimated Percent
Total number of advanced practice nurses	240,460	100.0
Acute/Critical care	15,873	6.6
Adult health/medical surgical	34,268	14.3
Anesthesia	31,521	13.1
Cardiac care	1,115	0.5
Community health	5,825	2.4
Family	60,146	25.0
Geriatric/gerontology	11,250	4.7
Home health	193	0.1
Maternal-child health	5,784	2.4
Neonatal	3,422	1.4
Nurse-midwifery	12,164	5.1
Obstetrics/gynecology	4,969	2.1
Occupational health	523	0.2
Oncology	2,573	1.1
Palliative care	135	0.1
Pediatric	19,419	8.1
Psychiatric/mental health	19,693	8.2
Rehabilitation	1,163	0.5
School health	1,686	0.7
Womens health	11,488	4.8
Other	519	0.2

* The number of advanced practice nurse specialty educational preparations will exceed the total number of advanced practice nurses because each may have completed educational requirements in one or more specialties. If specialty educational preparations were completed or certifications received across disciplines, both specialty subjects are included in these distributions. Nurses are counted once for each type of specialty listed.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 15. Distribution of registered nurses with National certifications in advanced practice nursing: March 2004

Primary type of national certification	Advanced practice nurses with certification	
	Number*	Percent
Total number of nationally certified advanced practice nurses	168,546	100.0
Acute care/critical care	8,758	3.6
Adult	16,956	7.1
Anesthesia	30,548	12.7
Community health	708	0.3
Family	48,367	20.1
Geriatric/gerontology	6,186	2.6
Home Health	290	0.1
Medical or surgical	3,646	1.5
Midwifery	12,807	5.3
Neonatal	2,138	0.9
Occupational health	145	0.1
Oncology	681	0.3
Pediatric	12,928	5.4
Palliative care	159	0.1
Psychiatric/mental health	11,986	5.0
School health	586	0.2
Womens health (OB-GYN)	11,540	4.8
No exam available	1,411	0.6
Other	770	0.3

* Advanced practice nurses may have completed educational requirements or certification in one or more specialties in advanced practice nursing. If specialty educational certifications were received across disciplines, both specialty subjects are included in these distributions.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 16. Employment setting of primary positions of registered nurses employed in nursing: March 2004

Employment setting	Number in sample	Estimated Number	Percent
Total	30,233	2,421,351	100.0
Hospital	16,805	1,360,847	56.2
Non-Federal, short-term hospital	13,559	1,099,147	45.4
Non-Federal, long-term hospital	1,153	99,420	4.1
Non-Federal psychiatric hospital	507	39,544	1.6
Federal Government hospital	963	70,358	2.9
Other type of hospital	623	52,377	2.2
Nursing home/extended care facility	1,997	153,172	6.3
Nursing home unit in hospital	180	12,090	0.5
Other nursing home	1,403	109,656	4.5
Facility for mentally retarded	89	7,748	0.3
Residential living facilities	39	3,316	0.1
Assisted living	61	4,387	0.2
Other type of extended care facility	225	15,977	0.7
Nursing education & other health education	826	63,444	2.6
LPN/LVN program	91	6,939	0.3
Diploma program (RN)	64	5,367	0.2
Associate degree program	264	19,814	0.8
Certified nurse aide/nurse assistant program	27	1,989	0.1
Bachelor's and/or higher degree program	313	23,788	1.0
Other program	67	5,545	0.2
Community/public health setting	3,292	259,011	10.7
State Health Department	295	19,328	0.8
State Mental Health Agency	93	6,575	0.3
City or County Health Department	338	28,557	1.2
Combination nursing service	9	901	0.0
Visiting Nursing Service (VNS/NA)	184	13,804	0.6
Home health service unit (hosp-based)	318	25,307	1.0
Home health agency (non-hosp based)	816	66,678	2.8
Community mental-health facility	152	12,444	0.5
Substance abuse center/clinic	57	4,593	0.2
Community/neighborhood health center	178	12,847	0.5
Planned Parenthood/family planning ctr	47	3,203	0.1
Day care center	55	4,627	0.2
Rural health care center	69	4,406	0.2
Retirement community center	34	2,653	0.1
Hospice	370	30,681	1.3
Blood bank or plasma center	56	4,734	0.2
Other	221	18,574	0.8
School Health Service	974	78,022	3.2
Public school system	699	55,924	2.3
Private or parochial school	66	5,482	0.2
College or university	167	13,175	0.5
Other	42	3,442	0.1

Table 16. (cont.) Employment setting of primary positions of registered nurses employed in nursing: March 2004

Employment setting	Number in sample	Estimated Number	Percent
Total	30,233	2,421,351	100.0
Occupational Health	277	22,447	0.9
Private industry	175	14,917	0.6
Government	70	5,121	0.2
Other	32	2,408	0.1
Ambulatory care setting	3,569	277,774	11.5
Solo practice (physician)	401	32,901	1.4
Solo practice (nurse)	68	5,100	0.2
Partnerships (physicians)	255	21,233	0.9
Partnerships (nurses)	18	1,016	0.0
Group practice (physicians)	657	51,850	2.1
Group practice (nurses)	30	2,277	0.1
Partnership or group practice	409	29,899	1.2
Freestanding clinic (physicians)	184	12,032	0.5
Freestanding clinic (nurses)	58	4,106	0.2
Ambulatory surgical center	575	46,212	1.9
Dialysis center/clinic	227	18,872	0.8
Dental practice	11	1,136	0.0
Hospital owned off-site clinics	366	27,304	1.1
Health Maintenance Organization	146	12,663	0.5
Federally supported clinics	64	3,333	0.1
Other	100	7,837	0.3
Insurance claims/benefits	563	43,641	1.8
Government	36	2,702	0.1
State or local agencies	35	2,209	0.1
Insurance company	327	26,054	1.1
Private industry/organization	165	12,676	0.5
Policy, planning, regulatory, or licensing agency	114	8,733	0.4
Central or regional Federal agency	23	1,426	0.1
State Board of Nursing	35	2,596	0.1
Nursing or health prof. membership assn	13	905	0.0
Health planning agency, non-Federal	32	2,918	0.1
Other	11	887	0.0
Other	1,229	103,310	4.3
Correctional facility	218	17,602	0.7
Private duty in a home setting	103	9,754	0.4
Home-based self-employment	148	12,090	0.5
Pharmaceutical, durable medical equipment, devi	68	6,625	0.3
Telephone triage/advice (call center)	57	4,584	0.2
Clinical research, clinical trials	76	6,423	0.3
Other*	559	46,231	1.9
Not known	587	50,052	2.1

*Includes law/legal nursing/forensics, consultants, transport ambulance, and other settings

NOTE: Estimated numbers may not equal totals, and percents may not add to 100,

**Table 17. Type of patient treated in organization or unit
for principal position in nursing, by employment status: March 2004**

Type of patient treated	Total Estimated		Employment status			
	Number*	Percent	Full-time Number	Percent	Part-time Number	Percent
Total	2,421,351	100.0	1,696,807	100.0	720,283	100.0
No patient care	127,436	5.3	97,060	5.7	30,334	4.2
Addictions/substance abuse/detox	4,055	0.2	2,204	0.1	1,851	0.3
Adolescent	5,271	0.2	3,243	0.2	2,027	0.3
Adult care (general)	513,834	21.2	356,650	21.0	157,133	21.8
Cardiovascular	171,219	7.1	126,484	7.5	44,735	6.2
Chronic care	35,215	1.5	23,021	1.4	12,084	1.7
Critical care/trauma/ER	9,769	0.4	6,488	0.4	3,281	0.5
Diabetic/endocrinology	3,842	0.2	2,475	0.1	1,367	0.2
Employee/occupational health	6,561	0.3	4,633	0.3	1,928	0.3
Family	4,054	0.2	2,466	0.1	1,449	0.2
Gastrointestinal/endoscopy	10,274	0.4	7,427	0.4	2,847	0.4
Geriatrics/elderly	41,113	1.7	29,392	1.7	11,619	1.6
Hospice/terminally ill	13,636	0.6	10,041	0.6	3,595	0.5
Infectious diseases/HIV/communicable diseases	4,695	0.2	4,245	0.3	451	0.1
Medical-Surgical (general)	31,141	1.3	19,759	1.2	11,382	1.6
Neurological	22,802	0.9	16,755	1.0	6,048	0.8
Newborn	76,145	3.1	46,454	2.7	29,690	4.1
Obstetrics/gynecologic	158,847	6.6	100,444	5.9	57,924	8.0
Oncology	68,332	2.8	51,382	3.0	16,901	2.3
Ophthalmologic/eye	4,080	0.2	2,033	0.1	2,047	0.3
Orthopedic	42,438	1.8	31,305	1.8	11,134	1.5
Pediatric	176,698	7.3	109,524	6.5	67,174	9.3
Psychiatric	90,765	3.7	68,330	4.0	22,435	3.1
Pulmonary/respiratory	5,626	0.2	4,140	0.2	1,487	0.2
Rehabilitation	41,458	1.7	29,893	1.8	11,485	1.6
Renal	33,681	1.4	28,149	1.7	5,532	0.8
Spec. needs/dev. disability/mental retardation	6,630	0.3	4,651	0.3	1,980	0.3
Work with specific, multiple patient types	608,940	25.1	439,579	25.9	168,497	23.4
Other**	42,363	1.7	28,607	1.7	13,757	1.9
Not known	60,431	2.5	39,975	2.4	18,110	2.5

* Includes an estimated 4,261 who are working in nursing, but full-time/part-time status is unknown.

** Includes advice/telephone triage, Alzheimer's/dementia, blood donation/apheresis, dermatology, ENT/allergy/asthma, pain management, plastic/cosmetic surgery, public/community health/immunizations, transplant, urology, wounds/burns, and other patient types

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 18. Type of hospital work unit where hospital-employed registered nurses spent more than half their direct patient care time, by employment status in principal nursing position: March 2004

Type of work unit	Total Estimated		Employment status			
	Number	Percent	Full-time Number	Full-time Percent	Part-time Number	Part-time Percent
Total	1,350,687	100.0	945,091	100.0	404,735	100.0
Critical care	229,914	17.0	164,324	17.4	65,557	16.2
Dialysis	7,552	0.6	6,441	0.7	1,111	0.3
Emergency department	117,637	8.7	85,789	9.1	31,725	7.8
General/specialty inpatient unit	382,331	28.3	263,035	27.8	119,198	29.5
Home health care	5,105	0.4	3,426	0.4	1,679	0.4
Hospice unit	3,801	0.3	1,927	0.2	1,874	0.5
Labor/delivery room	95,800	7.1	61,218	6.5	34,244	8.5
Operating room	116,927	8.7	91,435	9.7	25,492	6.3
Outpatient department	123,166	9.1	83,497	8.8	39,669	9.8
Perioperative unit	62,747	4.6	37,455	4.0	25,157	6.2
Radiologic	13,680	1.0	9,106	1.0	4,574	1.1
Step-down, transitional unit	92,826	6.9	68,666	7.3	24,160	6.0
Sub-acute care unit	20,329	1.5	15,960	1.7	4,370	1.1
Telephone triage/advice/call center	797	0.1	88	0.0	708	0.2
Multiple units, none over 50%	38,719	2.9	27,333	2.9	11,378	2.8
No specific area	16,401	1.2	10,733	1.1	5,543	1.4
Other specific area	5,941	0.4	4,101	0.4	1,840	0.5
Not known	17,015	1.3	10,559	1.1	6,456	1.6

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 19. Registered nurses employed in each employment setting, by employment status and average annual hours worked*: March 2004

Employment setting	Total			Employment status					
	Estimated		Average annual hours worked	Full-time			Part-time		
	Number	Percent		Number	Percent	Average annual hours worked	Number	Percent	Average annual hours worked
Total	2,421,351	100.0	1,848	1,696,807	70.1	2,160	720,283	29.7	873
Hospital	1,360,847	100.0	1,907	968,817	71.2	2,179	390,856	28.7	935
Nursing home/extended care facility	153,172	100.0	1,921	110,086	71.9	2,262	42,826	28.0	817
Nursing education	63,444	100.0	1,687	42,757	67.4	2,089	20,687	32.6	938
Community/public health setting	259,911	100.0	1,785	181,759	69.9	2,145	77,992	30.0	711
School Health Service	78,022	100.0	1,360	48,679	62.4	1,722	29,344	37.6	895
Occupational Health	22,447	100.0	1,761	15,067	67.1	2,124	7,379	32.9	644
Ambulatory care setting	277,774	100.0	1,771	181,701	65.4	2,106	95,599	34.4	861
Insurance claims/benefits	43,641	100.0	2,026	38,168	87.5	2,172	5,473	12.5	779
Policy/planning/reg/lic agency	8,733	100.0	2,070	7,436	85.2	2,293	1,296	14.8	**
Other	103,310	100.0	1,801	68,842	66.6	2,204	33,898	32.8	747
Not known	50,052	100.0	1,762	33,495	66.9	2,276	14,934	29.8	691

*Calculations of the average number of hours worked exclude those nurses who have reported any on-call hours as well as all their hours of work.

**Too few cases to compute average hours (fewer than 50 cases unweighted)

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 20. Average hours worked per week* and overtime hours per week of employed registered nurses in their principal nursing position, by employment setting: March 2004**

Employment setting	Employment status					
	Employed full-time			Employed part-time		
	Average hours worked/week	Number	Average overtime hours/week	Average hours worked/week	Number	Average overtime hours/week
Total	43.7	434,947	7.5	26.3	103,202	5.6
Hospital						
Nursing home/extended care facility	43.9	312,158	7.6	27.3	78,208	5.8
Nursing education	45.4	30,350	8.3	26.1	6,202	4.4
Community/public health setting	44.4	4,864	8.5	27.1	1,550	***
School Health Service	43.3	30,156	7.6	23.8	7,107	5.2
Occupational Health	39.4	1,955	***	27.5	370	***
Ambulatory care setting	43.2	2,403	***	27.9	487	***
Insurance claims/benefits	43.0	36,441	5.3	24.4	6,058	3.7
Policy/planning/reg/lic agency	43.1	1,566	***	23.8	114	***
Other	45.5	1,123	***	***	180	***
Not known	44.5	10,902	10.7	25.1	1,833	7.1
	44.4	3,028	8.4	28.2	1,094	5.5

* Calculations of the average number of hours worked and overtime hours worked exclude those nurses who have reported any on-call hours as well as all their hours of work.

** Excludes an estimated 4,261 who are working in nursing, but full-time/part-time status is unknown.

*** Too few cases to compute average hours (fewer than 50 cases unweighted)

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 21. Average overtime and mandatory overtime hours* for full time nurses
by employment setting and position title: March 2004**

Employment setting	Total full time employed nurses				Position Title			
	Estimated Number**	Average overtime hours**	Percent of overtime hours that were mandatory***	Average overtime hours**	Staff nurse	Percent of overtime hours that were mandatory**	Average overtime hours**	Percent of overtime hours that were mandatory***
Total	434,947	7.5	32.5	7.5	31.7	7.5	35.5	
Hospital	312,158	7.6	31.0	7.5	29.4	7.9	39.4	
Nursing home/extended care facility	30,350	8.3	36.6	8.9	39.3	7.3	33.0	
Nursing education	4,864	8.5	24.0	****	****	****	****	
Community/public health setting	30,156	7.6	37.4	7.6	44.3	7.6	33.1	
School Health Service	1,955	****	****	****	****	****	****	
Occupational Health	2,403	****	****	****	****	****	****	
Ambulatory care setting	36,441	5.3	42.7	5.3	46.1	5.5	36.5	
Insurance claims/benefits	1,566	****	****	****	****	****	****	
Policy/planning/reg/lic agency	1,123	****	****	****	****	****	****	
Other	10,902	10.7	26.8	10.9	27.8	****	****	
Not known	3,028	8.4	****	****	****	****	****	

*Calculations of the average number of overtime hours worked exclude those nurses who have reported any on-call hours as well as all their hours of work.

**Excludes an estimated 1,261,860 full time nurses who did not report any overtime hours

***Includes an estimated 175,563 full time nurses who reported mandatory hours

**** Too few cases to compute hours (fewer than 50 cases unweighted)

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 22. Employed registered nurses, by employment setting and age group: March 2004

Employment setting	Number in sample	Total Estimated Number*	Under 25	Age Group								
				25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65 and over
Total	30,233	2,421,351	59,592	159,676	221,052	256,967	360,249	449,797	406,748	271,264	136,191	75,305
Hospital	16,805	1,360,847	51,850	118,218	146,347	164,467	214,165	248,181	206,154	125,383	58,406	20,651
Nursing home/extended care facility	1,997	153,172	741	6,589	12,616	12,858	18,747	23,337	27,746	20,199	16,115	12,871
Nursing education	826	63,444	466	2,909	3,827	4,103	8,207	9,494	14,033	10,685	5,205	3,783
Community/public health setting	3,292	259,911	1,087	9,997	16,290	22,743	34,283	50,424	49,685	39,340	19,531	14,085
School Health Service	974	78,022	422	1,350	4,764	5,531	10,145	18,868	15,317	10,862	5,471	4,582
Occupational Health	277	22,447	0	526	1,175	1,509	2,440	4,427	3,847	3,632	2,719	2,013
Ambulatory care setting	3,569	277,774	3,688	13,914	23,940	27,723	45,026	57,469	51,550	32,354	12,931	8,282
Insurance claims/benefits	563	43,641	0	719	1,703	3,664	7,002	10,736	9,221	6,310	3,058	1,049
Policy/planning/reg/lic agency	114	8,733	0	415	633	577	1,014	1,626	1,668	1,404	947	447
Other	1,229	103,310	560	2,818	6,308	8,723	14,718	18,181	20,110	16,151	8,765	5,688
Not known	587	50,052	779	2,221	3,448	5,069	4,502	7,053	7,417	4,944	3,043	1,854

* Includes an estimated 24,511 nurses for whom age was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 23. Employment setting, by highest nursing or nursing-related educational preparation of registered nurses employed in nursing: March 2004

Employment setting	Number in sample	Total		Highest nursing or nursing-related educational preparation						Master's						Doctorate	
		Number*	Percent	Diploma	Associate Degree	Baccalaureate	Master's	Doctorate	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	30,233	2,421,351	100.0	369,741	15.3	861,949	35.6	841,554	34.8	290,860	12.0	19,614	0.8				
Hospital	16,805	1,360,847	100.0	191,921	14.1	513,294	37.7	521,292	38.3	123,420	9.1	4,627	0.3				
Nursing home/extended care facility	1,997	153,172	100.0	32,986	21.5	71,860	46.9	36,965	24.1	10,241	6.7	223	0.1				
Nursing education	826	63,444	100.0	4,023	6.3	11,032	17.4	14,686	23.1	23,676	37.3	9,872	15.6				
Community/public health setting	3,292	259,911	100.0	39,161	15.1	95,608	36.8	87,550	33.7	32,977	12.7	1,141	0.4				
School Health Service	974	78,022	100.0	12,034	15.4	17,083	21.9	31,745	40.7	15,583	20.0	834	1.1				
Occupational Health	277	22,447	100.0	4,811	21.4	6,058	27.0	8,543	38.1	3,035	13.5	0	0.0				
Ambulatory care setting	3,569	277,774	100.0	53,706	19.3	87,918	31.7	80,113	28.8	53,978	19.4	815	0.3				
Insurance claims/benefits	563	43,641	100.0	8,846	20.3	12,682	29.1	16,449	37.7	5,390	12.4	274	0.6				
Policy/planning/reg/lic agency	114	8,733	100.0	797	9.1	2,139	24.5	2,123	24.3	3,430	39.3	244	2.8				
Other	1,229	103,310	100.0	16,466	15.9	34,023	32.9	33,586	32.5	15,775	15.3	1,333	1.3				
Not known	587	50,052	100.0	4,989	10.0	10,252	20.5	8,501	17.0	3,356	6.7	251	0.5				

* Includes an estimated 37,634 nurses for whom highest educational preparation was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 24. Employment setting of registered nurses in principal nursing position, by work basis: March 2004

Employment setting	Total			Work basis								
	Number in sample	Number*	Estimated Percent	Employee of organization Number in sample	Estimated Number	Percent	Temporary agency Number in sample	Estimated Number	Percent	Self-employed Number in sample	Estimated Number	Percent
Total	30,233	2,421,351	100.0	27,213	2,184,921	90.2	768	54,493	2.3	1,694	134,150	5.5
Hospital	16,805	1,360,847	100.0	15,475	1,264,512	92.9	535	34,389	2.5	694	53,173	3.9
Nursing home/extended care facility	1,997	153,172	100.0	1,870	143,002	93.4	29	2,285	1.5	87	7,289	4.8
Nursing education	826	63,444	100.0	784	60,142	94.8	10	847	1.3	25	1,790	2.8
Community/public health setting	3,292	259,911	100.0	2,991	233,458	89.8	62	5,527	2.1	195	16,829	6.5
School Health Service	974	78,022	100.0	903	71,461	91.6	13	1,455	1.9	44	3,986	5.1
Occupational Health	277	22,447	100.0	209	16,838	75.0	33	2,970	13.2	29	2,259	10.1
Ambulatory care setting	3,569	277,774	100.0	3,238	253,280	91.2	25	2,004	0.7	281	20,280	7.3
Insurance claims/benefits	563	43,641	100.0	515	39,796	91.2	8	763	1.7	37	2,861	6.6
Policy/planning/reg/lic agency	114	8,733	100.0	102	7,906	90.5	1	31	0.4	10	637	7.3
Other	1,229	103,310	100.0	881	73,321	71.0	45	3,935	3.8	263	22,497	21.8
Not known	587	50,052	100.0	245	21,206	42.4	7	287	0.6	29	2,548	5.1

* Includes an estimated 47,787 nurses for whom work basis was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 25. Position titles in primary nursing jobs for registered nurses employed in nursing: March 2004

General and specific position titles	Number in sample	Estimated	
		Number	Percent
Total	30,233	2,421,351	100.0
Administration	1,609	125,011	5.2
Administrator/assistant org/facil/agency	517	41,669	1.7
Administrator/assistant nursing	873	65,842	2.7
Dean/director/asst director nursing ed	118	9,667	0.4
Nursing staff development director	101	7,832	0.3
Certified nurse anesthetist	399	27,287	1.1
Clinical nurse specialist	362	28,623	1.2
Consultant	435	35,617	1.5
Head nurse or assistant head nurse	1,867	148,210	6.1
Head nurse/assistant head nurse	309	26,955	1.1
Nurse coordinator	604	46,743	1.9
Nurse manager	954	74,512	3.1
Informatics nurse	114	8,570	0.4
Instruction	803	62,255	2.6
Instuctor at a school of nursing	389	29,525	1.2
Nursing staff development instructor	222	17,793	0.7
Professor, assistant/associate prof	165	12,598	0.5
Instructor in a non-RN health program	27	2,339	0.1
Nurse clinician	382	32,954	1.4
Nurse midwife	98	7,274	0.3
Nurse practitioner	1,093	84,042	3.5
Patient coordinator	1,700	138,404	5.7
Case manager	1,256	101,177	4.2
Discharge planner/outcomes manager	41	3,789	0.2
Patient care coordinator	203	16,458	0.7
Patient educator	96	8,085	0.3
Advice/triage nurse	104	8,895	0.4
Private duty nurse	124	11,762	0.5
Researcher	233	19,263	0.8
Staff nurse	17,808	1,431,053	59.1
Charge nurse	2,215	168,827	7.0
Float nurse	467	37,132	1.5
Public health nurse	347	26,527	1.1
School nurse	808	64,610	2.7
Staff nurse	13,495	1,100,538	45.5
Team leader	208	17,664	0.7
Traveling nurse	268	15,756	0.7
Supervisor	902	74,201	3.1
Surveyor/auditor/regulator	147	12,097	0.5
Visiting nurse/Home health	584	45,621	1.9
Other	1,020	82,352	3.4
Healthcare related business rep	35	3,154	0.1
Infection control nurse	94	7,074	0.3
Insurance reviewer	117	9,260	0.4
Quality improvement nurse	367	28,034	1.2
No position title specified	245	21,332	0.9
Other (miscellaneous) title specified	162	13,498	0.6
Not known	553	46,753	1.9

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 26. Employment setting and type of principal nursing position of employed registered nurses: March 2004

Employment setting	Total		Position Title							
	Estimated Number*	Admin or assistant	Cert. nurse anesthetist	Clin. nurse specialist	Consultant	Head nurse or assistant	Home health	Informatic nurse	Instruction	Nurse clinician
Total	2,421,351	125,011	27,287	28,623	35,617	148,210	45,621	8,570	62,255	32,954
Hospital	1,360,847	35,079	21,778	17,443	6,793	78,666	1,311	5,058	13,213	17,305
Nursing home/extended care facility	153,172	28,753	0	540	4,416	15,428	354	225	2,101	130
Nursing education	63,444	5,488	78	176	765	1,553	31	284	36,615	389
Community/public health setting	259,911	25,413	100	1,916	5,802	17,157	40,335	736	2,305	2,776
School Health Service	78,022	2,319	0	32	270	1,669	27	0	4,110	397
Occupational Health	22,447	1,171	203	260	981	2,123	57	0	383	286
Ambulatory care setting	277,774	15,445	4,116	5,959	2,149	23,759	167	513	1,031	9,279
Insurance claims/benefits	43,641	2,366	0	73	2,093	2,273	0	446	0	253
Policy/planning/reg/lic agency	8,733	1,480	301	277	974	111	0	0	0	26
Other	103,310	6,326	261	1,323	11,125	4,297	2,928	1,137	1,908	1,602
Not known	50,052	1,170	450	625	250	1,173	410	171	589	511

Employment setting	Nurse midwife	Nurse Practitioner	Patient coordinator	Private duty	Position title				Surveyor/ auditor	Other
					Research	Staff nurse	Supervisor			
Total	7,274	84,042	138,404	11,762	19,263	1,431,053	74,201	12,097	82,352	
Hospital	1,265	21,075	46,566	359	6,715	1,017,641	31,979	2,321	29,168	
Nursing home/extended care facility	0	3,688	6,275	793	0	63,681	16,829	1,321	7,611	
Nursing education	95	84	750	0	632	13,936	696	277	841	
Community/public health setting	996	11,260	38,953	3,938	667	75,069	14,553	2,956	12,085	
School Health Service	0	3,051	204	141	722	63,056	628	0	1,010	
Occupational Health	0	1,142	3,227	133	261	9,352	980	151	1,593	
Ambulatory care setting	4,753	40,349	11,202	127	3,851	140,617	3,210	471	9,444	
Insurance claims/benefits	0	580	20,817	0	488	1,066	1,440	1,558	9,932	
Policy/planning/reg/lic agency	64	62	301	0	0	2,042	199	1,771	1,101	
Other	0	1,859	8,506	6,001	5,929	30,026	3,310	1,271	8,274	
Not known	101	893	1,603	271	0	14,567	379	0	1,291	

* Includes an estimated 46,753 nurses for whom type of position was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 27. Type of principal nursing position and highest nursing or nursing-related educational preparation of registered nurses employed in nursing: March 2004

Type of position	Number in sample	Total		Highest nursing or nursing-related educational preparation									
		Number*	Estimated Percent	Diploma		Associate Degree		Baccalaureate		Master's		Doctorate	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	30,233	2,421,351	100.0	369,741	15.3	861,949	35.6	841,554	34.8	290,860	12.0	19,614	0.8
Administration	1,609	125,011	100.0	13,043	10.4	35,165	28.1	34,201	27.4	36,430	29.1	5,176	4.1
Certified nurse anesthetist	399	27,287	100.0	5,321	19.5	2,415	8.9	5,538	20.3	13,579	49.8	281	1.0
Clinical nurse specialist	362	28,623	100.0	2,304	8.0	6,048	21.1	6,011	21.0	13,942	48.7	318	1.1
Consultant	435	35,617	100.0	4,912	13.8	7,399	20.8	13,067	36.7	9,361	26.3	878	2.5
Head nurse or assistant head nurse	1,867	148,210	100.0	23,459	15.8	46,798	31.6	58,554	39.5	18,388	12.4	381	0.3
Home health	584	45,621	100.0	9,787	21.5	16,917	37.1	16,222	35.6	2,441	5.4	141	0.3
Informatic nurse	114	8,570	100.0	1,201	14.0	2,232	26.0	2,747	32.0	2,391	27.9	0	0.0
Instruction	803	62,255	100.0	2,408	3.9	6,322	10.2	17,660	28.4	28,443	45.7	7,345	11.8
Nurse clinician	382	32,954	100.0	4,476	13.6	9,334	28.3	14,467	43.9	4,180	12.7	212	0.6
Nurse midwife	98	7,274	100.0	263	3.6	261	3.6	1,041	14.3	5,684	78.1	26	0.4
Nurse practitioner	1,093	84,042	100.0	2,364	2.8	3,270	3.9	6,106	7.3	71,428	85.0	874	1.0
Patient coordinator	1,700	138,404	100.0	24,255	17.5	49,086	35.5	53,340	38.5	10,572	7.6	584	0.4
Private duty	124	11,762	100.0	2,529	21.5	5,206	44.3	3,796	32.3	73	0.6	0	0.0
Research	233	19,263	100.0	2,685	13.9	3,902	20.3	8,748	45.4	3,234	16.8	695	3.6
Staff nurse	17,808	1,431,053	100.0	235,225	16.4	599,630	41.9	538,341	37.6	50,140	3.5	1,598	0.1
Supervisor	902	74,201	100.0	13,477	18.2	32,217	43.4	21,990	29.6	5,747	7.7	141	0.2
Surveyor/auditor/regulator	147	12,097	100.0	1,417	11.7	3,867	32.0	3,928	32.5	2,835	23.4	50	0.4
Other	1,020	82,352	100.0	16,844	20.5	24,772	30.1	28,416	34.5	8,450	10.3	769	0.9
Not known	553	46,753	100.0	3,771	8.1	7,108	15.2	7,382	15.8	3,543	7.6	145	0.3

* Includes an estimated 37,634 nurses for whom educational preparation was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 28. Percentage of time spent in each functional area in principal nursing position during usual work week for employed registered nurses: March 2004

Percentage of time spent during usual workweek	Functional Area						Functional Area					
	Administration		Consultation		Direct patient care		Research		Supervision		Teaching	
	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent
Total	30,233	2,421,351	100.0	30,233	2,421,351	100.0	30,233	2,421,351	100.0	30,233	2,421,351	100.0
None	19,341	1,558,504	64.4	15,133	1,227,939	50.7	4,603	375,858	15.5			
1-24	6,374	499,864	20.6	11,427	894,981	37.0	2,865	224,773	9.3			
25-49	1,978	152,986	6.3	1,928	155,426	6.4	2,207	174,836	7.2			
50-74	1,179	96,788	4.0	604	47,283	2.0	4,757	379,226	15.7			
75-100	644	51,940	2.1	424	34,453	1.4	15,084	1,205,389	49.8			
Not known	717	61,269	2.5	717	61,269	2.5	717	61,269	2.5			

Percentage of time spent during usual workweek	Functional Area						Functional Area					
	Research		Supervision		Teaching		Research		Supervision		Teaching	
	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent	Number in sample	Estimated Percent
Total	30,233	2,421,351	100.0	30,233	2,421,351	100.0	30,233	2,421,351	100.0	30,233	2,421,351	100.0
None	24,746	1,978,375	81.7	17,374	1,387,231	57.3	21,632	1,733,761	71.6			
1-24	4,156	331,752	13.7	7,379	593,979	24.5	6,336	501,003	20.7			
25-49	290	23,457	1.0	2,238	177,239	7.3	666	55,280	2.3			
50-74	143	11,910	0.5	1,546	121,509	5.0	382	31,363	1.3			
75-100	181	14,588	0.6	979	80,124	3.3	500	38,675	1.6			
Not known	717	61,269	2.5	717	61,269	2.5	717	61,269	2.5			

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 29. Average percent of time in work week in principal nursing position spent by employed registered nurses in each function, by highest nursing or nursing-related educational preparation: March 2004

Highest educational preparation	Average percent of time spent in		
	Administration	Consultation	Direct patient care
Total	8.3	8.1	60
Diploma	6.7	7.6	62.5
Associate degree	6.7	7.3	64.5
Baccalaureate	7.8	8.4	60.8
Masters	15.6	10.3	44.5
Doctorate	23.4	8.8	16.5
Not known	10.1	9.1	56.9

Highest educational preparation	Average percent of time spent in		
	Research	Supervision	Teaching
Total	2.1	10.8	4.7
Diploma	1.8	10.7	2.8
Associate degree	1.8	11.4	3.1
Baccalaureate	2.2	10.6	4.4
Masters	2.8	10.1	11.4
Doctorate	12.8	6.8	27.7
Not known	2.1	14.3	3.6

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 30. Average annual earnings in principal nursing position for registered nurses employed full time, by employment setting and position title: March 2004

Employment setting	Overall average*	Position Title						
		Admin or assistant	Cert. nurse anesthetist	Clin. nurse specialist	Consultant	Head nurse or assistant	Home health	Informatic nurse
							Instruction	Nurse clinician
Total	\$57,785	\$74,165	\$129,530	\$64,627	\$61,432	\$61,595	\$51,596	\$61,139
Hospital	59,963	90,470	131,826	68,347	**	67,034	**	**
Nursing home/extended care facility	53,796	59,272	**	**	**	53,558	**	**
Nursing education	57,808	74,182	**	**	**	**	**	**
Community/public health setting	52,347	65,255	**	**	**	53,094	51,030	**
School Health Service	42,249	**	**	**	**	**	**	**
Occupational Health	58,343	**	**	**	**	**	**	**
Ambulatory care setting	56,265	74,087	**	58,677	**	54,293	**	**
Insurance claims/benefits	58,839	**	**	**	**	**	**	**
Policy/planning/reg/lic agency	66,852	**	**	**	**	**	**	**
Other	60,583	74,471	**	**	63,926	**	**	**
Not known	58,487	**	**	**	**	**	**	**

Employment setting	Nurse midwife	Position title						
		Nurse Practitioner	Patient coordinator	Private duty	Research	Staff nurse	Supervisor	Surveyor/ auditor
								Other
Total	\$73,254	\$70,581	\$53,837	\$49,070	\$59,220	\$53,086	\$58,065	\$56,710
Hospital	**	75,514	57,890	**	57,767	55,171	62,783	**
Nursing home/extended care facility	**	**	49,939	**	**	48,870	53,062	**
Nursing education	**	**	**	**	**	54,891	**	**
Community/public health setting	**	64,288	48,354	**	**	46,723	52,307	**
School Health Service	**	**	**	**	**	39,343	**	**
Occupational Health	**	**	**	**	**	54,600	**	**
Ambulatory care setting	**	70,335	50,862	**	**	46,649	**	**
Insurance claims/benefits	**	**	55,021	**	**	**	**	**
Policy/planning/reg/lic agency	**	**	**	**	**	**	**	**
Other	**	**	61,162	**	**	53,099	**	**
Not known	**	**	**	**	**	57,771	**	**

* Excludes an estimated 99,701 nurses who did not provide a response to income

** Too few cases to compute salaries (fewer than 50 cases unweighted)

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 31. Average annual earnings in principal nursing position of nurses employed full-time, by type of position and highest nursing or nursing-related educational preparation: March 2004

Type of position	Overall average*	Highest nursing or nursing-related educational preparation				
		Diploma	Associate Degree	Bacca-laureate	Master's	Doctorate
Total	\$57,785	\$56,504	\$52,610	\$57,081	\$74,377	\$80,795
Administration	74,165	63,478	60,442	68,696	92,831	97,275
Consultant	61,432	**	56,194	61,536	65,295	**
Supervisor	58,065	59,903	54,379	60,716	57,821	**
Instruction	57,676	**	**	55,877	**	66,217
Head nurse or assistant head nurse	61,595	57,438	55,791	63,486	74,376	**
Staff nurse	53,086	54,277	51,477	54,003	59,436	**
Nurse practitioner	70,581	**	**	65,459	71,265	**
Nurse midwife	73,254	**	**	**	73,460	**
Clinical nurse specialist	64,627	**	56,526	60,357	70,470	**
Nurse clinician	55,090	**	52,734	54,499	**	**
Certified nurse anesthetist	129,530	115,042	**	122,479	134,479	**
Research	59,220	**	**	59,820	**	**
Private duty	49,070	**	**	**	**	**
Informatic nurse	61,139	**	**	**	**	**
Home health	51,596	50,975	48,290	54,837	**	**
Surveyor/auditor/regulator	56,710	**	**	**	**	**
Patient coordinator	53,837	53,061	50,600	55,846	61,251	**
Other	55,688	52,154	50,477	58,516	64,972	**
Not known	61,812	**	**	**	**	**

* Excludes an estimated 99,701 nurses who did not provide a response to income

** Too few cases to compute salaries (fewer than 50 cases unweighted)

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 32. Distribution of employed registered nurses with one and more than one nursing position,
by employment status and average total earnings: March 2004**

Positions held	Number in sample	Total				Employment status in principal position					
		Estimated		Percent		Full-time			Part-time		
		Number*	Number*	Percent	Percent	Number	Estimated	Percent	Number	Estimated	Avg total earnings**
Total	30,233	2,421,351		100.0		1,696,807		100.0	720,283		\$34,184
Principal and secondary positions	4,608	352,027		14.5		233,149		13.7	118,290		44,633
Principal positions only	24,919	2,010,151		83.0		1,422,403		83.8	586,270		32,002

* Includes an estimated 4,261 nurses for whom full-time/part-time status was not known and 59,173 nurses for whom it was not known whether they held more than one job in nursing

** Averages exclude an estimated 171,183 nurses who did not provide a response to income

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 33. Job satisfaction of RNs employed in nursing, by position title in principal nursing position: March 2004

Level of job satisfaction	Total Estimated Number	Admin or assistant	Position title							
			Consultant	Supervisor	Instruction	Head nurse or assistant	Staff nurse	Nurse Practitioner	Nurse midwife	Clin. nurse specialist
Total	2,421,351	125,011	35,617	74,201	62,255	148,210	1,431,053	84,042	7,274	28,623
Extremely satisfied	651,386	48,057	16,091	19,742	25,405	45,558	316,343	35,588	3,494	11,839
Moderately satisfied	1,197,997	58,537	13,272	38,121	28,467	77,113	744,673	36,928	2,892	12,685
Neither satisfied nor dissatisfied	194,844	5,706	3,940	5,604	2,388	8,580	132,399	3,715	300	1,041
Moderately dissatisfied	259,147	8,455	1,744	8,072	3,749	12,917	182,774	5,647	294	2,063
Extremely dissatisfied	68,175	3,046	498	2,465	1,724	3,242	44,276	1,496	135	871
Not known	49,802	1,209	71	198	521	800	10,588	667	159	124

Employment setting	Nurse clinician	Cert. Nurse anesthetist	Position title						
			Research	Private duty	Informatic nurse	Home health	Surveyor/ auditor	Patient coordinator	Other
Total	32,954	27,287	19,263	11,762	8,570	45,621	12,097	138,404	82,352
Extremely satisfied	9,678	15,035	6,759	3,722	3,084	14,312	4,411	42,674	23,530
Moderately satisfied	16,212	9,804	8,772	4,995	3,961	22,044	5,152	66,707	38,849
Neither satisfied nor dissatisfied	2,047	732	1,550	2,014	924	3,611	881	11,071	6,969
Moderately dissatisfied	3,902	1,179	1,583	850	298	4,202	1,122	12,302	6,791
Extremely dissatisfied	1,017	373	526	182	303	1,293	341	4,675	1,302
Not known	97	165	73	0	0	159	190	975	4,913

* Includes an estimated 46,753 nurses for whom type of position was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 34 Job satisfaction of RNs employed in nursing,
by highest nursing or nursing-related educational preparation: March 2004**

Level of job satisfaction	Total Estimated Number	Highest educational preparation			
		Diploma	Associate Degree	Bacca- laureate	Masters/ Doctorate
Total	2,421,351	369,741	861,949	841,554	310,474
Extremely satisfied	651,386	105,340	217,113	207,565	118,717
Moderately satisfied	1,197,997	180,370	435,068	439,097	139,735
Neither satisfied nor dissatisfied	194,844	28,868	74,850	72,066	18,032
Moderately dissatisfied	259,147	39,907	103,040	92,576	22,536
Extremely dissatisfied	68,175	10,783	25,117	22,983	8,816
Not known	49,802	4,472	6,760	7,266	2,637

* Includes 37,634 nurses for whom highest nursing or nursing-related educational preparation was not known

NOTE: Estimated numbers may not equal totals because of rounding

Table 35. Distribution of registered nurses not employed in nursing, by length of time since last worked as a nurse and whether or not nurse was seeking nursing position or had other occupation: March 2004

Length of time since worked	Number in sample	Total Estimated		Seeking nursing employment		Has other health-related occupation		Employment status outside of nursing		Has other unknown occupation	
		Number*	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	5,402	488,006	100.0	30,278	100.0	63,052	100.0	52,946	100.0	4,513	100.0
Less than a year	844	66,114	13.5	12,505	41.3	4,494	7.1	6,497	12.3	64	1.4
1-4 years	1,576	137,892	28.3	7,618	25.2	15,642	24.8	15,078	28.5	1,263	28.0
5-9 years	1,017	95,397	19.5	3,308	10.9	13,359	21.2	11,341	21.4	406	9.0
10-19 years	756	77,051	15.8	2,204	7.3	17,042	27.0	10,291	19.4	2,081	46.1
20 years or more	331	33,223	6.8	538	1.8	7,394	11.7	5,389	10.2	596	13.2
Never worked	64	6,261	1.3	451	1.5	697	1.1	1,512	2.9	0	0.0
Not known	814	72,067	14.8	3,655	12.1	4,424	7.0	2,839	5.4	104	2.3

*Total includes an estimated 12,871 nurses who did not report whether they were seeking a nursing position, and 11,576 who did not report about any employment outside of nursing, and 5,045 who were both seeking a nursing position and had other occupation.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 36. Age distribution of RNs not employed in nursing, by length of time not working in nursing: March 2004

Age of nurse not employed in nursing	Number in sample	Total Estimated Number*	Length of time not working in nursing								16 years or more
			Less than 1 year	1-5 years	6-10 years	11-15 years	Percent	Number	Percent	Number	Percent
Total	5,402	488,006	66,114	137,892	95,398	77,051	100.0	33,224	100.0	100.0	
Age group											
Less than 25											
25-29	21	2,186	490	108	0	0	0.0	0	0.0	0	0.0
30-34	136	11,983	4,416	4,105	187	0	0.2	0	0.0	0	0.0
35-39	259	22,130	4,506	9,014	3,288	0	3.5	54	0.0	54	0.2
40-44	366	32,557	5,420	11,284	7,274	3,091	7.6	395	4.0	395	1.2
45-49	515	47,999	5,613	11,830	9,374	10,144	9.8	0	13.2	0	0.0
50-54	689	58,910	6,993	13,526	12,044	12,375	12.6	3,784	16.1	3,784	11.4
55-59	656	56,817	6,365	15,000	8,819	12,747	9.2	6,133	16.5	6,133	18.5
60-64	738	66,814	10,450	19,521	12,843	8,565	13.5	5,960	11.1	5,960	17.9
65 and over	810	74,006	11,580	28,368	13,032	8,008	13.7	6,051	10.4	6,051	18.2
Not known	1,157	109,949	9,795	25,070	28,229	21,979	29.6	10,436	28.5	10,436	31.4
	55	4,655	479	64	308	142	0.3	411	0.7	411	1.2

* Includes an estimated 9,537 nurses whose length of time not working in nursing was not known
 NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 37. Registered nurses not employed in nursing
actively seeking employment in nursing, by type of employment
sought and number of weeks looking: March 2004**

Type of employment sought and weeks looking	Number in sample	Estimated Number*	Percent
Total	378	30,278	100.0
Type of employment			
Full-time	103	7,868	26.0
Part-time	190	15,918	52.6
Either	73	5,494	18.1
Not known	12	998	3.3
Number of weeks looking			
Less than a week	85	7,372	24.3
1-4 weeks	109	8,296	27.4
5-9 weeks	49	3,859	12.7
10-14 weeks	31	2,394	7.9
15-34 weeks	45	3,538	11.7
35 weeks or more	42	3,220	10.6
Not known	17	1,598	5.3

*Of the 190,157 nurses seeking new positions in nursing, only the characteristics of nurses who were not currently employed in nursing at the time of the survey are shown in this table.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 38. Type of employment of registered nurses in non-nursing occupations: March 2004

Type of non-nursing employment	Number in sample*	Estimated Number**	Percent
Total	1,321	120,512	100.0
Health related occupation	672	63,052	52.3
Full-time	480	44,534	37.0
Part-time	189	18,268	15.2
Not known	3	250	0.2
Not health related occupation	599	52,946	43.9
Full-time	276	24,104	20.0
Part-time	319	28,487	23.6
Not known	4	355	0.3
Unknown if health related	50	4,513	3.7

*The number in sample excludes nurses who are employed in nursing but have other employment outside of nursing

**Includes an estimated 5,045 nurses employed in a non-nursing field but were actively seeking nursing employment

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 39. Detailed type of employment of registered nurses in non-nursing occupations: March 2004

Type of non-nursing employment	Number in sample*	Total		Type of position outside of nursing			
		Number**	Percent	Health related	Not health related	Number	Percent
Total	1,321	120,512	100.0	63,052	100.0	52,946	100.0
Accounting/bookkeeping/Computr svcs	55	4,796	4.0	2,179	3.5	2,617	4.9
Administration/Management	244	23,857	19.8	15,896	25.2	7,755	14.6
Administrative/Clerical Support	84	7,207	6.0	3,224	5.1	3,984	7.5
Consultant/legal work	64	6,374	5.3	4,258	6.8	2,116	4.0
Elem&Sec Education	62	5,523	4.6	972	1.5	4,373	8.3
Health-related svc provider	185	15,999	13.3	13,293	21.1	2,706	5.1
Pharmaceutical and Medical Hardware Svcs	83	7,952	6.6	7,800	12.4	153	0.3
Real estate/Financial/Insurance Svcs	58	5,537	4.6	1,388	2.2	4,149	7.8
Retail sales/services	153	12,708	10.5	2,057	3.3	10,443	19.7
Other***	221	20,269	16.8	7,064	11.2	13,011	24.6
Not known	112	10,290	8.5	4,922	7.8	1,639	3.1

*The number in sample excludes nurses who are employed in nursing but have other employment outside of nursing

**Includes an estimated 4,513 nurses who did not report whether the position was health related or not.

***Includes artist/horticulturalist, faculty/instructor, farming/animal husbandry, government, homemaker/childcare, recreation services, religious/musical services, and other non-nursing employment

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 40. Reasons for registered nurses to have occupation other than nursing: March 2004

Reasons for other occupation	Number in sample*	Estimated Number**	Percent
Total	1,321	120,512	100.0
Burnout/stressful work environment	591	54,079	44.9
Career change	859	79,274	65.8
Difficult to find a nursing position	58	4,951	4.1
Disability	65	5,612	4.7
Illness	60	5,955	4.9
Inability to practice on a professional level	118	11,192	9.3
Inadequate staffing	425	40,162	33.3
Lack of advancement opportunities	230	19,862	16.5
Lack of collaboration/communication	274	24,718	20.5
Liability concerns	273	24,609	20.4
Physical demands of job	366	33,833	28.1
Retired	160	13,745	11.4
Salaries too low/better pay elsewhere	434	41,007	34.0
Scheduling/too many hours	550	49,873	41.4
Skills are out-of-date	269	24,827	20.6
Taking care of home and family	380	35,724	29.6
Volunteering in nursing	56	4,153	3.4
Went back to school	134	11,238	9.3
Other**	29	2,279	1.9
Summary of reasons for other occupations			
Personal/family reasons	554	50,510	41.9
Personal career reasons	1,089	99,807	82.8
Workplace reasons	906	82,275	68.3
Retirement reasons	160	13,745	11.4
Other reasons	8	434	0.4

*The number in sample excludes nurses who are employed in nursing but have other employment outside of nursing

**Includes moved/relocated/difficult commute, employment instability/termination, taking time off, and other reasons

NOTE: Estimated numbers and percents may not add up to totals because registered nurses may have answered to more than one reason

Table 41. Marital status and presence of children at home of nurses who were not employed at all and not seeking nursing employment, by age group: March 2004

Marital status and presence of children	Total		Age Group					
	Number*	Percent	Less than 40	40-49	50-59	60 and over	Number	Percent
Total	326,526	100.0	47,299	58,901	67,606	151,365	100.0	100.0
Married	245,110	75.1	41,709	49,283	51,971	101,763	76.9	67.2
Children under 6 only	23,505	7.2	18,773	2,911	917	903	1.4	0.6
Children 6-18 only	46,805	14.3	6,623	29,684	9,333	1,109	13.8	0.7
Children in both age groups	18,851	5.8	11,318	6,789	455	290	0.7	0.2
No children	151,196	46.3	4,803	9,434	40,663	96,130	60.1	63.5
Children unknown	4,753	1.5	192	465	602	3,331	0.9	2.2
Widowed/separated/divorced	60,250	18.5	1,949	6,244	11,273	40,625	16.7	26.8
Children under 6 only	716	0.2	140	51	258	267	0.4	0.2
Children 6-18 only	6,672	2.0	1,096	3,171	1,211	1,194	1.8	0.8
Children in both age groups	440	0.1	344	80	15	0	0.0	0.0
No children	50,381	15.4	369	2,942	9,274	37,637	13.7	24.9
Children unknown	2,042	0.6	0	0	515	1,527	0.8	1.0
Never married	19,191	5.9	3,625	3,087	4,089	8,139	6.0	5.4
Children under 6 only	99	0.0	80	19	0	0	0.0	0.0
Children 6-18 only	385	0.1	67	191	0	127	0.0	0.1
Children in both age groups	139	0.0	139	0	0	0	0.0	0.0
No children	17,523	5.4	3,338	2,718	3,751	7,464	5.5	4.9
Children unknown	1,045	0.3	0	159	338	548	0.5	0.4
Not known	1,974	0.6	15	287	273	838	0.4	0.6

* Total reflects those not employed and not seeking nursing employment. Also includes an estimated 1,355 nurses whose age was not known.
 NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 42. Marital status and presence of others provided care by nurses who were not employed at all and not seeking nursing employment, by age group: March 2004

Marital status and others cared for	Total		Age Group							
	Number*	Percent	Less than 40	40-49	50-59	60 and over	Number	Percent	Number	Percent
Total	326,526	100.0	47,299	58,901	67,606	151,365	100.0	100.0	151,365	100.0
Marital status/presence of adults										
Married	245,110	75.1	41,709	49,283	51,971	101,763	76.9	76.9	101,763	67.2
Adults at home	30,205	9.3	1,335	6,774	10,446	11,651	15.5	15.5	11,651	7.7
No adults at home	210,152	64.4	40,183	42,044	40,923	86,781	60.5	60.5	86,781	57.3
Not known if adults at home	4,753	1.5	192	465	602	3,331	0.9	0.9	3,331	2.2
Widowed/separated/divorced	60,250	18.5	1,949	6,244	11,273	40,625	16.7	16.7	40,625	26.8
Adults at home	7,118	2.2	0	867	1,681	4,571	2.5	2.5	4,571	3.0
No adults at home	51,090	15.6	1,949	5,378	9,077	34,527	13.4	13.4	34,527	22.8
Not known if adults at home	2,042	0.6	0	0	515	1,527	0.8	0.8	1,527	1.0
Never married	19,191	5.9	3,625	3,087	4,089	8,139	6.0	6.0	8,139	5.4
Adults at home	1,983	0.6	309	487	764	423	1.1	1.1	423	0.3
No adults at home	16,163	5.0	3,316	2,441	2,987	7,167	4.4	4.4	7,167	4.7
Not known if adults at home	1,045	0.3	0	159	338	548	0.5	0.5	548	0.4
Marital status/care for others living elsewhere										
Married	245,110	75.1	41,709	49,283	51,971	101,763	76.9	76.9	101,763	67.2
Others living elsewhere	40,629	12.4	2,264	11,046	14,409	12,910	21.3	21.3	12,910	8.5
No others elsewhere	199,728	61.2	39,254	37,772	36,960	85,522	54.7	54.7	85,522	56.5
Unknown if others	4,753	1.5	192	465	602	3,331	0.9	0.9	3,331	2.2
Widowed/separated/divorced	60,250	18.5	1,949	6,244	11,273	40,625	16.7	16.7	40,625	26.8
Other living elsewhere	7,760	2.4	387	812	1,778	4,625	2.6	2.6	4,625	3.1
No other elsewhere	50,448	15.4	1,562	5,432	8,981	34,472	13.3	13.3	34,472	22.8
Unknown if other	2,042	0.6	0	0	515	1,527	0.8	0.8	1,527	1.0
Never married	19,191	5.9	3,625	3,087	4,089	8,139	6.0	6.0	8,139	5.4
Other living elsewhere	1,577	0.5	74	27	630	845	0.9	0.9	845	0.6
No other elsewhere	16,569	5.1	3,551	2,901	3,120	6,745	4.6	4.6	6,745	4.5
Unknown if other	1,045	0.3	0	159	338	548	0.5	0.5	548	0.4
Not known	1,974	0.6	15	287	273	838	0.4	0.4	838	0.6

* Total reflects those not employed and not seeking nursing employment. Also includes an estimated 1,355 nurses whose age was not known.

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 43. Comparison between State of location* of registered nurses as of March 2004 and State of graduation, by type of initial nursing education and number of years since graduation: March 2004

Number of years since graduation from initial nursing education program and State of location	Type of Initial Nursing Education									
	Number in sample	Total		Diploma		Associate degree		Baccalaureate and above		
		Number*	Percent	Number	Percent	Number	Percent	Number	Percent	
Total**	33,508	2,715,206	100.0	672,415	100.0	1,198,792	100.0	834,733	100.0	
Located in same State	20,672	1,812,000	66.7	410,390	61.0	887,181	74.0	508,260	60.9	
Located in different State	12,836	903,206	33.3	262,025	39.0	311,612	26.0	326,473	39.1	
5 years or less	4,798	395,770	100.0	12,941	100.0	228,958	100.0	152,999	100.0	
Located in same State	3,500	306,632	77.5	9,255	71.5	187,935	82.1	108,680	71.0	
Located in different State	1,298	89,137	22.5	3,686	28.5	41,023	17.9	44,319	29.0	
6-10 years	5,158	398,908	100.0	25,737	100.0	234,574	100.0	137,470	100.0	
Located in same State	3,535	292,632	73.4	19,783	76.9	180,471	76.9	91,423	66.5	
Located in different State	1,623	106,277	26.6	5,954	23.1	54,103	23.1	46,047	33.5	
11-15 years	4,016	311,721	100.0	24,756	100.0	191,754	100.0	94,225	100.0	
Located in same State	2,686	224,864	72.1	18,011	72.8	144,725	75.5	61,738	65.5	
Located in different State	1,330	86,857	27.9	6,745	27.2	47,028	24.5	32,487	34.5	
16-25 years	8,653	713,025	100.0	120,519	100.0	348,170	100.0	242,052	100.0	
Located in same State	5,320	473,756	66.4	84,660	70.2	247,733	71.2	139,900	57.8	
Located in different State	3,333	239,268	33.6	35,859	29.8	100,437	28.8	102,152	42.2	
26 years or more	10,756	885,804	100.0	487,128	100.0	188,623	100.0	206,129	100.0	
Located in same State	5,537	506,160	57.1	277,741	57.0	120,928	64.1	104,891	50.9	
Located in different State	5,219	379,645	42.9	209,387	43.0	67,695	35.9	101,239	49.1	

* Excludes an estimated 100,792 nurses who graduated in a foreign country, 3,083 nurses who graduated in a U.S. territory (Guam, U.S. Virgin Islands or Puerto Rico) and an estimated 90,278 nurses for whom the State of graduation is unknown

** State of location is the State in which employed, if employed in nursing, or State of residence if not employed in nursing

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 44. Top countries where nurses received initial nursing education, by employment status: March 2004

Country where received initial nursing education	Number in sample	Total		Employed in nursing		Percent of all employed foreign-educated nurses
		Number	Estimated Percent	Number in sample	Percent	
Total (excluding US Territories)	1,041	100,791	100.0	934	89.2	100.0
Philippines	481	50,605	50.2	451	46,988	52.3
Canada	249	20,345	20.2	214	17,668	19.7
United Kingdom	83	8,444	8.4	72	6,997	7.8
Nigeria	28	2,363	2.3	28	2,363	100.0
Ireland	17	1,518	1.5	13	1,010	66.6
India	13	1,271	1.3	12	1,131	89.0
Hong Kong	12	1,176	1.2	10	997	84.7
Jamaica	8	1,081	1.1	7	922	85.3
Israel	8	1,006	1.0	7	865	86.0
All other countries	142	12,982	12.9	120	10,918	84.1
All US territories	29	3,083	*	24	2,687	*

*Counts from U.S. territories are provided to complement the information for foreign-educated nurses, but are not included in the totals at the top of the columns

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 45. Top States employing foreign-educated nurses: March 2004

State employing foreign-educated nurses	Number in sample	Employed in nursing		Percent of all employed nurses
		Estimated Number	Percent	
Total	934	89,860	100.0	3.7%
California	180	25,717	28.6	12.2%
Florida	75	9,627	10.7	7.3%
New York	61	9,337	10.4	5.4%
Texas	51	6,738	7.5	4.6%
New Jersey	47	6,160	6.9	8.4%
Illinois	37	5,060	5.6	4.4%
All other states	483	27,221	30.3	1.7%

NOTE: Estimated numbers may not equal total and percents may not add to 100 because of rounding

**Table 46. Employment setting of foreign-educated nurses,
by position of employment: March 2004**

Employment setting of foreign- educated nurses	Total Employed foreign- educated nurses		Staff nurse		All other positions	
	Number	Percent	Number	Percent	Number	Percent
Total	89,860	100.0	65,254	100.0	22,993	100.0
Hospital	58,116	64.7	47,683	73.1	9,923	43.2
Nursing home/extended care facility	9,962	11.1	6,816	10.4	3,062	13.3
Nursing education	2,811	3.1	1,817	2.8	968	4.2
Community/public health setting	4,550	5.1	1,037	1.6	3,513	15.3
School Health Service	621	0.7	568	0.9	53	0.2
Occupational Health	634	0.7	543	0.8	92	0.4
Ambulatory care setting	4,130	4.6	1,968	3.0	2,149	9.3
Insurance claims/benefits	745	0.8	34	0.1	711	3.1
Policy/planning/reg/lic agency	73	0.1	58	0.1	16	0.1
Other	4,003	4.5	1,639	2.5	1,546	6.7
Not known	4,212	4.7	3,093	4.7	961	4.2

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 47. Comparison between resident States in 2003 and 2004 for the registered nurse population, by age group: March 2004

Age group	Number in sample	Total Estimated		Resident State same in 2003 and 2004		Resident State different in 2004 than 2003**	
		Number*	Percent	Number	Percent	Number	Percent
Total	35,635	2,909,357	100.0	2,596,578	100.0	76,004	100.0
Less than 25 years	609	61,778	2.1	52,581	2.0	6,100	8.0
25-29 years	2,117	171,659	5.9	151,412	5.8	10,889	14.3
30-34 years	3,053	243,182	8.4	219,063	8.4	11,175	14.7
35-39 years	3,646	289,525	10.0	263,713	10.2	8,428	11.1
40-44 years	4,996	408,248	14.0	372,093	14.3	7,466	9.8
45-49 years	6,407	508,708	17.5	459,095	17.7	8,771	11.5
50-54 years	5,816	463,565	15.9	418,020	16.1	9,404	12.4
55-59 years	4,099	338,078	11.6	303,334	11.7	7,052	9.3
60-64 years	2,477	210,196	7.2	185,969	7.2	4,032	5.3
65 years and over	2,085	185,254	6.4	163,747	6.3	2,505	3.3
Not known	330	29,165	1.0	7,552	0.3	182	0.2

* Includes an estimated 236,775 cases where 2003 vs. 2004 comparison could not be made

** Residence in 2003 may be in a different State, as well as having been in a foreign country or US territory

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 48. Comparison of employment status of registered nurse population
in 2003 and 2004: March 2004**

Employment status in 2004	Employed full-time			Employed part-time			Employment status in 2003*			Not employed in nursing		
	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent
Total	20,158	1,601,748	100.0	8,888	712,770	100.0	814	63,417	100.0	5,225	480,831	100.0
Employed full-time	18,289	1,455,968	90.9	1,206	93,948	13.2	569	44,892	70.8	801	70,712	14.7
Employed part-time	1,164	88,803	5.5	7,014	564,881	79.3	198	14,895	23.5	492	41,410	8.6
Employed but FT/PT unknown	7	768	0.0	7	466	0.1	12	1,180	1.9	9	832	0.2
Not employed in nursing	698	56,210	3.5	661	53,475	7.5	35	2,450	3.9	3,923	367,877	76.5

*Excludes an estimated 56,521 nurses whose employment status was not known in 2003

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 49. Percent distribution of registered nurses in each employment setting in 2004, by employment setting in 2003: March 2004

Employment setting in 2004	Number in sample	Total		Employment setting in 2003						New graduate	Not employed
		Number*	Percent	Hospital	Nursing home/ ext. care	Nursing education	Public or community health**	Ambul. care	Other		
Total	35,635	2,909,357	100.0	44.2	5.1	2.0	11.7	8.9	4.5	2.1	15.4
Hospital	16,805	1,360,847	100.0	88.8	0.7	0.2	0.9	0.9	0.4	3.5	2.9
Nursing home/extended care	1,997	153,172	100.0	4.4	81.2	0.3	2.7	1.3	1.3	2.3	4.5
Nursing education	826	63,444	100.0	5.6	1.1	80.0	1.7	1.5	0.9	0.8	5.0
Public or community health**	4,543	360,379	100.0	4.5	1.3	0.1	83.0	1.6	1.1	0.4	4.0
Ambulatory care	3,569	277,774	100.0	6.9	0.7	0.1	2.1	82.2	0.6	1.1	2.9
Other	1,906	155,683	100.0	6.5	1.6	0.2	4.2	1.8	72.8	0.7	6.0
Not employed	5,402	488,006	100.0	4.4	1.1	0.4	2.3	1.6	0.9	0.5	75.0

* Includes an estimated 50,052 nurses whose employment setting was unknown for 2004 and 150,090 for whom it was unknown for 2003

** Includes student and occupational health

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 50. Percent distribution of the registered nurse population in each geographic area who changed employer or position between March 2003 and 2004, by principal reason for change

Reason for employment change	Total United States*	Geographic Area								
		New England	Middle Atlantic	South Atlantic	East South Central	West South Central	East North Central	West North Central	Pacific	
Estimated RNs who changed employer or position	467,565	27,744	63,241	93,711	32,270	49,884	72,931	37,850	32,692	57,243
Percent distribution of employment change across geographic areas	100.0%	5.9%	13.5%	20.0%	6.9%	10.7%	15.6%	8.1%	7.0%	12.2%
Detailed reason(s) for employment change										
Percent reporting any of the following:										
Burnout/stressful environment	46.0	44.5	46.7	44.4	47.1	46.4	46.8	46.2	46.1	46.2
Career advancement/promotion	30.4	30.7	28.3	29.2	29.8	30.3	34.2	30.0	31.6	29.5
Disability	2.9	3.2	1.6	2.8	3.2	2.3	3.4	2.5	2.8	4.3
Illness	4.1	3.9	2.8	4.4	4.0	5.3	5.1	3.4	3.8	3.7
Interested in other position/job	51.4	50.6	48.8	51.1	53.9	48.5	51.8	56.4	53.7	50.9
Lack of collaboration/communication	30.1	31.4	31.1	28.7	30.5	29.8	31.0	31.1	31.7	27.9
Laid off/downsizing of staff	9.3	7.7	14.0	7.1	5.0	10.4	9.5	10.9	9.2	8.5
Opp'y to do kind of nursing I like	33.2	33.7	32.5	31.0	34.0	29.9	34.5	34.8	32.1	37.9
Pay/benefits better	34.7	34.5	33.4	31.0	36.2	37.9	36.1	31.7	38.0	36.9
Reorganization that shifted positions	10.3	11.6	15.2	8.9	8.0	9.5	10.1	10.8	8.8	9.5
Relocated to different area	17.8	13.4	12.9	20.1	14.6	18.7	14.7	13.9	24.6	25.2
Retired	3.9	3.8	3.4	3.7	2.8	4.9	4.2	3.7	2.6	5.4
Scheduling/inconvenient hours	29.6	28.6	30.6	27.5	33.7	31.0	33.4	29.5	29.5	24.5
Sign-on bonus offered	5.9	4.5	3.7	5.7	2.6	8.1	6.5	3.0	8.8	8.8
Other	1.1	1.0	0.4	0.8	1.2	1.5	0.8	1.8	1.1	1.4
Summary of reasons for employment change										
Percent reporting any of the following:										
Personal/family reasons	24.0	20.9	17.3	27.0	20.2	25.1	22.7	18.1	30.3	31.3
Personal career reasons	57.4	56.5	54.4	57.9	59.0	53.9	58.6	61.9	59.3	57.0
Workplace reasons	82.7	81.9	86.3	78.6	84.0	81.8	85.1	81.7	84.4	82.4
Retirement reasons	3.9	3.8	3.4	3.7	2.8	4.9	4.2	3.7	2.6	5.4
Other reasons	1.1	1.0	0.4	0.8	1.2	1.5	0.8	1.8	1.1	1.4

* Includes an estimated 6,082 nurses whose reasons for employment change were not known

NOTE: Estimated numbers and percents may not add up to totals because registered nurses may have answered to more than one reason

**Table 51. Registered nurse population in each State and geographic area
by activity status: March 2004**

State and geographic area	Number in sample	Total		Employed in nursing		Not employed in nursing		Employed nurses per 100000*
		Estimated Number	Number	Percent	Number	Percent		
United States	35,635	2,909,357	2,421,351	83.2	488,006	16.8	825	
New England	3,492	189,494	157,676	83.2	31,818	16.8	1,107	
Connecticut	597	42,894	32,718	76.3	10,175	23.7	934	
Maine	540	17,785	15,077	84.8	2,708	15.2	1,145	
Massachusetts	937	89,358	75,398	84.4	13,960	15.6	1,175	
New Hampshire	464	18,473	16,670	90.2	1,803	9.8	1,283	
Rhode Island	521	13,847	11,368	82.1	2,479	17.9	1,052	
Vermont	433	7,137	6,444	90.3	693	9.7	1,037	
Middle Atlantic	3,405	472,167	374,201	79.3	97,966	20.7	928	
New Jersey	685	92,425	72,980	79.0	19,445	21.0	839	
New York	1,418	215,309	174,208	80.9	41,101	19.1	906	
Pennsylvania	1,302	164,433	127,013	77.2	37,420	22.8	1,024	
South Atlantic	6,149	541,752	446,850	82.5	94,902	17.5	810	
Delaware	522	9,352	8,633	92.3	718	7.7	1,040	
District of Columbia	365	12,118	11,583	95.6	535	4.4	2,093	
Florida	1,368	169,460	132,758	78.3	36,702	21.7	763	
Georgia	700	78,898	66,512	84.3	12,386	15.7	753	
Maryland	728	53,061	47,124	88.8	5,937	11.2	848	
North Carolina	771	92,391	76,761	83.1	15,630	16.9	899	
South Carolina	606	35,204	30,711	87.2	4,493	12.8	732	
Virginia	719	73,526	56,726	77.2	16,800	22.8	760	
West Virginia	370	17,742	16,042	90.4	1,700	9.6	884	
East South Central	2,210	175,434	152,517	86.9	22,917	13.1	873	
Alabama	542	42,894	36,538	85.2	6,356	14.8	807	
Kentucky	529	42,971	37,631	87.6	5,340	12.4	908	
Mississippi	549	27,303	24,009	87.9	3,294	12.1	827	
Tennessee	590	62,266	54,338	87.3	7,927	12.7	921	
West South Central	2,897	260,903	225,252	86.3	35,651	13.7	677	
Arkansas	578	23,818	20,115	84.5	3,703	15.5	731	
Louisiana	477	39,449	35,369	89.7	4,080	10.3	783	
Oklahoma	570	29,268	24,433	83.5	4,835	16.5	693	
Texas	1,272	168,368	145,336	86.3	23,032	13.7	646	

**Table 51. (cont.) Registered nurse population in each State and geographic area
by activity status: March 2004**

State and geographic area	Number in sample	Total		Employed in nursing		Not employed in nursing		Employed nurses per 100000*
		Estimated Number	Number	Percent	Number	Percent		
East North Central	4,226	501,293	417,855	83.4	83,438	16.6	908	
Illinois	1,034	138,092	113,779	82.4	24,313	17.6	895	
Indiana	615	64,396	54,624	84.8	9,772	15.2	876	
Michigan	856	103,697	84,967	81.9	18,730	18.1	840	
Ohio	1,106	133,064	112,806	84.8	20,258	15.2	984	
Wisconsin	615	62,044	51,679	83.3	10,365	16.7	938	
West North Central	4,533	232,648	202,106	86.9	30,542	13.1	1,026	
Iowa	691	37,777	32,664	86.5	5,113	13.5	1,106	
Kansas	687	29,892	24,869	83.2	5,023	16.8	909	
Minnesota	813	60,214	51,914	86.2	8,300	13.8	1,018	
Missouri	683	66,551	57,365	86.2	9,186	13.8	997	
Nebraska	548	20,026	18,532	92.5	1,493	7.5	1,061	
North Dakota	584	7,966	7,484	94.0	482	6.0	1,180	
South Dakota	527	10,223	9,278	90.8	945	9.2	1,204	
Mountain	4,648	166,388	137,980	82.9	28,408	17.1	697	
Arizona	583	48,284	39,136	81.1	9,148	18.9	681	
Colorado	709	43,719	34,654	79.3	9,065	20.7	753	
Idaho	561	11,068	8,753	79.1	2,315	20.9	628	
Montana	610	9,416	7,914	84.0	1,502	16.0	854	
Nevada	559	16,206	14,095	87.0	2,111	13.0	604	
New Mexico	469	15,027	13,570	90.3	1,457	9.7	713	
Utah	655	18,169	15,778	86.8	2,391	13.2	660	
Wyoming	502	4,498	4,079	90.7	419	9.3	805	
Pacific	4,075	369,278	306,914	83.1	62,365	16.9	645	
Alaska	494	7,567	6,777	89.6	790	10.4	1,034	
California	1,851	255,858	211,531	82.7	44,327	17.3	589	
Hawaii	529	11,146	9,335	83.8	1,811	16.2	739	
Oregon	503	34,946	30,850	88.3	4,096	11.7	858	
Washington	698	59,761	48,421	81.0	11,340	19.0	781	

* Population data were based on July 1, 2004 estimates of resident population of States from Census Bureau Press Release NST-EST2004-01

Table 52. Supply of registered nurses in each State and geographic area according to whether employed in nursing on a full-time or part-time basis: March 2004

State and geographic area	Number in sample	Total employed		Employed full-time		Employed part-time		Estimated full-time equivalent**
		Number*	Percent	Number	Percent	Number	Percent	
United States	30,233	2,421,351	100.0	1,696,807	70.1	720,283	29.7	2,056,949
New England	2,974	157,676	100.0	95,844	60.8	61,592	39.1	126,640
Connecticut	463	32,718	100.0	20,751	63.4	11,894	36.4	26,698
Maine	459	15,077	100.0	10,552	70.0	4,493	29.8	12,799
Massachusetts	794	75,398	100.0	43,384	57.5	31,906	42.3	59,337
New Hampshire	428	16,670	100.0	10,666	64.0	6,005	36.0	13,669
Rhode Island	428	11,368	100.0	6,924	60.9	4,418	38.9	9,133
Vermont	402	6,444	100.0	3,567	55.4	2,877	44.6	5,006
Middle Atlantic	2,704	374,201	100.0	257,523	68.8	115,465	30.9	315,256
New Jersey	541	72,980	100.0	46,542	63.8	26,297	36.0	59,691
New York	1,148	174,208	100.0	123,892	71.1	49,522	28.4	148,653
Pennsylvania	1,015	127,013	100.0	87,089	68.6	39,646	31.2	106,912
South Atlantic	5,183	446,850	100.0	334,833	74.9	111,229	24.9	390,448
Delaware	479	8,633	100.0	5,755	66.7	2,878	33.3	7,194
District of Columbia	345	11,583	100.0	8,804	76.0	2,779	24.0	10,194
Florida	1,073	132,758	100.0	102,542	77.2	29,810	22.5	117,447
Georgia	594	66,512	100.0	51,322	77.2	15,175	22.8	58,910
Maryland	639	47,124	100.0	32,327	68.6	14,796	31.4	39,725
North Carolina	641	76,761	100.0	59,298	77.3	17,463	22.7	68,030
South Carolina	534	30,711	100.0	23,131	75.3	7,579	24.7	26,921
Virginia	545	56,726	100.0	39,447	69.5	16,913	29.8	47,904
West Virginia	333	16,042	100.0	12,207	76.1	3,835	23.9	14,125
East South Central	1,932	152,517	100.0	118,072	77.4	34,235	22.4	135,190
Alabama	464	36,538	100.0	27,094	74.2	9,284	25.4	31,736
Kentucky	466	37,631	100.0	29,239	77.7	8,392	22.3	33,435
Mississippi	482	24,009	100.0	19,575	81.5	4,385	18.3	21,768
Tennessee	520	54,338	100.0	42,165	77.6	12,174	22.4	48,252
West South Central	2,500	225,252	100.0	178,036	79.0	47,115	20.9	201,594
Arkansas	489	20,115	100.0	16,521	82.1	3,594	17.9	18,318
Louisiana	428	35,369	100.0	28,996	82.0	6,373	18.0	32,183
Oklahoma	483	24,433	100.0	18,971	77.6	5,360	21.9	21,651
Texas	1,100	145,336	100.0	113,548	78.1	31,787	21.9	129,442

Table 52. (cont.) Supply of registered nurses in each State and geographic area according to whether employed in nursing on a full-time or part-time basis: March 2004

State and geographic area	Number in sample	Total employed		Employed full-time		Employed part-time		Estimated full-time equivalent**
		Number*	Percent	Number	Percent	Number	Percent	
East North Central	3,521	417,855	100.0	278,038	66.5	139,083	33.3	347,580
Illinois	849	113,779	100.0	77,462	68.1	36,055	31.7	95,490
Indiana	521	54,624	100.0	38,729	70.9	15,895	29.1	46,677
Michigan	699	84,967	100.0	56,640	66.7	27,980	32.9	70,630
Ohio	940	112,806	100.0	74,979	66.5	37,701	33.4	93,830
Wisconsin	512	51,679	100.0	30,228	58.5	21,451	41.5	40,954
West North Central	4,011	202,106	100.0	135,260	66.9	66,768	33.0	168,644
Iowa	598	32,664	100.0	22,237	68.1	10,427	31.9	27,451
Kansas	583	24,869	100.0	17,829	71.7	6,998	28.1	21,328
Minnesota	703	51,914	100.0	28,994	55.9	22,920	44.2	40,454
Missouri	591	57,365	100.0	40,983	71.4	16,381	28.6	49,174
Nebraska	506	18,532	100.0	13,447	72.6	5,086	27.4	15,990
North Dakota	552	7,484	100.0	5,297	70.8	2,187	29.2	6,391
South Dakota	478	9,278	100.0	6,472	69.8	2,769	29.8	7,857
Mountain	3,968	137,980	100.0	101,042	73.2	36,718	26.6	119,401
Arizona	478	39,136	100.0	31,115	79.5	7,841	20.0	35,036
Colorado	570	34,654	100.0	23,882	68.9	10,772	31.1	29,268
Idaho	451	8,753	100.0	6,049	69.1	2,704	30.9	7,401
Montana	512	7,914	100.0	5,126	64.8	2,788	35.2	6,520
Nevada	503	14,095	100.0	11,371	80.7	2,724	19.3	12,733
New Mexico	424	13,570	100.0	10,083	74.3	3,456	25.5	11,811
Utah	573	15,778	100.0	10,333	65.5	5,445	34.5	13,056
Wyoming	457	4,079	100.0	3,083	75.6	988	24.2	3,577
Pacific	3,440	306,914	100.0	198,159	64.6	108,078	35.2	252,198
Alaska	444	6,777	100.0	4,921	72.6	1,836	27.1	5,839
California	1,540	211,531	100.0	139,297	65.9	71,771	33.9	175,183
Hawaii	440	9,335	100.0	6,620	70.9	2,715	29.1	7,978
Oregon	446	30,850	100.0	18,140	58.8	12,638	41.0	24,459
Washington	570	48,421	100.0	29,181	60.3	19,117	39.5	38,740

*Total includes an estimated 4,261 for whom full-time/part-time status is unknown

** Nurses working full-time plus one-half of working part-time. Excludes 4,261 for whom full-time/part-time status is unknown.

Table 53. Registered nurse population, by activity status and geographic location: March 2004

	Total Estimated number*	In metropolitan statistical area		Not in metropolitan statistical area	
		Employed in nursing	Not employed in nursing	Employed in nursing	Not employed in nursing
Total	2,909,357	2,033,439	407,252	376,021	80,307
New England	189,494	135,208	27,613	21,199	4,206
Middle Atlantic	472,167	341,382	88,495	31,258	9,270
South Atlantic	541,752	381,597	79,249	63,413	15,495
East South Central	175,434	107,000	16,287	44,856	6,630
East North Central	260,903	192,727	28,631	31,367	7,020
West South Central	501,293	347,105	69,035	69,270	14,403
West North Central	232,648	141,825	20,112	59,843	10,389
Mountain	166,388	109,116	22,152	28,303	6,210
Pacific	369,278	277,479	55,680	26,512	6,685

* Includes an estimated 12,339 nurses for whom metropolitan/non-metropolitan area status was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 54. Registered nurses employed in nursing in each State and geographic area, by highest nursing or nursing-related educational preparation: March 2004

State and geographic area	Number in sample	Total Estimated Number*	Highest nursing or nursing-related educational preparation									
			Diploma		Associate Degree		Baccalaureate		Masters and doctorate			
			Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
United States	30,233	2,421,351	369,741	15.3	861,949	35.6	841,554	34.8	310,474	12.8		
New England	2,974	157,676	34,280	21.7	41,887	26.6	53,779	34.1	26,014	16.5		
Connecticut	463	32,718	8,183	25.0	8,304	25.4	10,444	31.9	5,498	16.8		
Maine	459	15,077	2,698	17.9	4,822	32.0	5,434	36.0	1,935	12.8		
Massachusetts	794	75,398	16,684	22.1	17,453	23.1	26,536	35.2	13,846	18.4		
New Hampshire	428	16,670	3,754	22.5	5,310	31.9	4,972	29.8	2,487	14.9		
Rhode Island	428	11,368	1,932	17.0	3,678	32.4	4,238	37.3	1,339	11.8		
Vermont	402	6,444	1,030	16.0	2,320	36.0	2,155	33.4	909	14.1		
Middle Atlantic	2,704	374,201	79,381	21.2	107,404	28.7	129,081	34.5	51,787	13.8		
New Jersey	541	72,980	15,662	21.5	19,372	26.5	27,013	37.0	8,966	12.3		
New York	1,148	174,208	28,786	16.5	59,407	34.1	56,781	32.6	25,983	14.9		
Pennsylvania	1,015	127,013	34,933	27.5	28,624	22.5	45,288	35.7	16,838	13.3		
South Atlantic	5,183	446,850	66,077	14.8	166,135	37.2	146,426	32.8	60,328	13.5		
Delaware	479	8,633	1,550	18.0	2,363	27.4	3,360	38.9	1,260	14.6		
District of Columbia	345	11,583	935	8.1	2,442	21.1	4,188	36.2	3,645	31.5		
Florida	1,073	132,758	20,241	15.2	55,437	41.8	38,071	28.7	16,516	12.4		
Georgia	594	66,512	8,442	12.7	24,354	36.6	24,229	36.4	8,101	12.2		
Maryland	639	47,124	7,756	16.5	13,474	28.6	17,193	36.5	7,656	16.2		
North Carolina	641	76,761	9,937	12.9	31,009	40.4	24,286	31.6	10,645	13.9		
South Carolina	534	30,711	4,465	14.5	12,875	41.9	8,916	29.0	3,939	12.8		
Virginia	545	56,726	10,654	18.8	17,085	30.1	21,052	37.1	7,080	12.5		
West Virginia	333	16,042	2,096	13.1	7,096	44.2	5,131	32.0	1,487	9.3		
East South Central	1,932	152,517	13,744	9.0	71,010	46.6	47,229	31.0	17,153	11.2		
Alabama	464	36,538	3,544	9.7	13,955	38.2	12,965	35.5	5,296	14.5		
Kentucky	466	37,631	3,080	8.2	19,628	52.2	11,196	29.8	3,132	8.3		
Mississippi	482	24,009	1,098	4.6	12,830	53.4	6,892	28.7	2,747	11.4		
Tennessee	520	54,338	6,022	11.1	24,597	45.3	16,176	29.8	5,978	11.0		
West South Central	2,500	225,252	26,136	11.6	92,440	41.0	78,449	34.8	24,033	10.7		
Arkansas	489	20,115	3,484	17.3	9,396	46.7	5,341	26.5	1,376	6.8		
Louisiana	428	35,369	3,854	10.9	13,226	37.4	13,154	37.2	4,298	12.2		
Oklahoma	483	24,433	2,259	9.2	11,180	45.8	8,877	36.3	1,760	7.2		
Texas	1,100	145,336	16,538	11.4	58,637	40.3	51,078	35.1	16,599	11.4		

Table 54. (cont.) Registered nurses employed in nursing in each State and geographic area, by highest nursing or nursing-related educational preparation: March 2004

State and geographic area	Number in sample	Total Estimated Number*	Highest nursing or nursing-related educational preparation				Baccalaureate				Masters and doctorate			
			Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
East North Central	3,521	417,855												
Illinois	849	113,779		15.7	65,795	15.7	151,510	36.3	147,887	35.4	47,760	11.4	47,760	11.4
Indiana	521	54,624		15.2	17,289	15.2	39,049	34.3	41,034	36.1	14,990	13.2	14,990	13.2
Michigan	699	84,967		11.9	6,492	11.9	23,656	43.3	18,911	34.6	4,933	9.0	4,933	9.0
Ohio	940	112,806		12.6	10,728	12.6	35,848	42.2	26,904	31.7	10,627	12.5	10,627	12.5
Wisconsin	512	51,679		21.2	23,951	21.2	36,656	32.5	39,068	34.6	11,750	10.4	11,750	10.4
				14.2	7,336	14.2	16,301	31.5	21,971	42.5	5,460	10.6	5,460	10.6
West North Central	4,011	202,106												
Iowa	598	32,664		18.9	38,152	18.9	70,504	34.9	69,666	34.5	21,536	10.7	21,536	10.7
Kansas	583	24,869		25.0	8,175	25.0	14,283	43.7	7,584	23.2	2,406	7.4	2,406	7.4
Minnesota	703	51,914		16.6	4,116	16.6	8,451	34.0	9,251	37.2	2,926	11.8	2,926	11.8
Missouri	591	57,365		13.6	7,077	13.6	18,802	36.2	19,649	37.8	5,766	11.1	5,766	11.1
Nebraska	506	18,532		19.1	10,954	19.1	20,396	35.6	18,236	31.8	7,044	12.3	7,044	12.3
North Dakota	552	7,484		27.4	5,071	27.4	3,640	19.6	7,473	40.3	2,014	10.9	2,014	10.9
South Dakota	478	9,278		19.7	1,476	19.7	1,200	16.0	3,861	51.6	857	11.4	857	11.4
				13.8	1,281	13.8	3,731	40.2	3,614	38.9	521	5.6	521	5.6
Mountain	3,968	137,980												
Arizona	478	39,136		11.5	15,924	11.5	51,991	37.7	51,706	37.5	16,344	11.8	16,344	11.8
Colorado	570	34,654		13.3	5,213	13.3	16,227	41.5	12,564	32.1	4,321	11.0	4,321	11.0
Idaho	451	8,753		13.5	4,675	13.5	8,910	25.7	15,634	45.1	4,946	14.3	4,946	14.3
Montana	512	7,914		6.4	563	6.4	3,953	45.2	3,277	37.4	871	9.9	871	9.9
Nevada	503	14,095		14.5	1,146	14.5	2,345	29.6	3,543	44.8	810	10.2	810	10.2
New Mexico	424	13,570		11.4	1,603	11.4	5,782	41.0	5,534	39.3	1,033	7.3	1,033	7.3
Utah	573	15,778		10.5	1,426	10.5	5,227	38.5	4,604	33.9	2,105	15.5	2,105	15.5
Wyoming	457	4,079		5.4	846	5.4	7,486	47.4	5,476	34.7	1,808	11.5	1,808	11.5
				11.1	451	11.1	2,061	50.5	1,074	26.3	449	11.0	449	11.0
Pacific	3,440	306,914												
Alaska	444	6,777		9.9	30,253	9.9	109,067	35.5	117,329	38.2	45,520	14.8	45,520	14.8
California	1,540	211,531		15.4	1,045	15.4	1,670	24.6	2,627	38.8	1,379	20.3	1,379	20.3
Hawaii	440	9,335		9.7	20,564	9.7	74,918	35.4	80,906	38.2	32,178	15.2	32,178	15.2
Oregon	446	30,850		11.1	1,041	11.1	2,372	25.4	4,549	48.7	1,251	13.4	1,251	13.4
Washington	570	48,421		11.0	3,387	11.0	12,637	41.0	9,754	31.6	4,179	13.5	4,179	13.5
				8.7	4,216	8.7	17,470	36.1	19,493	40.3	6,534	13.5	6,534	13.5

* Includes an estimated 37,634 nurses for whom highest nursing education was not known

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

Table 55. Racial/ethnic background distribution (percents) of registered nurses, by geographic area: March 2004

Racial/ethnic background	Total United States	Geographic Area							
		New England	Middle Atlantic	South Atlantic	East South Central	West South Central	East North Central	West North Central	Pacific
Estimated RN population in area	2,909,357	189,494	472,167	541,752	175,434	260,903	501,293	232,648	369,278
Racial/ethnic background									
White (non-hispanic)	81.8	89.3	82.6	79.6	83.9	75.3	86.7	89.7	84.2
Black/African American (non-hispanic)	4.2	1.8	4.2	7.3	6.3	6.4	3.0	2.1	1.2
Asian (non-hispanic)	2.9	1.0	3.3	1.9	0.7	3.0	1.7	0.6	2.6
Native Hawaiian/Pacific Islander (non-hisp)	0.2	0.0	0.2	0.0	0.0	0.2	0.1	0.0	0.2
American Indian/Alaska Native (non-hisp)	0.3	0.1	0.2	0.4	0.2	0.7	0.1	0.4	0.6
Hispanic/Latino (any race)	1.7	0.7	1.1	1.4	0.8	3.5	0.8	0.5	2.7
Two or more races (non-hispanic)	1.4	1.0	0.9	1.3	1.8	2.3	0.9	1.3	1.6
Not known	7.5	6.1	7.5	8.0	6.3	8.6	6.6	5.5	6.9

NOTE: Percents may not add to 100 because of rounding

Table 56. Age distribution (percents) and average age of registered nurses, by geographic area: March 2004

Age group	Total United States	Geographic Area							
		New England	Middle Atlantic	South Atlantic	East South Central	West South Central	East North Central	West North Central	Pacific
Estimated RN population in area	2,909,357	189,494	472,167	541,752	175,434	260,903	501,293	232,648	369,278
Age group									
Less than 25 years	2.1	1.7	1.2	1.9	3.1	2.3	2.5	4.2	1.4
25-29 years	5.9	4.6	3.7	6.0	8.6	7.4	6.6	6.4	5.5
30-34 years	8.4	5.3	6.8	8.7	11.0	10.4	8.8	9.0	7.9
35-39 years	10.0	10.4	10.4	10.4	11.7	9.5	9.9	9.7	8.6
40-44 years	14.0	13.9	14.4	14.0	14.9	13.4	14.9	15.1	12.3
45-49 years	17.5	18.1	17.3	17.0	17.2	18.5	17.7	17.7	17.2
50-54 years	15.9	17.2	15.6	15.4	14.3	16.2	14.8	16.4	17.9
55-59 years	11.6	12.3	11.9	11.7	9.7	11.2	10.7	9.8	13.9
60-64 years	7.2	7.8	8.0	7.4	4.9	6.5	7.0	6.7	7.8
65 years and over	6.4	8.5	8.0	6.4	4.2	4.6	5.8	4.7	7.4
Not known	1.0	0.3	2.7	1.2	0.4	0.1	1.3	0.3	0.2
Average age	46.8	48.3	48.2	46.8	44.3	45.7	46.2	45.5	48.0
Median age	47	49	48	47	45	47	47	46	49

NOTE: Percents may not add to 100 because of rounding

Table 57. Employment setting of principal nursing position for registered nurses in each geographic area: March 2004

Employment setting of principal nursing position	Total United States	New England	Middle Atlantic	South Atlantic	Geographic Area						Mountain	Pacific
					East Central	South Central	West Central	East North Central	West North Central			
Estimated RN population in area	2,421,351	157,676	374,201	446,850	152,571	225,252	417,855	202,106	137,980	306,914		
Hospital	1,362,937	79,382	196,249	257,124	88,696	130,834	235,466	113,348	78,577	181,170		
Nursing home/extended care facility	153,366	15,529	28,162	18,876	8,240	9,817	32,856	17,010	7,486	15,195		
Nursing education	63,833	3,228	9,481	12,059	4,499	9,089	10,707	5,610	2,782	5,990		
Community/public health setting	260,730	19,183	43,857	50,134	16,504	22,451	43,093	19,792	14,709	30,187		
School Health Service	78,539	9,864	18,986	10,524	2,866	9,784	10,148	5,159	3,397	7,294		
Occupational Health	22,569	1,906	3,469	3,897	1,093	2,279	4,551	1,318	981	2,953		
Ambulatory care setting	278,093	15,504	39,218	50,497	18,041	24,948	49,480	25,468	17,969	36,648		
Policy/planning/reg/lic agency	43,641	3,103	7,543	8,992	2,660	3,565	6,004	3,513	3,151	5,109		
Insurance claims/benefits	8,774	236	1,457	3,037	439	112	1,372	618	487	975		
Other	103,310	6,750	17,220	20,168	5,784	7,943	16,571	7,741	6,263	14,871		
Not known	50,073	2,991	8,558	11,541	3,695	4,431	7,607	2,530	2,177	6,522		

NOTE: Estimated numbers may not equal totals, and percents may not add to 100, because of rounding

**Table 58. Average annual earnings from principal nursing position
of registered nurses in full-time staff nurse
positions in each geographical area: March 2004**

Geographic area of employment	Number in sample	Full-time staff nurses	
		Estimated Number*	Annual earnings
Total	11,609	934,653	\$53,086
New England	957	50,924	\$57,451
Middle Atlantic	980	136,903	\$56,960
South Atlantic	2,062	182,283	\$51,137
East South Central	820	64,865	\$46,583
West South Central	1,093	98,025	\$50,521
East North Central	1,253	152,242	\$50,028
West North Central	1,512	76,457	\$46,108
Mountain	1,637	58,537	\$51,938
Pacific	1,295	114,416	\$64,685

*Excludes an estimated 42,612 full-time staff nurses who did not report annual earnings

NOTE: Estimated numbers may not equal totals because of rounding

APPENDIX B

SURVEY METHODOLOGY

APPENDIX B

SURVEY METHODOLOGY

The eighth cycle of the National Sample Survey of Registered Nurses (NSSRN) followed the same basic sample design as its predecessors. The sample design was originally developed by Westat, Inc. under a contract with the Division of Nursing, BHP, HRSA in 1975-76 and can be best described as a systematic sample of alphabetic clusters of names in each State using a 'nested alpha segment design'. Prior to sampling, each State was ranked by the sampling rate such that the highest priority States were those with the highest sampling rate (for the most part, small States). As a result, the alphabetic clusters of names for lower priority States are 'nested', or included, within those of higher priority States. This means that a sample name selected in one State (such as California) will also have been selected in every State with a higher priority (in the case of California, this is all other States).

This design approach takes into account two key characteristics of the sampling frame. First, no single list of all individuals with licenses to practice as registered nurses in the United States exists, although lists of those who have licenses in any one State are available. Second, a nurse may be licensed in more than one State. The advantage of the nested alpha-segment design is that one can determine the probabilities of selection and appropriate multiplicity adjusted weights for those nurses that are listed in more than one State. In addition, the design also permits the use of each

sample registered nurses' data for State estimates of each of her/his States of licensure.

This appendix provides a brief summary of the methodology of the NSSRN including the sampling frame, sample design and the statistical techniques used in summarizing the data. It also includes a discussion of sampling errors, provides the standard errors for key variables in the study and presents a simplified methodology for estimating standard errors.

Sampling Frame

The target population for the eighth NSSRN included all registered nurses with an active license in the United States as of March 2004. A sampling frame was required to select a probability sample of nurses from which valid inferences could be made to the target population. The sampling frame for the eighth NSSRN consisted of all registered nurses who are currently eligible to practice as an RN in the U.S. This sampling frame included RNs who have received a specialty license or have been certified by a State agency as an advanced practiced nurse (APNs) such as nurse practitioner, certified nurse midwives, certified registered nurse anesthetist, or clinical nursing specialist and excluded licensed practical nurses (LPNs)/licensed vocational nurses (LVNs).

State Boards of Nursing in the 50 States and in the District of Columbia (hereafter also referred to as a State) provided files containing the name, address, and license number of every RN currently holding an active license in that State. These files formed the basis of the sampling frame from which the RNs for each State were selected. The licensure files provided by the States were submitted on diskette or compact disk (twenty States), or electronically as an attachment to an e-mail message (twenty-seven States). Three States sent the data via FTP and another provided the data on their website. For this study, States were also asked to identify nurses for whom the State provided advanced practice nurse (APN) status. In some cases, the State identified these nurses on the basic list provided. However, some APNs were identified on separate lists and their APN status was appended to the information on the RN sampling frame.

Each of the 51 State files was checked for consistency, names were standardized, and duplicates and ineligible records were removed from the State list to prepare the list for sampling.

Sample Design

The NSSRN 2004, the eighth in the series, continued to oversample nurses in small States in order to better support HRSA's National Center for Health Workforce Analysis' State level supply and demand projections for registered nurses. The basic design was enhanced by using sample design optimization methodology developed by Chromy¹ to determine the sample allocation to the States that would simultaneously satisfy variance constraints defined by the 51 States and the total U.S.

In the original sample design, and in the 1988 redesign, the universe of RNs was sorted alphabetically by last name and approximately equal-sized clusters of RNs were constructed by partitioning the alphabetically ordered list into 250 alpha-segment clusters with equal (or nearly equal)

numbers of RNs. An alpha-segment was defined as all alphabetically adjacent names falling within pre-specified boundaries. For example, all names beginning with the lower boundary, up to but not including the name that defined the upper boundary.

From the frame of 250 equally divided alpha-segments, a total of 40 alpha-segments were randomly selected, representing a 16 percent sampling rate overall. Registered nurses are selected in the sample based on their name, with an RN being included in the sample if the name of licensure falls into one of the alphabetic segments that are in sample for that State.

Although each State had 40 sample segments, the sample size of each State differed in size depending on the State's sampling rate. While uniform-sampling rates would have produced the best national estimates, the resulting sample sizes for the smallest States would have been inadequate to support State-level estimates. Since both national and State-level estimates are required for the 2004 NSSRN, as was done in prior surveys, sampling rates were increased in the smaller States to obtain larger State-level sample sizes. While this disproportionate sampling improved the precision of estimates in the smaller States, it also reduced precision of national estimates due to unequal weighting effects. .

To accommodate the differing State sampling rates, a planned variation in the size of the segments, i.e., "portions of alpha segments" was used. Each of the 40 alpha-segments selected for sample was divided into $\frac{1}{2}$ -, $\frac{1}{4}$ -, $\frac{1}{8}$ -, $\frac{1}{16}$ -, and $\frac{1}{32}$ - portions. These fractions indicate the size of the alpha segment portion relative to the size of the basic alpha-segment.

The sampling rate for a particular State was achieved using a combination of the alpha-segment portions. As a result, each State contains some sample (i.e., a portion) from each of the 40 alpha-segments, depending on the sampling rate for the State. For example, selecting the entire 40 complete alpha segments on a State list is expected to constitute a 16 percent sampling rate ($40 \div 250 = 0.16$) in the State. This is because each alpha segment contained an expected 0.4% of the State's

¹ Chromy, James R. "Design Optimization with Multiple Objectives". American Statistical Association of the Section on Survey Research Methods, Arlington, VA., pp A4-199

RN names (40×0.4 percent = 16 percent). Likewise, the sample for a State with an 8 percent sampling rate consisted of the 40 $\frac{1}{2}$ portion selections. Several sampling rates use a combination of portions for each alpha-segment in sample (rather than one fractional portion for all alpha-segments). For example, a 5 percent sampling rate was achieved by first randomly dividing the 40 alpha-segments into two groups, the first containing 30 alpha-segments and the other containing 10; and by using the $\frac{1}{4}$ portions from the first group and the $\frac{1}{2}$ portions from the second group (0.4 percent $\times [(30 \times \frac{1}{4}) + (10 \times \frac{1}{2})] = 5$ percent).

To identify and account for nurses appearing in more than one of the 51 State lists, the portions were constructed such that each portion was “nested” (or included) in the boundaries of the larger portion. As a result, the alpha segment clusters from the States with lower sampling rates (typically larger States) were automatically included in the alpha segment clusters selected from the States with higher sampling rates (typically smaller States).

As a result, a RN who was licensed under the same name in two States *with identical sampling rates* was selected (or not selected) for both States, since the alphabetic name boundaries defining the portions are the same for both States. However, if the RN was licensed under the same name in two States that are sampled *with different sampling rates*, then, if the RN was sampled in the State with a lower sampling rate, they were also included in the sample for the State with the higher sampling rate (as the alphabetic name boundaries defining the portions for the State with the lower sampling rate are nested within those of the State with the higher sampling rate). This nesting property of the sample design maximizes the chances that the RN will be selected in all States that they have an active license in. A nurse that is licensed in two or more States under the same name will have a probability of selection corresponding to the State with the highest sampling rate.

Sample design optimization techniques developed by Chromy (1996) were used to determine how to allocate the sample of 54,000 RNs to the 51 State lists. This sample size was then converted to a

sampling rate, and the rate was rounded to one of the admissible rates for the nesting design. For example, the original rate for the State of Washington was 1.59%, the closest admissible rate was 1.5%. Rates were rounded down only such that the change in sampling rate still left their effective sample size at or above the 1996 NSSRN level.

After determination of frame sizes and expected sampling rates, the States were assigned a priority order to properly determine selection probabilities for nurses appearing on more than one of the 51 State lists. Traditionally, States were ordered by size, with larger States having lower sampling rates and smaller States having higher sampling rates. However, as in the 2000 NSSRN, States were priority ordered based on their sampling rate. As such, it is mostly, but not necessarily, the case that States with larger RN populations had lower sampling rates.

Essentially the same procedure was followed for sample selection for all States. Once a State provided a licensure file containing all appropriate names of individuals with active RN licenses and meeting all specifications, the required sample names in that file were selected. Regardless of the way a State alphabetized and standardized the names in its files, the sample names were selected according to the standards established by the survey design. That is, sample selections ignored blanks and punctuation in the last names (except a dash in hyphenated names) and ignored titles (e.g., “Sister”).

Registered nurses were selected in the sample on the basis of name, with an RN being included in the sample if the name of licensure fell within a specific alpha-segment portion as defined by the State sampling rate. In other words, the sample for a given State consisted of all RN names falling into any one of the State’s pre-designated 40 alphabetic portions that corresponded to the State sampling rate (one portion from each of the complete 40 alpha-segments in sample).

The pairs of names that defined the alpha-segment portion constituted the lower and upper boundaries corresponding to the sampling rate. Thus, the membership of the alpha-segment portion was

defined by all names, beginning with the lower boundary (i.e., the last name in alphabetical order of all the names included in that segment), *up to but not including* a name that defined the upper boundary. This latter name fell into the next alpha-segment. As was done in the NSSRN 2000, any deviations of more than 8 percent were candidates for either an increased or decreased rate.

Because the survey is longitudinal in nature, a panel structure was constructed to allow for several of the sample alpha-segments to be systematically replaced each survey. Under the original survey design, the 40 sample alpha-segments were arranged in alphabetical order and then partitioned into eight groups of five successive alpha-segments each. One segment from each group was randomly assigned to each panel, so that each panel consisted of segments that spanned the entire alphabet. For each successive survey, a new panel (consisting of eight new alpha-segments or 20 percent of the sample) was entered into the sample, replacing one of the five panels from the previous survey. Under this scheme, a nurse who maintained an active license in the same State(s) could be retained in the sample for up to five surveys.

The planned NSSRN 2004 sample size was 54,000 cases, similar to that of the NSSRN 2000, and up from the 45,000 used in previous studies. Planned sampling rates ranged from 1.125 percent in several of the largest States to 15 percent in Wyoming. This translated into planned sample sizes ranging from 3,225 RNs in California to approximately 796 in Wyoming. The initial round of sampling, however, yielded a much smaller sample than expected due to the variable size of the alpha-segments in each State. Thus, a second round of sampling was done by increasing the sampling rates from 1 to 1.125 in the eleven largest States and “adding to” the sample selected in the first round, yielding a total of 56,917 sample cases. After eliminating cross-State duplications, the expected sample size to be fielded was still approximately 54,000 cases.

Table B-1 in Appendix B shows the sampling rates and sample sizes that were planned and actually obtained for the 51 States in the survey. Differences between planned and actual sampling rates result from State-specific variation in the

distribution of nurses’ names. States are priority ordered by sampling rate and size.

Because many nurses are licensed in more than one State, their names could be selected in the sample more than once. In accordance with the sample design, we ensured that each sampled RN was retained in the outgoing sample file exactly once to avoid multiple questionnaires being sent to nurses. If we identified an exact duplicate, the nurse in the lower priority State was coded as a duplicate of the sample member in the higher priority State. For example, an Alaska record was coded as a duplicate to the sample record in Wyoming. Following data collection, these expected duplicates were reviewed to ensure that the nurse reported a license in both of the States.

Table B-1. State Sampling Rates and Sample Sizes (Priority Ordered)

State	Priority Order	Frame Size	Sampling Rate Percentage		Actual Sample Size
			Planned	Actual ²	
TOTAL		3,252,548			56,917
Wyoming	1	5,309	15.00%	15.60%	828
Alaska	2	7,389	13.00%	11.88%	878
Vermont	3	8,728	10.00%	9.53%	832
District of Columbia	4	17,104	10.00%	9.71%	1,661
North Dakota	5	8,139	9.00%	9.74%	793
Delaware	6	10,407	9.00%	8.87%	923
Montana	7	10,885	8.00%	8.15%	887
South Dakota	8	10,773	7.00%	6.88%	741
Idaho	9	12,769	7.00%	6.75%	862
Hawaii	10	13,548	7.00%	7.44%	1,008
Nevada	11	19,201	7.00%	6.25%	1,200
Rhode Island	12	17,203	5.50%	5.37%	923
New Mexico	13	17,544	5.00%	4.98%	874
New Hampshire	14	19,108	5.00%	4.71%	900
Utah	15	19,210	4.50%	4.97%	954
Maine	16	19,869	4.50%	4.50%	894
Nebraska	17	20,100	3.50%	3.56%	716
Arkansas	18	27,878	3.50%	3.52%	982
West Virginia	19	21,295	3.50%	3.13%	667
Mississippi	20	31,734	3.00%	3.13%	994
Oklahoma	21	32,185	3.00%	2.93%	944
Kansas	22	34,047	3.00%	3.10%	1,057
Iowa	23	40,312	2.50%	2.31%	933
South Carolina	24	38,265	2.50%	2.47%	944
Oregon	25	38,453	2.00%	1.95%	750
Louisiana	26	43,299	2.00%	1.75%	757
Colorado	27	48,586	2.00%	2.14%	1,042
Connecticut	28	52,364	2.00%	1.96%	1,025
Alabama	29	46,974	1.75%	1.81%	852
Kentucky	30	47,123	1.75%	1.77%	832
Arizona	31	51,482	1.75%	1.72%	887
Maryland	32	56,922	1.50%	1.47%	835
Washington	33	66,397	1.50%	1.44%	954
Minnesota	34	66,434	1.50%	1.59%	1,056
Wisconsin	35	63,865	1.25%	1.24%	793
Tennessee	36	65,827	1.25%	1.29%	849
Indiana	37	70,488	1.25%	1.23%	867
Missouri	38	74,508	1.25%	1.28%	953
Georgia	39	86,369	1.25%	1.26%	1,086
Virginia	40	85,705	1.25%	1.21%	1,036
North Carolina	41	96,877	1.125%	1.146%	1,110
Massachusetts	42	105,206	1.125%	1.350%	1,420
New Jersey	43	109,726	1.125%	1.067%	1,171

² Since the actual distribution of names differs for each State from the frame distribution used to develop the 250 alpha-segments, some variation occurs between the planned and actual sampling rates.

THE REGISTERED NURSE POPULATION

Sampling Rate Percentage					
State	Priority Order	Frame Size	Planned	Actual ²	Actual Sample Size
Michigan	44	117,360	1.125%	1.161%	1,363
Ohio	45	140,689	1.125%	1.124%	1,581
Illinois	46	154,572	1.125%	1.124%	1,738
Texas	47	176,652	1.125%	1.066%	1,883
Pennsylvania	48	191,628	1.125%	1.037%	1,988
Florida	49	201,113	1.125%	1.086%	2,184
New York	50	244,288	1.125%	1.061%	2,592
California	51	286,639	1.125%	1.018%	2,918

Weighting Procedures

The probability sample design of the survey permits the computation of unbiased estimates of characteristics of the RN population at the National and State level. These estimates are based on weights that reflect the complex design and compensate for the potential risk of nonresponse bias to the extent feasible. The weights that are assigned to each sample nurse may be interpreted as the number of nurses in the target population that the sample nurse represents. The sampling weight for an RN is the reciprocal of the nurse's probability of selection in her/his priority State, adjusted to account for nonresponse and multiple licenses.

Before computing the weights, the original State frame sizes (shown above) were adjusted to account for duplicate licenses within States and ineligible licenses (i.e., frame errors) found in the sample. Most within-State duplicates were identified at the time of initial list processing, but a few were identified after sample selection. The ineligible licenses were identified in the process of reconciling the State and nurse reported licenses. Some of the inconsistencies between the State reported data and the nurse reported data are due to the time period that elapsed between frame construction and data collection (a period during which changes and license expirations naturally occur). Other differences are due to errors in either the State list or the nurse's questionnaire. Cases that could not be reconciled by Gallup were sent to the State Boards of Nursing for resolution.

In both cases, the frame total is computed by subtracting the estimated number of ineligible and duplicate licenses from the State's original frame count. The adjusted frame total used to compute the resulting weights for State i can be computed as:

$$N'_i = N_i - \hat{D}_i - \hat{E}_i$$

where:

N_i = the total number of licenses on State i list,

\hat{D}_i = the estimated number of within-State duplicates in State i , and

\hat{E}_i = the estimated number of frame errors in State i (e.g., licenses listed by State that were not reported by a responding nurse).

Each responding nurse was assigned a weight corresponding to their unique 'priority State'; that is, *the State with the highest sampling rate from which he or she was licensed and selected into the sample*. In other words, the weight is reflective of the probability of selecting the sampled nurse in their "priority" State. All nurses with the same priority State have an equal probability of being selected and, consequently, have equal initial sampling weights. The sum of the weights for all nurse respondents assigned to a specific priority State will equal, approximately, the total number of active licenses on the list (at the time the sample was drawn) less the number of those licenses assigned to higher priority lists.

The weights were computed sequentially for each State A, B, etc., where A was the highest-priority State, and B the next-highest-priority State. The weight for an RN sampled from the highest priority State, State A, was the ratio of the adjusted count of licenses in the sampling frame for State A to the number of eligible respondents licensed in State A. For State B, and the remaining States, the numerator and denominator of this ratio were adjusted to account for State A and other higher-priority States. To describe the basic method, the following terms are defined:

$N_{(i)}$ = total number of licenses for State i (adjusted for within-State duplicates and frame errors)

$m_{(i)}$ = number of eligible respondents for State i that did not have a license in a higher-priority State

$n_{(i,j)}$ = number of eligible respondents with a license in both State i and State j [note $n_{(i,i)}$ denotes the number of eligible respondents with a license only in State i]

$W(i)$ = the adjusted weight for eligible respondents who were assigned to the higher priority State i

The weight for State A was computed as follows:

$$W(A) = N(A) / m(A).$$

For the State B weight, $W(B)$, the numerator was the adjusted frame count of licenses for State B, $N(B)$, after removing the estimated total count of State B nurses who were also licensed in State A (i.e., $W(A) n(A,B)$). Similarly, the numerator of $W(C)$ excluded State C nurses who were also licensed in either State A or State B (i.e., $W(A) n(A,C) + W(B) n(B,C)$). That is, for the State B weight and the State C weight, the computations were:

$$\begin{aligned} W(B) &= [N(B) - W(A) n(A,B)] / m(B) \\ W(C) &= [N(C) - W(A) n(A,C) - W(B) n(B,C)] / m(C). \end{aligned}$$

In either case, the denominator was the number ($m(B)$ or $m(C)$) of respondents in the State not licensed in a higher-priority State.

In general, the numerator of a State I weight, $W(I)$, was the total adjusted frame count of RN licenses in State I after removing the estimated total count of State I nurses also licensed in higher-priority States. The denominator, $m(I)$, was the number of State I respondents not licensed in a higher-priority State. This weighting scheme incorporated both a nonresponse adjustment that inflated the respondents' data to account for those that did not respond to the survey and a duplication adjustment to account for duplication in the sampling frame across States. These final analysis weights will serve to differentially weight responding nurses to reflect the level of disproportionality in the final respondent sample relative to the population.

Estimation Procedure

Final NSSRN estimates can be computed using the final set of sampling weights, W_k (for sample nurse k). For example, an estimate of the total number of RNs working in a particular State is based on the following indicator variable, X_k :

X_k = 1 if nurse k worked in a particular State,
= 0 otherwise.

The desired estimated total may then be written as

$$\hat{X} = \sum_k W_k X_k.$$

the sum being over all sample nurses.

Estimates of ratios and averages are obtained as the ratio of estimated totals.

Sampling and Nonsampling Errors

To the extent that samples are sufficiently large, relatively precise estimates of characteristics of the licensed RN population of the United States can be made because of the underlying probability structure of the sample data. Such estimates are, sometimes, an imperfect approximation of the truth. Several sources of error could cause sample estimates to differ from the corresponding true population value. These sources of error are commonly classified into two major categories: sampling errors and nonsampling errors.

A probability sample such as the one used in this study is designed so that estimates of the magnitude of the sampling error can be computed from the sample data. In addition, nonsystematic components of nonsampling error are also reflected in the sampling error estimates.

Nonsampling Errors

Some sources of error, such as unusable responses to vague or sensitive questions; no responses from some nurses; and errors in coding, scoring, and processing the data are, to a considerable extent, beyond the control of the sampling statistician. They are called "nonsampling errors" and also occur in cases where there is a complete enumeration of a target population, such as the U.S. Census. Among the activities that were directed at reducing nonsampling errors to the lowest level feasible for this survey included careful planning, keeping nonresponses to the lowest feasible level, and coding and processing of the sample data.

If nonsampling errors are random, in the sense that they are independent and tend to be compensating from one respondent to another, then they do not cause bias in estimates of totals, percents, or averages. Furthermore, the contribution from such nonsampling errors will automatically be included in the sampling errors that are estimated from the sample data. However, correlations or relationships in cross-tabulations are often decreased by such errors, and sometimes substantially. Thus, random errors that tend to be compensated for in estimates of simple aggregates or averages may (but not necessarily will) introduce systematic errors or biases in measures of relationships or cross-tabulations.

Nonsampling errors that are systematic (rather than random and compensating) are a source of bias for sample estimates. Such errors are not reduced by increasing the size of the sample, and the sample data do not provide an assessment of the magnitude of these errors. Systematic errors are reduced in this study by such efforts as careful wording of questionnaire items, respondent motivation, and well-designed data-collection and data-management procedures. However, such errors sometimes occur in subtle ways and are less subject to design control than is the case for sampling errors.

Nonresponse to the survey is one of the largest sources of nonsampling error because a characteristic being estimated may differ, on average, between respondents and nonrespondents. For this reason, considerable effort has been expended in this survey to obtain a high response rate by respondent motivation and follow-up procedures. A high response rate reduces both random and systematic nonsampling errors. After taking into account duplicates and frame errors, the overall response rate to this survey was 70.47 percent. State-level response rates ranged from 61.98 percent to 81.57 percent except for the District of Columbia where the response rate (46.12 percent) was significantly lower.

Sampling Errors

All sample survey estimates are subject to sampling error. The magnitude of the sampling error for an estimate, as indicated by measures of

variability such as its variance or its standard error (the square root of its variance), provides a basis for judging the precision of the sample estimates.

Systematic sampling, which was the selection procedure used in choosing the alpha-segments for this study, is convenient from certain practical points of view, including providing for panel rotation. However, it does not permit unbiased estimation of the variability of survey estimates unless some assumptions are made. Thus, standard errors were estimated based upon the assumption that the systematic sample of 40 alpha-segments is equivalent to a stratified random sample of two alpha-segments from each of 20 strata of adjacent alpha-segments. Ordinarily, this assumption should lead to overestimates of the sampling error for systematic sampling, but in this case (with alpha-segments as the sampling units) the magnitude of the overestimate is believed to be trivial.

Regarding the sample as consisting of 20 pairs of alpha-segments (thus obtaining 20 degrees of freedom) for variance estimation, the probability is approximately 0.95 that the statistic of interest differs from the value of the population characteristic that it estimates by not more than 2.086 standard deviations.

Specifically, a 95 percent confidence interval for an estimated statistic \hat{x} takes the form:

$$\hat{x} \pm 2.086 \hat{\sigma}_{\hat{x}},$$

where $\hat{\sigma}_{\hat{x}}$ is the estimated standard error for \hat{x} .

Direct Variance Estimation

Similar to prior cycles of the NSSRN, direct estimates of sampling variance were obtained for a set of important variables for each State and for the United States using the jackknife variance estimation procedure with 20 replicates of the sample. Variance estimates using the jackknife approach require the computation of a set of weights for the full sample and a set for each replicate using the established weight computation procedure (i.e., 20 additional sets of weights).

Having 20 sets of weights permits construction of 20 replicate estimates to compare with the estimate produced from all of the data; each replicate estimate is based on about 39/40ths of the data.

Each replicate was formed from 19 pairs of alpha-segments (38 alpha-segments total) and 1 alpha-segment from the 20th pair. Alpha-segments were randomly removed from each pair to form the replicate estimates. This procedure was performed 20 times, once for each pair of alpha-segments. Thus, actual respondent count in the included segments for a particular replicate was approximately 39/40^{ths} of the full respondent sample and was weighted to represent the full population.

The variance of \hat{x} , $\text{Var}(\hat{x})$, is estimated by computing:

$$\text{Var}(\hat{x}) = \sum_{i=1}^{20} [\hat{x}_i - (\hat{x})]^2.$$

where:

\hat{X}_i = an estimated total for replicate i
associated with alpha-segment pair i ,
and
 \hat{X} = an estimated total obtained over the full
sample.

If the estimate of interest is a ratio of two estimated totals (e.g., the total number of RNs resident in Florida between 25 and 29 years old to the total number of RNs resident in Florida), the variance estimate for the estimated ratio would be of the following form:

$$\text{Var}\left(\frac{\hat{x}}{\hat{y}}\right) = \sum_{i=1}^{20} \left(\frac{\hat{x}_i}{\hat{y}_i} - \frac{\hat{x}}{\hat{y}} \right)^2.$$

Following the example, the \hat{x} and \hat{x}_i measurements would be full sample and replicate estimates, respectively, of the number of RNs resident in Florida who were 25 to 29 years old, while \hat{y} and \hat{y}_i would be the corresponding estimates of the total number of RNs resident in Florida. The variance of any other statistic, simple or complex, can be similarly estimated by computing the statistic for each replicate.

The jackknife variance estimator can use either the full sample estimate, \hat{x} , or the average of the replicate estimates. While usually little difference exists between the two estimates, the estimator, \hat{x} , was used which tends to provide more conservative estimates of variance.

Direct estimates of the variance were computed for a variety of variables. These variables were chosen not only due to their importance, but also to represent the range of expected design effects. The average of these design effects (on a State-by-State basis) provides the basis for the variance estimate for variables not included in the set for which direct variance estimates were computed. Table B-2 in Appendix B presents direct estimates of the standard error (the square root of the variance) for a selected set of variables. Table B-3 in Appendix B shows the estimated population of nurses in each State and the standard error of these population totals.

Design Effects and Generalized Variances

The generalized variance is a model-based approximation of the sampling variance estimate, which is less computationally complex than the direct variance estimator but is also less accurate. The generalized variance equations use the national-level or State-level estimates of the design effect and, for some estimates, the coefficient of variation (CV) to estimate the sampling variance. The design effect, F , for an estimated proportion \hat{p} is determined by taking the ratio of the estimated sampling variance, $\hat{\sigma}_{\hat{p}}^2$, obtained by the jackknife method, to the sampling variance of the \hat{p} in a simple random sample of the same size. This design effect, F , can be computed as follows:

$$F = n\hat{\sigma}_{\hat{p}}^2 / [\hat{p}(1 - \hat{p})],$$

where n is the unweighted number of respondents used to determine the denominator of \hat{p} .

Direct estimates of the design effect were computed for a set of variables for each State. The median of the design effects was then computed for each State and the nation. These median design effects can be used in formulas for estimating generalized variances or standard errors. This procedure uses median design effects for a class of estimates instead of calculating direct estimates (with a resulting economy in time and costs), at the sacrifice generally of some accuracy in the variance estimates.

A generalized standard error estimate for an estimated proportion, $\hat{p} = \hat{Y}/\hat{X}$, for a State or for the United States, is provided by the equation:

$$\sigma_{\hat{Y}/\hat{X}} = \sqrt{F \cdot (\hat{Y}/\hat{X}) \cdot (1 - \hat{Y}/\hat{X})/n} \quad (1)$$

where n is the number of survey respondents used to determine the estimate \hat{X} . The multiplier F , the median² design effect, depends upon the State for which the estimated proportion was generated. The median design effects are listed on Table B-4 in Appendix B.

Generalized estimates of standard errors can also be computed for estimated numbers (or totals) of RNs in a State with a particular characteristic \hat{Y} , (such as those employed in hospitals). The estimate \hat{Y} , is a subtotal of the estimate \hat{X} , the estimated total of RNs working and/or living in the State. Note that the standard error and coefficient of variation of \hat{X} (represented by $C.V._{\hat{X}}$) were determined for the nation and for each State (see Table B-3).

To calculate the standard error of a total, one must first compute the relative variance (or square of the coefficient of variation) of the ratio of \hat{Y} to \hat{X} (called $V_{\hat{Y}/\hat{X}}^2$). The relative variance can be calculated as:

$$V_{\hat{Y}/\hat{X}}^2 = \frac{F(1 - \hat{Y}/\hat{X})}{n(\hat{Y}/\hat{X})},$$

where F is the design effect for the State of interest and n is the number of respondents to the survey that were weighted to obtain the estimate \hat{X} .

Then, from the relative variance of the ratio, one can approximate the relative variance of the total \hat{Y} , denoted $V_{\hat{Y}}^2$, by using:

$$V_{\hat{Y}}^2 = V_{\hat{Y}/\hat{X}}^2 + (C.V._{\hat{X}})^2.$$

This approximation is based on the first-order Taylor series approximation to the variance of a product and the assumption of zero correlation between the estimate of ratio and the denominator of the ratio.

Finally, the standard error of the total \hat{Y} can be estimated by multiplying the estimate by the square root of the relative variance defined above. The standard error of \hat{Y} , $\sigma_{\hat{Y}}$, is thus estimated as:

$$\sigma_{\hat{Y}} = \hat{Y} \sqrt{V_{\hat{Y}}^2} \quad (2)$$

The standard error of an estimated percentage for a region of the United States depends upon a linear combination of the variance of the same estimated percentages for the States making up that particular region. The estimated proportion for the region is:

$$\hat{Y}_R/\hat{X}_R = \frac{\sum_{s=1}^h \hat{Y}_s}{\sum_{s=1}^h \hat{X}_s}$$

Here, h is the number of States in region R , and \hat{Y}_s and \hat{X}_s , are estimates for a particular State. The formula used to approximate the standard error of an estimated proportion for a region is:

$$\sigma_{\hat{Y}_R/\hat{X}_R} = \sqrt{\sum_{s=1}^h (\hat{X}_s^2 \sigma_{\hat{Y}_s}^2 / \hat{X}_s) / (\sum_{s=1}^h \hat{X}_s)^2} \quad (3)$$

where $\sigma_{\hat{Y}_s/\hat{X}_s}$ represents the standard error of the estimated proportion Y_s/X_s for the States and the standard errors are estimated from equation (1) or from direct estimation.

The direct standard error for an estimated number for a region of the United States also depends upon a linear combination of the variance of the same

estimated numbers for the States that make up the region. The formula used is

$$\sigma_{\hat{Y}_R} = \sqrt{\sum_{s=1}^h \sigma_{\hat{Y}_s}^2} \quad (4)$$

where the standard error ($\sigma_{\hat{Y}}$) of the estimated number \hat{Y}_s is available either from the direct procedures or from equation (2).

²The median design effect was based on all design effects for estimates of proportions computed on selected variables. Using a median instead of mean value avoids the effects of extreme estimates of standard errors, which can occur for some relatively rare attributes. In prior years, an average (mean) design effect was computed for selected variables. Given that the distribution of design effects is skewed to the right, it is expected that the true median be less than the true mean.

Table B-2. Estimates and Standard Errors (S.E.) For Selected Variables of U.S. Registered Nurse Population

Description	Estimated Number	S.E. of Estimated Number	Estimated Percent	S.E. of Estimated Percent
UNITED STATES, Total Number Of Nurses	2,909,357	7,000		
Basic Nursing Education				
Diploma Program	733,377	9,749	25.21	0.32
Associate Degree	1,227,256	16,571	42.18	0.54
Baccalaureate Degree	887,114	13,366	30.49	0.47
Master's Degree	14,979	1,412	0.51	0.05
Doctorate	532	271	0.02	0.01
Not Reported	46,098	2,568	1.58	0.09
Employed in Nursing				
Yes	2,421,351	10,124	83.23	0.27
No	488,006	7,792	16.77	0.27
Racial/Ethnic Background				
White (non-hispanic)	2,380,529	28,004	81.82	0.89
Black/African American (non-hispanic)	122,495	16,737	4.21	0.57
Asian (non-hispanic)	84,383	15,540	2.90	0.54
American Indian/Alaskan Native (non-hispanic)	9,453	972	0.32	0.03
Native Hawaiian/Pacific Islander (non-hispanic)	5,594	1,091	0.19	0.04
Two or more races (non-hispanic)	41,244	2,641	1.42	0.09
Hispanic/Latino (White)	38,530	7,745	1.32	0.27
Hispanic/Latino (Black/African American)	2,924	633	0.10	0.02
Hispanic/Latino (Two or more races)	3,096	741	0.11	0.03
Hispanic, Other	3,460	921	0.12	0.03
Not Reported	217,651	5,689	7.48	0.19
Employment Status in 2004				
Employed In Nursing Full Time	1,696,807	12,210	58.32	0.44
Employed In Nursing Part Time	720,283	11,059	24.76	0.35
Employed In Nursing, Full/Part Time Unknown	4,261	523	0.15	0.02
Not Employed In Nursing	488,006	7,793	16.77	0.27
Graduation Year				
Before 1961	150,147	4,332	5.16	0.15
1961 To 1965	146,805	4,047	5.05	0.14
1966 To 1970	203,313	4,150	6.99	0.14
1971 To 1975	300,072	7,685	10.31	0.26
1976 To 1980	378,607	7,543	13.01	0.25
1981 To 1985	385,145	7,064	13.24	0.24
1986 To 1990	321,070	6,472	11.04	0.22
1991 To 1995	406,125	5,902	13.96	0.22
1996 To 2000	367,557	6,094	12.63	0.20

THE REGISTERED NURSE POPULATION

Description	Estimated Number	S.E. of Estimated Number	Estimated Percent	S.E. of Estimated Percent
After 2000	196,086	5,069	6.74	0.17
Not Reported	54,430	2,524	1.87	0.09
Employment Setting				
Hospital	1,360,847	13,063	46.77	0.43
Nursing Home Extended Care	153,172	3,369	5.26	0.12
Nursing Education	63,444	2,879	2.18	0.10
Public Health/Community Health	259,911	4,347	8.93	0.15
School Health Service	78,022	3,095	2.68	0.10
Occupational Health	22,447	1,820	0.77	0.06
Ambulatory Care (Except Nurse Owned/Operated)	265,273	5,346	9.12	0.18
Nurse Owned/Operated Ambulatory Care Setting	12,500	1,112	0.43	0.04
Insurance Claims/Benefits	43,641	1,976	1.50	0.07
Planning/ Regul /Licensing Agency	8,733	933	0.30	0.03
Other	103,310	3,974	3.55	0.13
Not Reported	538,058	8,227	18.49	0.29
Type of Position				
Administrator Or Assistant Administrator	125,011	2,522	4.30	0.08
Consultant	35,617	1,707	1.22	0.06
Supervisor	74,201	2,976	2.55	0.10
Instructor/Faculty	62,255	2,403	2.14	0.08
Head Nurse Or Assistant Nurse	148,210	3,880	5.09	0.13
Staff Nurse	1,431,053	11,735	49.19	0.39
Nurse Practitioner	84,042	3,424	2.89	0.12
Nurse Midwife	7,274	990	0.25	0.03
Clinical Specialist	28,623	1,900	0.98	0.07
Nurse Clinician	32,954	1,908	1.13	0.07
Certified Nurse Anesthetist	27,287	1,452	0.94	0.05
Research	19,263	1,250	0.66	0.04
Private Duty	11,762	1,280	0.40	0.04
Informatic Nurse	8,570	929	0.29	0.03
Home Health	45,621	1,834	1.57	0.06
Survey Or Auditors/Regulator	12,097	1,031	0.42	0.04
Patient Coordinator	138,404	3,205	4.76	0.11
Other	82,352	3,226	2.83	0.11
Not Reported	534,760	7,774	18.38	0.27
Highest Nursing Education				
Diploma In Nursing	510,209	8,062	17.54	0.27
Associate Degree In Nursing Or Related Field	981,238	14,852	33.73	0.49
Baccalaureate In Nursing	922,696	12,963	31.71	0.45
Baccalaureate In Related Field	71,580	1,946	2.46	0.07
Masters In Nursing	256,415	5,251	8.81	0.18

Description	Estimated Number	S.E. of Estimated Number	Estimated Percent	S.E. of Estimated Percent
Masters In Related Field	94,386	3,057	3.24	0.10
Doctorate In Nursing	11,548	645	0.40	0.02
Doctorate In Related Field	14,552	1,192	0.50	0.04
Not Reported	46,733	2,300	1.61	0.08
Age of Nurse				
<25	61,778	1,486	2.12	0.05
25 To 29	171,659	3,751	5.90	0.13
30 To 34	243,182	5,572	8.36	0.19
35 To 39	289,525	6,598	9.95	0.23
40 To 44	408,248	6,721	14.03	0.23
45 To 49	508,708	7,695	17.49	0.26
50 To 54	463,565	9,646	15.93	0.32
55 To 59	338,078	6,534	11.62	0.22
60 To 64	210,196	5,764	7.22	0.20
65+	185,254	5,092	6.37	0.17
Not Reported	29,165	1,525	1.00	0.05
Marital Status and Children				
Married, Children < 6	225,572	5,474	7.75	0.19
Married, Children > = 6	650,793	8,062	22.37	0.28
Married, Children All Ages	162,791	3,393	5.60	0.11
Married, No Children	994,588	10,942	34.19	0.34
Married, Children Unknown	16,916	1,275	0.58	0.04
Widowed/ Separated/ Divorced, Children < 6	13,300	1,023	0.46	0.04
Widowed/ Separated/ Divorced, Children > = 6	137,283	4,514	4.72	0.15
Widowed/ Separated/ Divorced, Children All Ages	14,683	898	0.50	0.03
Widowed/ Separated/ Divorced, No Children	355,309	8,582	12.21	0.29
Widowed/ Separated/ Divorced, Children Unknown	5,795	817	0.20	0.03
Never Married, Children < 6	9,131	1,063	0.31	0.04
Never Married, Children > = 6	18,657	1,606	0.64	0.06
Never Married, Children All Ages	2,854	609	0.10	0.02
Never Married, No Children	234,208	5,167	8.05	0.18
Never Married, Children Unknown	3,897	680	0.13	0.02
Not Reported	63,581	2,497	2.19	0.09
Mean Gross Annual Salary for Full-Time RNs	57,784.86	180.85		
Mean Hours Worked per year	2,160.00	5.63		
Mean Hours Worked in Last Full Workweek	38.55	0.13		

Table B-3. Direct Estimates of State Nurse Population, Standard Error, and Coefficient of Variation by State, 2000

State	2004 Estimated State Nurse Population	Standard Error	Coefficient of Variation (in Percent)
United States	2,909,357	7,001	0.24
Alabama	42,894	472	1.10
Alaska	7,567	420	5.54
Arizona	48,284	910	1.89
Arkansas	23,818	569	2.39
California	255,858	1,734	0.68
Colorado	43,719	695	1.59
Connecticut	42,894	1,199	2.80
DC	9,352	324	3.47
Delaware	12,118	675	5.57
Florida	169,460	2,168	1.28
Georgia	78,898	1,070	1.36
Hawaii	11,146	387	3.47
Idaho	11,068	256	2.32
Illinois	138,092	1,236	0.90
Indiana	64,396	858	1.33
Iowa	37,777	614	1.63
Kansas	29,892	790	2.64
Kentucky	42,971	812	1.89
Louisiana	39,449	731	1.85
Maine	17,785	465	2.61
Maryland	53,061	759	1.43
Massachusetts	89,358	972	1.09
Michigan	103,697	1,406	1.36
Minnesota	60,214	621	1.03
Mississippi	27,303	517	1.89
Missouri	66,551	973	1.46
Montana	9,416	149	1.58
Nebraska	20,026	604	3.01
Nevada	16,206	427	2.63
New Hampshire	18,473	493	2.67
New Jersey	92,425	1,476	1.60
New Mexico	15,027	435	2.89
New York	215,309	2,377	1.10
North Carolina	92,391	1,238	1.34
North Dakota	7,966	206	2.58
Ohio	133,064	1,224	0.92
Oklahoma	29,268	574	1.96
Oregon	34,946	713	2.04
Pennsylvania	164,433	1,834	1.12
Rhode Island	13,847	337	2.44
South Carolina	35,204	741	2.11
South Dakota	10,223	213	2.09
Tennessee	62,266	989	1.59

State	2004 Estimated State Nurse Population	Standard Error	Coefficient of Variation (in Percent)
Texas	168,368	1,363	0.81
Utah	18,169	413	2.27
Vermont	7,137	254	3.56
Virginia	73,526	1,361	1.85
Washington	59,761	913	1.53
West Virginia	17,742	452	2.55
Wisconsin	62,044	640	1.03
Wyoming	4,498	122	2.72

**Table B-4. Median Design Effects for Percentages
Estimated from the Eighth National Sample Survey
of Registered Nurses, 2004**

State	Median Design Effect
United States	1.63
Alabama	1.06
Alaska	1.24
Arizona	1.01
Arkansas	0.98
California	1.11
Colorado	1.04
Connecticut	1.05
Delaware	0.97
DC	1.33
Florida	1.08
Georgia	1.03
Hawaii	0.99
Idaho	0.98
Illinois	1.01
Indiana	1.02
Iowa	1.10
Kansas	0.98
Kentucky	1.08
Louisiana	1.04
Maine	1.04
Maryland	1.16
Massachusetts	1.02
Michigan	0.95
Minnesota	1.01
Mississippi	1.01
Missouri	1.05
Montana	0.99
Nebraska	0.99
Nevada	1.07
New Hampshire	1.09
New Jersey	1.00
New Mexico	1.04
New York	1.04
North Carolina	1.01
North Dakota	0.97
Ohio	1.05
Oklahoma	1.02
Oregon	1.03
Pennsylvania	0.98
Rhode Island	1.00
South Carolina	1.03
South Dakota	1.06
Tennessee	0.98
Texas	1.04

State	Median Design Effect
Utah	1.02
Vermont	0.98
Virginia	1.13
Washington	1.07
West Virginia	0.93
Wisconsin	1.07
Wyoming	0.95

APPENDIX C

QUESTIONNAIRE



U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
Health Resources and Services Administration

2004 National Sample Survey of Registered Nurses

Conducted by
The Gallup Organization

The *2004 National Sample Survey of Registered Nurses* is being conducted for the Health Resources and Services Administration of the U.S. Department of Health and Human Services in compliance with Title VIII, Public Law 94-63, the Nurse Training Act of 1975, section 951; and Public Law 105-392, section 806(f), the Health Professions Education Partnerships Act of 1998; 42 USC 295k, section 792 of the U.S. Public Health Service Act. **Strict confidentiality of all information obtained from individuals surveyed in NSSRN is assured by current Federal laws and regulations.** An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0276. Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching data sources, gathering or maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14-45, Rockville, Maryland, 20857. The Gallup Organization will process all personal data you provide and will use such information for statistical and research purposes. By completing and returning this survey, you give your consent to process and transfer your personal data to the United States.

Please complete only one questionnaire and return any extra copies you receive, preferably in the same envelope (see Instructions on page 1).

Please correct any errors in the name/address information and States where you are actively licensed.

Corrections to First Name

Corrections to M.I.

Corrections to Last Name

Corrections to Number and Street

Corrections to City/Town

Corrections to State

Corrections to ZIP Code

Corrections to State(s) Where Actively Licensed (If there are any corrections to the list in the box to the right, please re-list ALL of the States where you are actively licensed.)

[First Name M.I. Last Name]

[Address 1]

[Address 2]

[City, State ZIP Code]

State(s) Where Actively Licensed:

[State 1, State 2, State 3]

Web Site URL: <https://gx.gallup.com/nurse.gx>

Access Code: [XXXXXX]

Quex # [X]

Instructions

How do I complete the survey electronically?

On your Web browser, log onto <https://gx.gallup.com/nurse.gx> and type in your unique Access Code that is printed in the box in the lower right corner of the questionnaire cover page. If you complete the survey online, you do not need to return this paper questionnaire.

What if I received more than one questionnaire?

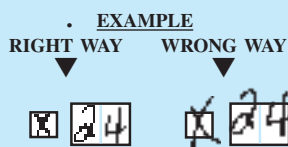
We may not have been able to eliminate all of the duplications in our list of nurses who have more than one license, so you may receive more than one questionnaire. **Please complete only one questionnaire but return any extra copies you receive, preferably in the same envelope as your completed survey. Please write “DUPLICATE” at the top of these blank surveys.** By returning extra surveys: we can avoid unnecessary follow-up mailings to you. (For those who receive duplicate questionnaires, if you choose to respond by the Web, you will be asked to enter a unique code from each of the duplicate surveys you receive.)

What if I have questions about this survey?

If you have any questions about this survey or about how to complete it electronically, please call Gallup Client Support (toll-free) at 1-888-297-8999, or send an e-mail to galluppoll@gallup.com.

Section A. Eligibility and Education

Please mark an “X” in the box corresponding to your answer in each question, or supply the requested information. Use blue or black ink.



- 1** As of March 10, 2004, were you actively licensed to practice as a registered nurse (RN) in any U.S. State or the District of Columbia (whether or not you were employed in nursing at that time)? (Please mark ☒ the appropriate box.)

- ¹ ☐ Yes (You are eligible to complete this questionnaire. Please continue to the next question.)
- ² ☐ No (You do not need to complete this questionnaire. Please stop here and return this questionnaire to Gallup so we know you are not eligible.)

- 2** Which initial educational program qualified you to sit for the RN licensure exam? (Mark one box.)

- ¹ ☐ Diploma Program
- ² ☐ Associate Degree
- ³ ☐ Bachelor's Degree
- ⁴ ☐ Master's Degree
- ⁵ ☐ Doctorate (N.D.)

- 3** In what month and year did you graduate from this program?

Month			Year		

- 4** In which U.S. State (including the District of Columbia), U.S. Territory, or foreign country was this program located?

- 5** In what U.S. State (or District of Columbia) were you issued your first RN license?

State:	
Year:	

(PLEASE CONTINUE TO PAGE 2)

6 How did you finance your initial nursing education?
(Mark all that apply.)

- ☐ 1 Personal resources (you or your spouse)
- ☐ 2 Family resources (parents or other relatives)
- ☐ 3 Employer tuition reimbursement plan (including Veterans Administration employer tuition plan)
- ☐ 4 Federal traineeship, scholarship, or grant
- ☐ 5 Federally-assisted loan
- ☐ 6 State/local government scholarship, loan, or grant
- ☐ 7 Non-government scholarship, loan, or grant
- ☐ 8 Other resources

7 At any time, have you ever been licensed as a practical or vocational nurse (LPN/LVN)?

- ☐ 1 Yes
- ☐ 2 No

8 Before starting your initial RN educational program, were you ever employed as any of the following: (Mark all that apply.)

- ☐ 0 No
- ☐ 1 Nursing Aide
- ☐ 2 Licensed Practical/Vocational Nurse (LPN/LVN)
- ☐ 3 Allied Health technician/technologist (e.g., radiologic technician)
- ☐ 4 Manager in health care setting
- ☐ 5 Clerk in health care setting
- ☐ 6 Another type of health-related position

(Please specify below.)

9 Indicate all degrees you received before starting your initial RN educational program.
(Mark all that apply.)

- ☐ 0 None (Skip to Question 11, page 3)

- ☐ 1 Associate Degree
- ☐ 2 Bachelor's Degree
- ☐ 3 Master's Degree
- ☐ 4 Doctorate
- ☐ 5 Other (Specify)

10 What was the field of study for your highest degree identified in Question 9? (Mark one box.)

- ☐ 1 Health-related field

or

Non-Health related field

- ☐ 2 Biological or Physical Science
- ☐ 3 Business or Management
- ☐ 4 Education
- ☐ 5 Liberal Arts, Social Science, or Humanities
- ☐ 6 Law
- ☐ 7 Computer Science
- ☐ 8 Social Work
- ☐ 9 Other non-health-related field

(Please specify below.)

(PLEASE CONTINUE TO PAGE 3)

11 Did you earn any additional academic degrees **AFTER** graduating from your initial registered nurse education program that you described in Question 2? (Do not include degrees you are currently working towards.)

¹ ☐ Yes (Please complete all columns for each degree you earned.)

² ☐ No (Skip to Question 12, page 4)

Type of Degree	A Did you receive this degree? (Mark all that apply.)	B If so, did the degree enhance your nursing career? (Mark yes or no.)	C Which two-digit code from the table below best describes the primary focus of this degree?	D In what state or country did you receive the degree?	E In what year did you receive the degree?
a. Associate Degree in nursing	<input type="checkbox"/>	_____→	_____→	<input type="text"/>	<input type="text"/>
b. Associate Degree in another field	<input type="checkbox"/>	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No	_____→	<input type="text"/>	<input type="text"/>
c. Bachelor's degree in nursing	<input type="checkbox"/>	_____→	_____→	<input type="text"/>	<input type="text"/>
d. Bachelor's degree in another field	<input type="checkbox"/>	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Master's in nursing (after any initial MSN mentioned in Question 2)	<input type="checkbox"/>	_____→	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Additional Master's in nursing	<input type="checkbox"/>	_____→	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Master's in another field	<input type="checkbox"/>	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>
h. Doctorate in nursing	<input type="checkbox"/>	_____→	<input type="text"/>	<input type="text"/>	<input type="text"/>
i. Doctorate in another field	<input type="checkbox"/>	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>

For Column C, enter the appropriate two-digit code for each Bachelor's (other), Master's, or Doctorate degree above.

Primary Focus of Degree

- 01 Clinical Practice
- 02 Education
- 03 Supervision/Administration
- 04 Research
- 05 Law
- 06 Informatics
- 07 Business
- 08 Public Health
- 09 Social Science
- 10 Humanities
- 11 Basic Sciences (i.e., Biology)
- 12 Computer Science
- 13 Social Work
- 14 Other

- 12** Since graduating from the initial nursing program you described in Question 2, have you completed a formal educational program preparing you for advanced practice nursing (APN) as a clinical nurse specialist, nurse anesthetist, nurse-midwife, or nurse practitioner?

☐ Yes (Please complete columns on pages 4-6 for each specialty you have obtained.)

☐ No (Skip to Question 13, Page 6)

	A	B	C	D
Information on Advanced Practice Nurse Preparation and Credentials	Clinical Nurse Specialist (CNS)	Nurse Anesthetist (NA)	Nurse-Midwife (NM)	Nurse Practitioner (NP)
12a Did you receive advance practice preparation as a ...? (Mark each column if yes.)	↓ <input type="checkbox"/>	↓ <input type="checkbox"/>	↓ <input type="checkbox"/>	↓ <input type="checkbox"/>
12b What was the length of the program? 1. Less than 3 months 2. 3 through 8 months 3. 9 months or more	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
12c What was the highest credential you received in that program? 1. Certificate/Award 2. Bachelor's Degree 3. Master's Degree 4. Post-Master's Certificate 5. Doctorate	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	(Mark one) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
12d In what year did you receive this APN credential?	□ □ □ □	□ □ □ □	□ □ □ □	□ □ □ □
12e Which one of these was the primary specialty you studied? 1. Acute Care/Critical Care 2. Adult Health/Medical Surgical 3. Anesthesia 4. Community Health 5. Family 6. Geriatric/Gerontology 7. Home Health 8. Maternal-Child Health 9. Neonatal 10. Nurse-Midwifery 11. Obstetric/Gynecology 12. Occupational Health 13. Oncology 14. Palliative Care 15. Pediatrics 16. Psychiatric/Mental Health 17. Rehabilitation 18. School Health 19. Women's Health 20. Other (Specify in appropriate column.)	(Mark one) <input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 (Specify) □ □ □ □	(Mark one) <input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 (Specify) □ □ □ □	(Mark one) <input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 (Specify) □ □ □ □	(Mark one) <input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 (Specify) □ □ □ □

	A	B	C	D
Information on Advanced Practice Nurse Preparation and Credentials (Question 12 continued from previous page.)	Clinical Nurse Specialist (CNS)	Nurse Anesthetist (NA)	Nurse-Midwife (NM)	Nurse Practitioner (NP)
12f Is your current APN status certified by any of these national bodies?				
1. American Association of Critical Care Nurses Certification Corp. 2. American Academy of Nurse Practitioners 3. American Association of Nurse Anesthetists 4. ACNM Certification Council, Inc. (ACC) (including previous ACNM certification) → 5. American Nurses Credentialing Center (ANCC) 6. National Certification Board of Pediatric Nurse Practitioners & Nurses (NCPNP/N) 7. National Certification Corporation for the Obstetric, Gynecologist, and Neonatal Nursing Specialties (NCC) 8. Other (Specify in appropriate column.)	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No (Specify if other) <input type="text"/>	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No (Specify if other) <input type="text"/>	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No (Specify if other) <input type="text"/>	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No (Specify if other) <input type="text"/>
12g If Yes above, what is the primary type of national certification you have?	(Mark one)	(Mark one)	(Mark one)	(Mark one)
1. Acute Care NP 2. Acute Care/Critical Care (Adult) CNS 3. Acute Care/Critical Care (Pediatric or Neonatal) CNS 4. Adult NP 5. Certified Registered Nurse Anesthetist (CRNA) 6. Certified Nurse-Midwife (CNM) 7. Community Health CNS 8. Family NP 9. Gerontological CNS or NP 10. Home Health CNS 11. Medical Surgical CNS 12. Neonatal NP 13. Occupational Health NP 14. Pediatric CNS or NP 15. Palliative Care CNS or NP 16. Psychiatric & Mental Health—Adult NP or CNS 17. Psychiatric & Mental Health (Family) NP 18. Psychiatric & Mental Health Child/Adolescent CNS 19. School NP 20. Women's Health Care NP (Ob-Gyn NP) 21. No National Certificate Exam Available 22. Other (Specify in appropriate column.)	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 (Specify) <input type="text"/>	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 (Specify) <input type="text"/>	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 (Specify) <input type="text"/>	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04 <input type="checkbox"/> 05 <input type="checkbox"/> 06 <input type="checkbox"/> 07 <input type="checkbox"/> 08 <input type="checkbox"/> 09 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 (Specify) <input type="text"/>

	A	B	C	D
Information on Advanced Practice Nurse Preparation and Credentials (Question 12 continued from previous page.)	Clinical Nurse Specialist (CNS)	Nurse Anesthetist (NA)	Nurse - Midwife (NM)	Nurse Practitioner (NP)
12h Do you have any current certification, licensure, or other official recognition of your APN status from any <u>State</u> Board of Nursing?	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No	¹ <input type="checkbox"/> Yes ² <input type="checkbox"/> No

13 Please identify any professional certifications in nursing you have received (e.g., critical care, emergency, oncology, case management, etc.). Do not include advanced practice nursing certifications reported above.

⁰ ☐ None

Specify:

Specify:

Specify:

14 Since January 2000, please indicate if you have received training in recognizing or responding to the following emergencies. (Mark all that apply.)

⁰ ☐ None (Skip to Question 15)

¹ ☐ Biological attack

² ☐ Chemical attack

³ ☐ Nuclear/radiologic attack

⁴ ☐ Infectious disease epidemics

⁵ ☐ Natural disaster or other public health emergencies

14a (If you have marked any of the above types of training:) Please specify the TOTAL number of hours spent in the above training(s) since January 2000.

Hours in training

14b Pertaining to the training in emergencies you marked above, will the training enable you to effectively participate in an organized multidisciplinary response to such an emergency?

¹ ☐ Yes

² ☐ No

15 Are you currently enrolled in a formal education program leading to an academic degree or certificate?

¹ ☐ Yes

² ☐ No (Skip to Question 19, page 7)

16 Is this formal education program...? (Mark one box.)

¹ ☐ In nursing

² ☐ In a non-nursing field useful to enhance your career in nursing

³ ☐ In another field to allow you to pursue career opportunities outside of nursing

17 Are you a full-time or part-time student?

¹ ☐ Full-time student

² ☐ Part-time student

18 What type of degree/award are you currently working toward in this program? (Mark one box.)

¹ ☐ Associate Degree

² ☐ Bachelor's Degree

³ ☐ Master's Degree

⁴ ☐ Doctorate

⁵ ☐ Certificate

(PLEASE CONTINUE TO PAGE 7)

Section B. Primary Nursing Employment

19 Are you employed or self-employed in nursing?

(Employment also includes: being on a temporary leave of absence from your nursing position; on vacation; being on sick leave; or working through a temporary employment service or practicing private duty nursing and not on a case at the moment.)

- 1 ☐ Yes
2 ☐ No (Skip to Question 41, page 9)

20 Are you required to maintain an active RN license in order to hold your principal nursing position?

(If you hold more than one nursing position, your principal nursing position is the one at which you work the most hours during your regular work year.)

- 1 ☐ Yes
2 ☐ No

21 Where is the location of your principal nursing position? This information is critical for developing State employment estimates and supply and demand projections. (If you are not employed in a fixed location, enter the geographic area where you spend most of your working time.)

City/Town:

County:

State (or country if not USA):

ZIP+4 code: -
(if available)

22 In your principal nursing position, are you...? (Mark one box.)

- 1 ☐ An employee of the organization or facility for which you are working
2 ☐ Employed through an employment agency
3 ☐ Self-employed, per diem, or on as-needed basis

23 Using the list of NURSING EMPLOYMENT SETTINGS on page 15, write in the code that best describes your principal nursing employment setting. (If you work in more than one setting, indicate the one setting in which you spend most of your working time.)

Code for employment setting from page 15

If this code is labeled as "Other," please specify the setting below.

24 Which one of the following best corresponds to the position title for your principal nursing position? (Mark one box.)

- 01 ☐ Administrator of organization/facility/agency or assistant administrator
02 ☐ Administrator of nursing or assistant (e.g., vice president for nursing, director or assistant director of nursing services)
03 ☐ Case manager
04 ☐ Certified nurse anesthetist (CRNA)
05 ☐ Charge nurse
06 ☐ Clinical nurse specialist
07 ☐ Consultant
08 ☐ Dean, director, or assistant/associate director of nursing education program
09 ☐ Float nurse
10 ☐ Discharge planner/outcomes manager
11 ☐ Head nurse or assistant head nurse
12 ☐ Infection control nurse
13 ☐ Informatics nurse
14 ☐ Instructor at a school of nursing
15 ☐ Insurance reviewer
16 ☐ Nurse clinician
17 ☐ Nurse coordinator
18 ☐ Nurse manager
19 ☐ Nurse-midwife
20 ☐ Nurse practitioner
21 ☐ Nursing staff development director
22 ☐ Nursing staff development instructor
23 ☐ Patient care coordinator
24 ☐ Private duty nurse
25 ☐ Professor or assistant/associate professor
26 ☐ Public health nurse
27 ☐ Quality improvement nurse
28 ☐ Researcher
29 ☐ School nurse
30 ☐ Staff nurse
31 ☐ Supervisor or assistant supervisor
32 ☐ Surveyor/auditor/regulator
33 ☐ Team leader
34 ☐ Traveling nurse
35 ☐ Visiting nurse/home health nurse
36 ☐ No position title
37 ☐ Other (Specify)

25 For your principal nursing position, estimate the percentage of your time spent in the following activities during a usual workweek. (The total should equal 100%. Do not use decimal places.)

- a. Administration %
- b. Consultation with agencies and/or professionals %
- c. Direct patient care not including staff supervision %
- d. Research %
- e. Supervision/Management %
- f. Teaching nursing or other health profession students (include class preparation time) %
- g. Other %
- TOTAL (confirm sum is 100%) %

26 In a typical week in your principal nursing position, do you provide direct patient care in a hospital setting? (Exclude nursing home units. Include all clinics and other services of the hospitals.)

- 1 ☐ Yes
- 2 ☐ No (Skip to Question 28)

27 During a typical workweek in your principal nursing position, in what type of unit do you spend the majority of your patient care time? (Mark one box.)

- 01 ☐ Critical care unit (ICU/CCU)
- 02 ☐ Emergency department
- 03 ☐ General/specialty inpatient unit (other than critical care or step-down)
- 04 ☐ Home health care
- 05 ☐ Hospice unit
- 06 ☐ Labor/delivery room
- 07 ☐ Operating room
- 08 ☐ Outpatient department
- 09 ☐ Perioperative unit
- 10 ☐ Radiologic (diagnostic or therapeutic)
- 11 ☐ Step-down, transitional, progressive, telemetry unit
- 12 ☐ Sub-acute care unit
- 13 ☐ Multiple units, none over 50%
- 14 ☐ No specific assigned type of area
- 15 ☐ Other specific area (Specify)

28 What type of patient is primarily treated in the unit/organization in which you work? (Mark one box.)

- 01 ☐ No patient care – Unit/organization does not provide patient care
- 02 ☐ Adult care (general)
- 03 ☐ Cardiovascular
- 04 ☐ Chronic care
- 05 ☐ Neurological
- 06 ☐ Newborn
- 07 ☐ Obstetrics/gynecologic
- 08 ☐ Oncology
- 09 ☐ Orthopedic
- 10 ☐ Pediatric
- 11 ☐ Psychiatric
- 12 ☐ Rehabilitation
- 13 ☐ Renal
- 14 ☐ Work with multiple patient types
- 15 ☐ Other (Specify)

29 In your principal nursing position, do you work...? (Mark one box.)

- 1 ☐ The entire calendar year or school/academic year
- 2 ☐ Only part of the calendar year or school/academic year

30 When you work at this principal nursing position, do you work...? (Mark one box.)

- 1 ☐ Full-time
- 2 ☐ Part-time

31 How many weeks do you normally work per year in this job? (Enter a number from 01 to 52.)

 weeks

32 How would you best describe your feelings about your principal nursing position? (Mark one box.)

- 1 ☐ Extremely dissatisfied
- 2 ☐ Moderately dissatisfied
- 3 ☐ Neither satisfied nor dissatisfied
- 4 ☐ Moderately satisfied
- 5 ☐ Extremely satisfied

33 Please provide information about the number of hours you worked in your last full workweek at your principal nursing position.

- a) Number of hours worked in your last full workweek (including paid hours of on-call duty and overtime).....
- b) Number of hours reported in Item 33a that were paid on-call (Enter 00 if none).....
- c) Number of hours reported in Item 33a that were paid as overtime (Enter 00 if none).....
- d) Number of overtime hours reported in Item 33c that were mandatory/unscheduled (Enter 00 if none).....

34 Please estimate your current, gross annual earnings (pre-tax) from your principal nursing position. Include overtime and bonuses, but exclude sign-on bonuses.

\$.00 per year

35 Are you represented by a labor union in your principal nursing position?

- ¹ ☐ Yes
² ☐ No

Section C. Secondary Employment in Nursing

36 Aside from the principal nursing position you just described, do you hold any other positions in nursing for pay?

- ¹ ☐ Yes
² ☐ No (Skip to Question 43, page 10)

37 In your other nursing position(s), are you...? (Mark all that apply.)

- ¹ ☐ An employee of the organization or facility for which you are working
² ☐ Employed through an employment agency
³ ☐ Self-employed, per diem, or on as-needed basis

38 What type of work setting best describes where you work for your other nursing position(s)? (Mark one box. Refer to categories on page 15 for further clarification.)

- ¹⁰⁰ ☐ Hospital
²⁰⁰ ☐ Nursing home/extended care facility
³⁰⁰ ☐ Nursing education program
⁴⁰⁰ ☐ Public or community health setting
⁵⁰⁰ ☐ School health service
⁶⁰⁰ ☐ Occupational health
⁷⁰⁰ ☐ Ambulatory care setting
⁸⁰⁰ ☐ Insurance claims/benefits
⁹⁰⁰ ☐ Policy/planning/regulatory/licensing agency
⁹⁵⁰ ☐ Other

39 Which of the following categories best describes the amount you work in all of your other nursing position(s)? Your best estimate is fine. (Note that 2,000 hours per year is full-time year-round. 1,000 hours per year is half-time year-round or full-time for half a year. 500 hours per year is 10 hours per week year round, or full-time for 3 months of the year.) (Mark one box.)

- ¹ ☐ Less than 500 hours per year
² ☐ 500 hours per year
³ ☐ 501-999 hours per year
⁴ ☐ 1,000 hours per year
⁵ ☐ 1,001-1,499 hours per year
⁶ ☐ 1,500 hours per year
⁷ ☐ 1,501-1,999 hours per year
⁸ ☐ 2,000 hours per year or more

40 Please estimate your current, gross annual earnings (pre-tax) from your other nursing position(s).

\$.00 per year

Section D. Employment Outside of Paid Nursing

If you are currently working for pay in nursing, please skip to Question 43, Page 10.

41 If you are not working for pay in nursing, how long has it been since you last were employed or self-employed as a registered nurse?

- ⁰ ☐ Mark here if you never worked as a registered nurse
¹ ☐ Mark here if less than one year
 Write in number of years if one or more

42 What are the primary reasons you are not working in a nursing position for pay? (Mark yes or no for each item.)

	Yes	No
a. Burnout/stressful work environment...	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
b. Career change	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
c. Difficult to find a nursing position.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
d. Disability.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
e. Illness	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
f. Inability to practice nursing on a professional level	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
g. Inadequate staffing.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
h. Lack of advancement opportunities...	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
i. Lack of collaboration/communication between health care professionals.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
j. Liability concerns	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
k. Physical demands of job	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
l. Retired	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
m. Salaries too low/better pay elsewhere...	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
n. Scheduling/inconvenient hours/too many hours.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
o. Skills are out-of-date.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
p. Taking care of home and family	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
q. Volunteering in nursing	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
r. Went back to school	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
s. Other (Specify) <input type="text"/>		

43 Are you currently employed in an occupation other than nursing?

- ¹ ☐ Yes
² ☐ No (Skip to Question 49)

44 Is this employment with a health-related organization or in a health-related position?

- ¹ ☐ Yes
² ☐ No

45 Please provide a job title that best describes the nature of your principal position outside of nursing. (Write in job title in the space below.)

46 Do you work full-time or part-time in this principal position outside of nursing?

- ¹ ☐ Full-time
² ☐ Part-time

47 What is the average number of hours you work per week in your principal position outside of nursing?

hours per week

48 Please estimate your current, gross annual earnings (pre-tax) from your principal position outside of nursing.

\$.00 per year

Section E. Plans for Employment in Nursing

49 Are you actively seeking employment as a registered nurse? (Include seeking employment as an advanced practice nurse.)

- ¹ ☐ Yes
² ☐ No (Skip to Question 52)

50 How long have you been actively seeking a nursing position?

- ⁰ ☐ Mark here if less than one week
 Write in number of weeks if one or more

51 Are you looking for a position that is...?

- ¹ ☐ Full-time
² ☐ Part-time
³ ☐ Either

Section F. Prior Nursing Employment

52 Since receiving your first RN license, how many years have you worked in nursing? (Only count years when you worked at least half the year in nursing.)

- ⁰ ☐ Mark here if less than one year
 Write in number of years if one or more

53 Were you employed in nursing one year ago?

- 1 ☐ Yes
 2 ☐ No (*Skip to Question 61, page 12*)

54 In your principal nursing position one year ago, did you work...? (*Mark one box.*)

- 1 ☐ The entire calendar year or school/academic year
 2 ☐ Only part of the calendar year or school/academic year

55 When you worked at this principal nursing position one year ago, did you work...? (*Mark one box.*)

- 1 ☐ Full-time
 2 ☐ Part-time

56 What was the location of your principal nursing position one year ago? (*If you were not employed in a fixed location enter the geographic area where you spent most of your working time.*)

City/Town:

County:

State (or country if not USA):

ZIP+4 code: -
 (if available)

57 In your principal nursing position one year ago, did you spend the majority of your working hours in inpatient units?

- 1 ☐ Yes
 2 ☐ No

58 How would you describe your principal nursing position one year ago?

- 1 ☐ Same position/same employer as current principal nursing position (*Skip to Question 61, page 12*)
 2 ☐ Different position/same employer as current one
 3 ☐ Different employer than current one

59 Were any of the following the primary reason(s) for this change? (*Mark yes or no for each item.*)

	Yes	No
a. Burnout/stressful work environment	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
b. Career advancement/promotion.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
c. Disability.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
d. Illness.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
e. Interested in another position/job	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
f. Lack of collaboration/communication between health care professionals.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
g. Laid off/downsizing of staff.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
h. Opportunity to do the kind of nursing that I like	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
i. Pay/benefits better.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
j. Reorganization that shifted positions	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
k. Relocated to different geographic area	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
l. Retired.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
m. Scheduling/inconvenient hours/too many hours	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
n. Sign-on bonus offered.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²
o. Other (<i>Specify</i>) <input type="text"/>		

60 Using the list of NURSING EMPLOYMENT SETTINGS on page 15, write in the code that best describes your principal nursing employment setting one year ago. (*If you worked in more than one setting, indicate the one setting in which you spent most of your working time.*)

Code for employment setting from page 15

If this code is labeled as "Other," please specify the setting below.

(PLEASE CONTINUE TO PAGE 12)

Section G. General Information

Answers to the following questions will be used only to statistically interpret your responses.

61 Where do you currently reside? This information is critical for producing State estimates.

City/Town:

County:

State (or country if not USA):

ZIP+4 code:
(if available)

62 Did you reside in the same city/town a year ago?

¹ ☐ Yes (*Skip to Question 64*)

² ☐ No

63 Where did you reside a year ago? This information is critical for producing State estimates.

City/Town:

County:

State (or country if not USA):

ZIP+4 code:
(if available)

64 What is your gender?

¹ ☐ Male

² ☐ Female

65 What is your year of birth?

1 9

66 What is your ethnic background?

¹ ☐ Hispanic or Latino

² ☐ Not Hispanic or Latino

67 What is your racial background? (Mark one or more races.)

¹ ☐ American Indian or Alaska Native

² ☐ Asian

³ ☐ Black or African American

⁴ ☐ Native Hawaiian or Other Pacific Islander

⁵ ☐ White

⁶ ☐ Other (*Specify*)

68 What languages do you speak fluently other than English? (Enter all that apply.)

⁰ ☐ No other languages

¹ ☐ Language #1

² ☐ Language #2

³ ☐ Language #3

69 Which best describes your current marital status?

¹ ☐ Now married

² ☐ Widowed, divorced, or separated

³ ☐ Never married

70 Describe the children/parents/dependents who either live at home with you or for whom you provide a significant amount of care. (Mark all that apply.)

¹ ☐ No children/parents/dependents at home

² ☐ Child(ren) less than 6 years old at home

³ ☐ Child(ren) 6 to 18 years old at home

⁴ ☐ Other adults at home (i.e., parents or dependents)

⁵ ☐ Others living elsewhere (i.e., children, parents or dependents)

71 What is your current, gross annual household income (pre-tax)?

¹ ☐ \$15,000 or less

² ☐ \$15,001 to \$25,000

³ ☐ \$25,001 to \$35,000

⁴ ☐ \$35,001 to \$50,000

⁵ ☐ \$50,001 to \$75,000

⁶ ☐ \$75,001 to \$100,000

⁷ ☐ \$100,001 to \$150,000

⁸ ☐ More than \$150,000

Section H. Licensure Information

Answers to the following questions will be kept strictly confidential under Federal Law 42 USC 295k, section 792 of the U.S. Public Health Service (PHS) Act and will only be used to develop accurate estimates of the number of RNs in the country and in each State.

- 72** Please provide the information on the State(s) in which you hold an active RN license. This information is critical to confirm that you are the individual we intended to complete the survey, not just someone with a similar name, and that you still hold an active license.

	A	B	C	D
State of licensure	Permanent number on certificate of registration	What is the last name on the license?	What is the first name on the license?	What is the middle initial on the license?
1. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section I. Contact Information/Comments

- 73** If we need to contact you about any of your responses, please provide your e-mail address and telephone number, as well as the best time of day to reach you.

E-mail address:

Telephone No.: () -
 Area Code Telephone Number
☐ Home ☐ Work ☐ Cell

Time of day/week best to contact you by phone:

74 Do you have any recommendations for how this survey could be improved? Please print clearly.

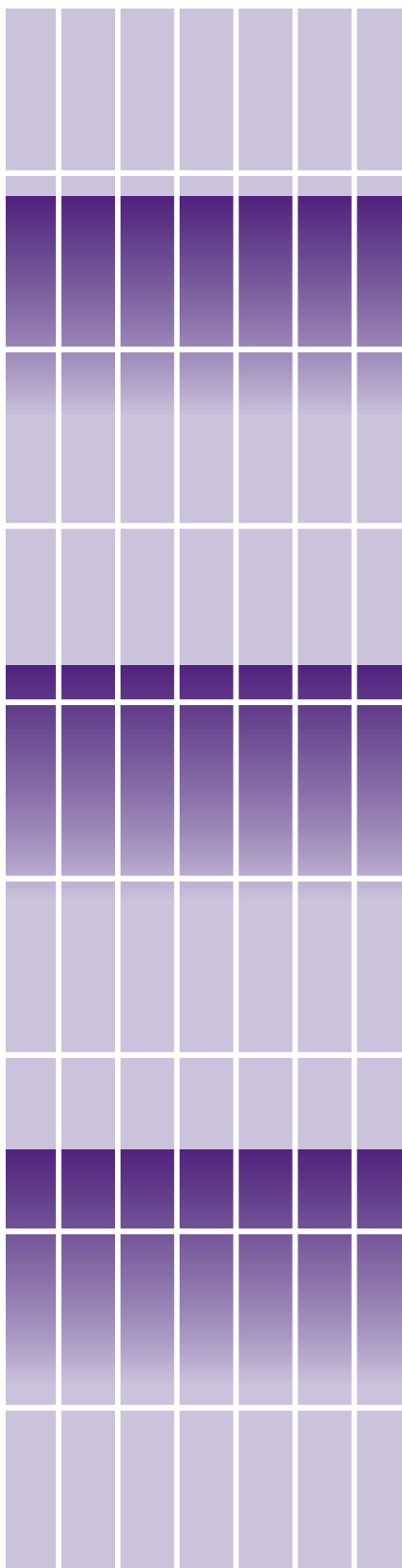
*Thank you! Please return this survey and any duplicate surveys
in the enclosed postage-paid envelope.*

NURSING EMPLOYMENT SETTINGS & CODES

(Use this list for Questions 23 and 60)

	<u>CODE</u>
<u>Hospital</u> (Exclude nursing home units and all off-site units of hospitals, but include all on-site clinics and other services of the hospitals.)	
Non-Federal, short-term hospital, except psychiatric (for example, acute care hospital) ..	110
Non-Federal, long-term hospital, except psychiatric	120
Non-Federal psychiatric hospital	130
Federal Government hospital	140
Other type of hospital	150
<u>Nursing Home/Extended Care Facility</u>	
Nursing home unit in hospital	210
Other nursing home	220
Facility for mentally retarded	230
Other type of extended care facility	240
<u>Nursing Education Program</u>	
LPN/LVN program	310
Diploma program (RN)	320
Associate degree program	330
Bachelor's and/or higher degree nursing program	340
Other program	350
<u>Public or Community Health Setting</u>	
Official State Health Department	402
Official State Mental Health Agency	405
Official City or County Health Department	410
Combination (official/voluntary) nursing service ..	415
Visiting nurse service (VNS/NA)	420
Home health service unit (hospital-based)	422
Home health agency (non-hospital based)	425
Community mental-health organization or facility (including freestanding psychiatric outpatient clinics)	430
Substance abuse center/clinic	431
Community/neighborhood health center	435
Planned Parenthood/family planning center	440
Day care center	445
Rural health care center	450
Retirement community center	455
Hospice	460
Other	465

	<u>CODE</u>
<u>School Health Service</u>	
Public school system	510
Private or parochial elementary or secondary school ...	520
College or university	530
Other	540
<u>Occupational Health (Employee Health Service)</u>	
Private industry	610
Government	620
Other	630
<u>Ambulatory Care Setting</u>	
Solo practice (physician)	710
Solo practice (nurse)	715
Partnerships (physicians)	720
Partnerships (nurses)	725
Group practice (physicians)	730
Group practice (nurses)	735
Partnership or group practice (mixed group of professionals)	740
Freestanding clinic (physicians)	750
Freestanding clinic (nurses)	755
Ambulatory surgical center	760
Dialysis center/clinic	761
Dental practice	770
Hospital owned off-site clinics	775
Health Maintenance Organization (HMO)	780
Other	790
<u>Insurance Claims/Benefits</u>	
Government	810
State or local agencies	820
Insurance company	830
Private industry/organization	840
<u>Policy, Planning, Regulatory, or Licensing Agency</u>	
Central or regional Federal agency	910
State Board of Nursing	920
Nursing or health professional membership association	930
Health planning agency, non-Federal	940
Other	945
<u>Other</u>	
Correctional facility	950
Private duty in a home setting	955
Home-based self-employment	960
Other	965



**U.S. Department of Health and Human Services
Health Resources and Services Administration
Bureau of Health Professions**