

# Licensed Registered Nurse

State of Tennessee



*This Certifies, that*

**TONYA LYNN BUCHANAN**

*has complied with the official Code of Tennessee and all of the amendatory acts thereto to practice as a*  
**PROFESSIONAL NURSE**

*Therefore, by authority granted in Tennessee Code Annotated Section 63-7-207, the aforesaid is licensed*  
*to practice in the State of Tennessee.*

*This the* 21ST *day of* OCTOBER 2016 .



TENNESSEE DEPARTMENT OF HEALTH

*Eligius J. Kund, MSN, RN*  
EXECUTIVE DIRECTOR, BOARD OF NURSING

*Genevieve OHO*  
DIRECTOR, HEALTH RELATED BOARDS

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