The 2024 National Nursing Workforce Survey

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Mission

The *Journal of Nursing Regulation* provides a worldwide forum for sharing research, evidence-based practice, and innovative strategies and solutions related to nursing regulation, with the ultimate goal of safeguarding the public. The journal maintains and promotes National Council of State Boards of Nursing's (NCSBN's) values of integrity, accountability, quality, vision, and collaboration in meeting readers' knowledge needs.

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Letters will be published at the editor-in-chief's discretion.

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The 2024 National Nursing Workforce Survey

Background: Every 2 years, the National Council of State Boards of Nursing (NCSBN) and the National Forum of State Nursing Workforce Centers (Forum) conduct the largest and most comprehensive national survey of the U.S. nursing workforce. The survey generates data on the supply of registered nurses (RNs), including advanced practice registered nurses (APRNs) and licensed practical nurses/licensed vocational nurses (LPNs/LVNs). The findings provide critical insight into the demographic and practice profiles of the nation's nursing workforce in 2024 and, in doing so, inform both state and national policy. **Purpose:** To provide accurate and reliable data to support sustainable nursing workforce planning and thereby ensure a safe and effective healthcare system. **Methods:** This study used a mixed-mode approach to capture a representative sample of the nursing workforce in the U.S. A survey was mailed to a randomized sample of licensed RNs and LPNs/LVNs in 24 jurisdictions, supplemented by an email-based survey to a randomized sample of licensed RNs and LPNs/LVNs in 18 jurisdictions, and data from Nursys e-Notify for 10 jurisdictions. Data from RN and LPN/LVN respondents were collected between March 25, 2024, and December 31, 2024. Data include, but are not limited to, nurse demographics, educational attainment, employment status, and practice characteristics. **Results:** The total number of active RN and LPN/LVN licenses in the United States at the start of 2024 was 5,641,311 and 968,948, respectively. The median age of both RNs and LPNs/LVNs was 50 years, which reflects pre-pandemic trends; suggesting some older nurses who departed the workforce during the pandemic returned in the ensuing two-year period. The shift also may indicate a more stable workforce, although apparent declines among younger nurses warrant further investigation. An average of 88% of all nurses who maintain licensure are employed in nursing with just under three-quarters working full-time. Hospitals and nursing homes/extended care facilities continue to be the primary practice settings for RNs and LPNs/LVNs. Over the past decade, the proportions of male and Hispanic/Latino nurses have grown, leading to greater diversity in the nursing ranks, but people of color and men are still underrepresented in the workforce relative to the nation's population. The educational attainment of the nursing profession is increasing, with more than 73% of RNs now in possession of a baccalaureate degree or higher. While reported levels of emotional exhaustion, including burnout, and workloads have moderated over the past 2 years, about 40% of nurses report they plan to leave nursing or retire over the next 5 years. Inflation and increased demand for nursing services likely contributed to notable wage growth across the country. **Conclusion:** Amid the emergency phase of the COVID-19 pandemic, the nursing workforce underwent a dramatic shift characterized by heightened workplace burnout, increased workloads, and the departure of hundreds of thousands of experienced RNs and LPNs/LVNs. Since 2022, the workforce has exhibited greater stability, marked by the return of many experienced nurses. While healthcare employers continue to prioritize investments in mental health and other support services for nurses, structural issues, such as short staffing and the accompanying high workloads, that predated the pandemic remain a source of concern for the long-term stability of the nursing workforce. Continued efforts to retain more experienced nurses and to otherwise address longstanding factors associated with nurses' premature intent to leave are necessary to ensure sustainable workforce planning moving forward.

Keywords: U.S. nursing workforce, nursing demographics, nursing education, nursing licensure, nursing employment, nursing diversity, telehealth, COVID-19 pandemic.

The National Council of State Boards of Nursing (NCSBN) has collaborated with the National Forum of State Nursing Workforce Centers to conduct the National Nursing Workforce Survey since 2013. The 2024 survey added one new question pertaining to nurses' intent to leave, but otherwise limited updates to minor formatting/wording changes. Data are comparable to the 2015-2022 datasets, facilitating trend analyses. The present study is the most comprehensive national, randomized survey of its size, including registered nurses (RNs), all four roles of advanced practice registered nurses (APRNs), and licensed practical nurses/licensed vocational nurses (LPNs/LVNs). The evidence generated from the National Nursing Workforce Survey fills a critical gap in supply-side information about all nurses in the United States.

Background

The results of the 2022 National Nursing Workforce Survey (Smiley et al., 2023) captured the COVID-19 pandemic's impact on nurse staffing and burnout in addition to highlighting the profession's growing diversity. Among the most significant findings were

the exit of hundreds of thousands of experienced nurses following the onset of the public health crisis, compounded by the potential for further attrition—nearly a quarter of all remaining nurses reported that they were considering leaving the workforce within the next 5 years (Smiley et al., 2023). Data from both NCSBN and the Health Resources and Services Administration (HRSA) identified high levels of stress and burnout experienced before and further exacerbated by the pandemic as the most likely drivers of these trends (Martin et al., 2023; Smiley et al., 2023; National Center for Health Workforce Analysis, 2024).

Following the release of the 2022 workforce results, several additional publications reported on the current state of the nursing workforce and its projected future (Auerbach et al., 2024; Aiken et al., 2024; Suran, 2023; Health Resources and Services Administration [HRSA], 2024; U.S. Bureau of Labor Statistics [BLS], 2024). In particular, several notable studies focused on how the lack of safe working environments and staffing conditions (Aiken et al., 2024; Trang, 2023; Bailey, 2022) could potentially influence nurses to leave bedside or direct patient care (Auerbach et al., 2024). Furthermore, multiple scholars also reported on state-level variations among nurse-to-population ratios and regional differences in supply adequacy within states, pointing to a more nuanced picture of the nursing workforce's distribution across the United States (U.S. Census Bureau, 2024; HRSA, 2024; Mercer, 2024). Looking forward, BLS projects the number of nurses will grow 6% from 2023 to 2033, but whether that will be sufficient to meet future needs remains unclear. HRSA reports that demand will exceed supply for both RNs (9%) and LPNs/LVNs (12%) by 2036, while Auerbach and colleagues project that the RN workforce will increase from 3.3 million full-time equivalent (FTE) employees to more than 4.5 million by 2035, which is a comparative surplus (BLS, 2024; HRSA, 2024; Auerbach et al., 2024).

The 2022 workforce study also revealed higher proportions of nurses who reported feeling emotionally drained, burned out, and fatigued (Smiley et al., 2023). These indicators were reported across all nurse employment profiles, including nurses from historically marginalized communities, travel nurses, APRNs, and nursing faculty, but were particularly common among early career nurses (O'Hara & Reid, 2024; Kaminski-Ozturk & Reid, 2024; Martin et al., 2024; Smiley et al., 2024; Zhong et al., 2024). Additionally, more than 60% of all nurses reported that their workload increased due to the pandemic (Smiley et al., 2023). During a similar timeframe, Aiken et al. (2023) also highlighted that many nurses rated their hospitals negatively on patient safety, often attributing their low marks to poor work environments, lack of nurse staffing, and low confidence in management. Similarly, the National Center for Health Workforce Analysis (2024) found high measures of job dissatisfaction, with the greatest declines among RNs working in hospitals and RNs with patient care responsibilities. These commonly studied factors of burnout, insufficient staffing, and emotional exhaustion have been shown to be key factors associated with nurses' intent to leave (Muir et al., 2024).

The 2022 National Nursing Workforce Survey also revealed that the diversity of the nursing population has grown, with an increase in the proportion of Hispanic/Latino and male nurses (Smiley et al., 2023). Nonetheless, further analysis revealed that despite growth in the racial diversity of the RN workforce, the proportion of nurses from historically marginalized communities has not kept pace with growth documented in the broader U.S. population; rather, the extent of underrepresentation across racial categories in the RN workforce has largely grown over the past decade (Smiley et al., 2024; U.S. Census Bureau, 2021; Smiley et al., 2023). The diversification of the nursing workforce remains a critical priority to ensure culturally competent care that improves access, quality of care, and patient outcomes for underserved populations now and in the future (National Academy of Medicine, 2021; Hynson et al., 2022). Proportional increases in enrollment among racial and ethnic minorities in nursing baccalaureate programs between 2017 and 2023 (33% to 46%) suggest potential for continued growth (American Association of Colleges of Nursing, 2024); however, a deeper analysis of these trends underscores that further investments in education are necessary (Smiley et al., 2024).

The 2022 National Nursing Workforce Survey revealed that the COVID-19 pandemic heightened pre-existing staffing and burnout concerns that threatened the long-term sustainability of the nursing workforce and thereby patient safety. Comprehensive and timely data on the supply of nurses is critical to inform policymakers as they seek to address these pressing concerns; thus, the following report lays out, in detail, important updates on these trends from the 2024 National Nursing Workforce Survey.

Methods

Sample and Data Sources

A mixed-mode sampling plan was employed to capture data for the 2024 National Nursing Workforce Survey. Nurses who enroll in Nursys e-Notify receive regular automated license and discipline notifications. As part of the registration process and periodically throughout each subsequent the year, the enrolled nurse is also prompted and required to report and keep-up-to-date baseline workforce characteristics. After a comprehensive review of data collected through the e-Notify system, it was determined that 10 participating jurisdictions had entered data of sufficient volume and quality that a separate survey of nurses was unnecessary. Data for 18 jurisdictions were obtained from an email survey of the state nurse membership. Data for Hawaii were taken from an internal state survey shared with NCSBN, and data for the 24 remaining jurisdictions were collected through a direct mail survey that offered nurses the opportunity to respond via a prepaid business reply envelope or by accessing an online version of the survey via a

QR code. In total, 53 jurisdictions comprised the final sample, including all 50 U.S. states, the District of Columbia, the Northern Mariana Islands, and Guam.

Mailing Address Lists

For the U.S. jurisdictions and territories involved in the mailout portion of the survey, all RNs and LPNs/LVNs with an active license were eligible survey participants. The sample was drawn from Nursys, NCSBN's licensure database. This database contains basic demographic and licensure information for RN and LPN/LVN licensees. American Samoa and the Virgin Islands chose not to participate in this survey.

As of December 31, 2023, the total number of active RN licenses in the United States was 5,641,311, and the total number of active LPN/LVN licenses was 968,948 (NCSBN, 2024). Separate RN and LPN/LVN samples stratified by state were randomly selected from among RN and LPN/LVN licensees. Surveys were mailed to 95,567 RNs and 96,354 LPNs/LVNs. Table 1 presents the sampling by jurisdiction/state for the mailout portion of the survey. Each jurisdiction is listed with the actual number of active licensees at the time of sampling. Approximately 750 nurses needed to respond from each jurisdiction to construct a 95% confidence interval (CI) of ± 3.6%. To calculate the number of surveys that needed to be mailed to reach the target survey response, response rates to the online and paper surveys from the previous 2022 survey administration were used as estimates. For example, in 2022, Montana had a 26.1% response rate for the RN survey. Given this estimated response rate, 3,112 RNs in Montana were selected to be survey recipients in 2024 in order to achieve the target of 750 survey responses. The actual response from Montanan RNs to the current survey (i.e., the number of responses returned) was 694, a response rate of 22.3%.

Email Lists

For the 18 jurisdictions in the email portion of this survey, separate RN and LPN/LVN samples stratified by state were randomly selected from among RN and LPN/LVN licensees. Surveys were initially emailed to 243,367 nurses, including 121,685 RNs and 121,682 LPNs/LVNs. Of this total, 5,024 were undeliverable, resulting in a final total of 238,343 email surveys. Table 2 presents the sampling by jurisdiction/state for the email portion of the survey. We again targeted 750 responses and selected up to 8,000 nurses per jurisdiction for the email survey.

e-Notify

For the 10 jurisdictions in the e-Notify portion, the data extracted were from September 1, 2022, to October 1, 2024, and all nurse records were selected for inclusion. Table 3 shows the number of nurses who contributed data to the e-Notify system. Of note, the number of e-Notify participants can, at times, exceed the number of active licenses in a jurisdiction. This is likely an artifact of several factors, including retirement, career change, nurse migration patterns over time, or even unique nurses registering multiple accounts within the e-Notify database using different email addresses. Importantly, for this analysis, duplicate rows by individual nurse registrants were identified and removed; thus, individual nurses registered in e-Notify only contribute one record in the sample.

Hawaii

The data for Hawaii were taken from the *Hawaii Workforce Supply Survey.* The survey was sent to all licensed nurses in Hawaii, and Table 4 shows the number of nurses who contributed data.

TABLE 1

Mail Survey Responses

Jurisdiction	RNs				LPNs/LVNs			
	No. of Active Licenses	No. of Surveys Mailed	No. of Responses	Total Response Rate	No. of Active Licenses	No. of Surveys Mailed	No. of Responses	Total Response Rate
AK	20,800	3,731	663	17.8%	774	602	74	12.3%
CA	523,864	4,870	682	14.0%	110,453	7,932	721	9.1%
CT	80,219	4,601	716	15.6%	12,736	6,637	650	9.8%
IA	58,116	3,846	733	19.1%	8,960	4,310	669	15.5%
IL	235,502	5,208	754	14.5%	24,959	6,048	737	12.2%
IN	123,464	4,237	863	20.4%	21,880	4,573	774	16.9%
KS	53,256	4,360	810	18.6%	9,262	4,808	722	15.0%
KY	74,145	5,068	714	14.1%	12,535	5,859	737	12.6%

Mail Survey Responses *(continued)*

Jurisdiction	RNs				LPNs/LVNs			
	No. of Active Licenses	No. of Surveys Mailed	No. of Responses	Total Response Rate	No. of Active Licenses	No. of Surveys Mailed	No. of Responses	Total Response Rate
MA	161,279	5,208	726	13.9%	18,528	6,303	815	12.9%
ME	28,785	3,927	702	17.9%	1,742	1,628	277	17.0%
MI	173,905	3,827	694	18.1%	21,206	4,747	668	14.1%
MN	134,563	3,807	672	17.7%	18,224	3,676	614	16.7%
MT	23,451	3,112	694	22.3%	2,297	2,149	443	20.6%
ND	17,894	3,676	760	20.7%	3,182	2,304	405	17.6%
NE	33,044	3,659	719	19.7%	4,943	3,623	718	19.8%
PA	241,328	4,121	641	15.6%	52,292	4,777	679	14.2%
SC	84,701	4,902	693	14.1%	12,705	5,906	659	11.2%
SD	19,800	3,659	737	20.1%	2,736	2,649	453	17.1%
TN	115,507	5,357	784	14.6%	29,620	6,198	819	13.2%
VA	118,430	5,245	776	14.8%	26,479	6,098	732	12.0%
VT	11,958	3,846	743	19.3%	2,084	1,973	254	12.9%
WI	118,033	3,456	652	18.9%	10,461	3,377	535	15.8%
Guam	1,053	930	143	15.4%	166	142	16	11.3%
Northern Mariana Islands	4,163	914	75	8.2%	61	35	3	8.6%
Total	2,457,260	95,567	16,146	16.9%	408,285	96,354	13,174	13.7%

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse; RN = registered nurse. States are listed by their U.S. Postal Service abbreviation.

TABLE 2

Email Survey Responses

Jurisdiction	RNs				LPNs/LVNs			
	No. of Active Licenses	No. of Surveys Emailed	No. of Responses	Total Response Rate	No. of Active Licenses	No. of Surveys Emailed	No. of Responses	Total Response Rate
AL	104,695	2,475	397	16.0%	19,634	2,475	99	4.0%
AR	46,960	7,837	464	5.9%	13,940	7,837	505	6.4%
AZ	111,992	8,000	814	10.2%	10,973	8,000	892	11.2%
CO	87,295	7,736	840	10.9%	8,144	7,736	748	9.7%
DC	43,947	4,756	616	13.0%	2,688	4,755	138	2.9%
FL	375,078	7,988	467	5.8%	60,892	7,987	486	6.1%
GA	143,998	8,000	606	7.6%	28,774	7,999	669	8.4%
ID	27,297	5,617	926	16.5%	3,452	5,617	368	6.6%
MD	89,483	8,000	812	10.2%	11,260	7,999	822	10.3%
MS	52,355	8,000	479	6.0%	14,547	8,000	639	8.0%
NH	26,837	4,193	752	17.9%	3,102	4,193	91	2.2%
NJ	146,031	8,000	472	5.9%	23,959	8,000	526	6.6%
NY	439,616	8,000	562	7.0%	73,874	7,999	569	7.1%
OH	221,760	8,000	475	5.9%	53,501	8,000	449	5.6%
OK	53,376	8,000	720	9.0%	15,833	8,000	707	8.8%
OR	84,255	6,876	769	11.2%	6,343	6,876	761	11.1%

Email Survey Responses *(continued)*

Jurisdiction	RNs				LPNs/LVNs			
	No. of Active Licenses	No. of Surveys Emailed	No. of Responses	Total Response Rate	No. of Active Licenses	No. of Surveys Emailed	No. of Responses	Total Response Rate
RI	29,974	5,085	734	14.4%	2,837	5,085	199	3.9%
UT	44,324	5,125	820	16.0%	2,849	5,124	208	4.1%
Total	2,129,273	121,685	11,725	9.6%	356,602	121,682	8,876	7.3%

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse; RN = registered nurse. States are listed by their U.S. Postal Service abbreviation.

TABLE 3

e-Notify Data, September 1, 2022–October 1, 2024

Jurisdiction	RN		LPN/LVN	
	No. of Active Licenses	No. of e-Notify Participants	No. of Active Licenses	No. of e-Notify Participants
DE	19,658	22,051	3,186	2,707
LA	66,616	40,411	22,072	13,333
MO	118,954	128,404	24,129	21,318
NC	158,174	30,776	23,041	2,805
NM	33,260	27,270	2,452	1,477
NV	58,554	43,204	4,732	2,554
TX	401,653	256,773	103,104	50,758
WA	120,813	60,259	11,010	3,785
WV	36,539	16,674	7,696	3,270
WY	8,942	7,002	863	496
Total	1,023,163	632,824	202,285	102,503

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse; RN = registered nurse. States are listed by their U.S. Postal Service abbreviation. Unique nurses may register multiple accounts within the e-Notify database using different email addresses. Thus, some jurisdictions have duplicate values resulting in coverage proportions >100%. For this analysis, duplicate rows by individual nurse registrants were identified and removed prior to analysis. Only the most recently updated e-Notify record in our collection timeframe was included for accuracy and to avoid inflating any estimates.

TABLE 4

Hawaii Survey Response

Jurisdiction	RN			LPN/LVN		
	No. of Active Licenses	No. of Responses	Total Response Rate	No. of Active Licenses	No. of Responses	Total Response Rate
Hawaii	31,615	14,538	46.0%	1,776	871	49.0%

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse; RN = registered nurse.

Survey Instrument and Materials

The survey instrument is based on the Forum's Nurse Supply Minimum Dataset (MDS), which was approved in 2009 after an intensive process of consensus-building and data compilation to collect data on the nursing workforce at the state level. The MDS was updated by the Forum in 2016 to account for the transformations that had occurred in healthcare and nursing over the previous 7 years. The MDS instrument was last revised in December 2024, to better align with the nursing workforce. (https://nursingworkforcecenters.org/dataset/)

Additionally, the 2024 survey instrument includes questions about employment change over the past 2 years, intent to leave nursing, multistate licensure, telehealth, and travel nursing. The survey was a 4-page Scantron fillable document with 37 questions

(Appendix A). Data elements from the latest revision of the MDS were incorporated, resulting in the following changes to the survey between the 2022 and 2024 waves of data collection:

- The question about the impact of the COVID-19 pandemic was updated to focus on general employment changes over the past 2 years.
- For those who indicated they left nursing, a follow-up question was asked to ascertain the reasons driving their decision.
- The previously binary (yes or no) intent to leave or retire question, was amended to allow "yes" respondents to specify retirement or intent to leave not due to retirement.
- The questions regarding the proportion of time doing telehealth within state borders, outside state borders, etc., were collapsed into a single yes/no question about telehealth practice.

Procedures

Mailing Address Lists

The Western Institutional Review Board granted approval for the current study. A unique identification number was generated and assigned to each sampled participant. The identification number was only used to record that the survey had been returned. This prevented unnecessary and expensive duplicate mailings to those who already returned a completed survey. A unique access code identifier was also provided for nurses to submit the survey online. Once materials were developed and the sampling file was complete, surveys were distributed over a 27-week period starting the week of March 25, 2024, that included the following steps:

- Week 1: A cover letter and paper survey were mailed via first-class U.S. mail to all nurses selected to participate. The letter included a URL and QR code to take the survey online.
- Week 11: For the nurses who had not responded, a cover letter reminder and paper survey were mailed via first-class U.S. mail.
- Week 22: For nurses who still had not responded, an additional cover letter and paper survey were mailed via first-class U.S. mail.
- Week 27: Participants could submit their responses via mail or online until the survey closed on September 30, 2024. Once the survey was closed, the final data file was compiled separately for RNs and LPNs/LVNs.

At weeks 1, 11, and 22, a prepaid business reply envelope was included in the mailing. Survey response data are kept on department-secured servers. NCSBN's research staff, four key members of the Forum, and key personnel at Scantron and its strategic partner, NCS Pearson, had initial access to the identifiable data. Scantron and NCS Pearson no longer have access to identifiable data.

Email Lists

Beginning in April, Qualtrics survey invitations were emailed to the nurses selected for the email portion of the study. Follow-up reminders were sent to nonrespondents, along with respondents with incomplete surveys on a weekly basis. Participants could submit their responses online until December 2024.

e-Notify

Data for the e-Notify portion of the survey were collected from the system in December 31, 2024.

Nonresponse

A formal nonresponse bias analysis was conducted after the survey closed and weighting was applied prior to the final analysis of the responses. The weights adjust the distribution across states, age, and gender but sum to the actual number of RNs and LPNs/LVNs in the subsets of completed responses.

To create the weights, an analysis of basic demographic data (i.e., gender, age, and race/ethnicity) for all RN and LPN/LVN licensees sampled from the Nursys database was used to compare survey respondents to survey nonrespondents. Results revealed that nurses who were White/Caucasian, female, and age 55 years or older may have been slightly overrepresented in both the RN and LPN/LVN samples. Because of missing or incomplete data on race/ethnicity, only gender and age were used to make nonresponse weighting adjustments. Additionally, because sampling was stratified by state, to prevent smaller states from being overrepresented in the overall analysis, a weighting variable was constructed to adjust for differing nursing population sizes across states. A description of this process can be found in Appendix B.

Analysis

Mailing Address Lists

At the close of the survey, 16,146 of 95,567 successfully delivered RN surveys were completed and returned, yielding a response rate of 16.9%. There were 13,174 of 96,354 successfully delivered LPN/LVN surveys returned, resulting in a 13.7% response rate.

Email Lists

A total of 121,685 RNs and 121,682 LPNs/LVNs were randomly selected for participation in the email portion of the study. The overall response rate for RNs was 9.6% (n = 11,725), and the overall response rate for LPNs/LVNs was 7.3% (n = 8,876).

e-Notify

The data for a total of 632,824 RNs and 102,503 LPNs/LVNs were collected in the e-Notify portion of the study.

For an accurate and comprehensive view of the statistics drawn from the sample, the number of actual valid answers to each question is reported for every table. Missing data were not imputed; hence, the presented statistics represent the actual responses from participants who responded to each respective survey item. If a participant did not respond to a certain item, they were not part of the analysis for that item. Additionally, some tables display data for all responding nurse licensees while other tables display data for employed nurses. If a table is specific to nurses employed in nursing, it is explicitly stated. Many tables include bar graphs to help readers easily visualize and comprehend the data presented.

Population Estimate

For each question on the survey, the listed frequencies reflect the nonresponse weighting adjustments. For some of the questions, an additional set of frequencies is shown that display the data scaled up to reflect estimates of the nursing population in the subgroup identified. For example, the 473,631 males reported in the 2024 column of Table 5 reflect the number of male respondents adjusted to the population level of the number of RNs. These updates include both the nonresponse weighting adjustments and further adjustments to the population number to account for nurses having licenses in multiple states.

RN Results

Demographics

Gender

From 2015 to 2022, the proportion of male nurses grew from 8.0% to 11.2%, but in 2024 it decreased to 10.4% (Table 5).

TABLE 5

Gender Distribution of RNs, 2015–2024

Gender	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents										
	***N* = 43,330.9**		***N* = 48,084.9**		***N* = 41,698.8**		***N* = 273,894.8**		***N* = 714,837.2**	
Male	3,459.6	8.0	4,369.3	9.1	3,915.2	9.4	30,555.8	11.2	73,966.3	10.4
Female	39,871.4	92.0	43,715.5	90.9	37,739.9	90.5	242,508.4	88.5	638,203.1	89.3
Nonbinary	-	-	-	-	43.6	0.1	830.6	0.3	2,667.7	0.4
U.S. RN Population										
Male	277,542	8.0	354,453	9.1	391,141	9.4	487,526	11.2	473,631	10.4
Female	3,198,650	92.0	3,546,321	90.9	3,770,336	90.5	3,869,290	88.5	4,086,624	89.3
Nonbinary	-	-	-	-	4,356	0.1	13,252	0.3	17,082	0.4

Note. RN = registered nurse. "Other" was added as a response option to the gender question with the 2020 survey and was renamed "nonbinary" in 2022.

Age

In the wake of the COVID-19 pandemic, the percentage of RNs aged 55 years or older declined from 42.5% in 2020 to 31.2% in 2022. In 2024, that percentage rose to 39.9%, returning to pre-COVID levels. The percentage of RNs younger than 30 years of age declined from 11.1% in 2022 to 7.9% in 2024 (Table 6 and Figure 1).

TABLE 6

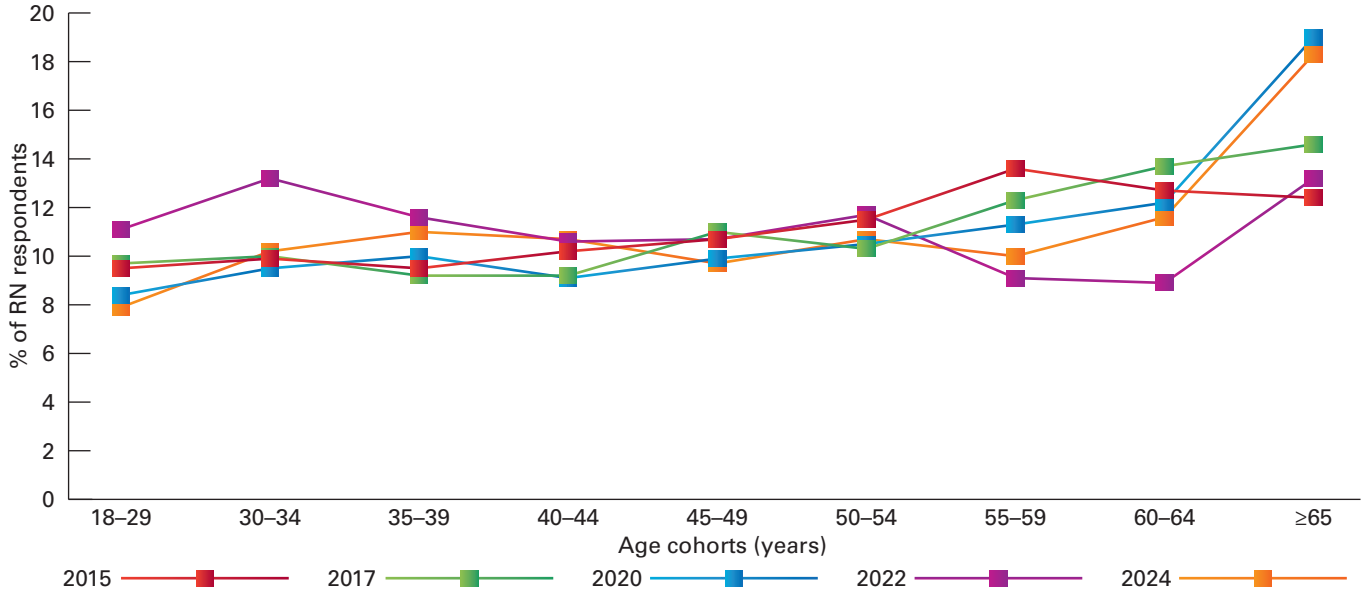
Age Distribution of RNs, 2015–2024

Age, y	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents										
	***N* = 41,258.6**		***N* = 47,527.3**		***N* = 39,899.2**		***N* = 261,161.4**		***N* = 698,946.3**	
18–29	3,905.2	9.5	4,594.5	9.7	3,349.5	8.4	29,085.6	11.1	54,837.8	7.9
30–34	4,098.0	9.9	4,762.8	10.0	3,792.0	9.5	34,393.8	13.2	71,037.5	10.2
35–39	3,928.1	9.5	4,390.6	9.2	4,006.2	10.0	30,170.4	11.6	77,138.4	11.0
40–44	4,200.7	10.2	4,356.7	9.2	3,645.9	9.1	27,756.4	10.6	74,957.9	10.7
45–49	4,398.2	10.7	5,250.7	11.1	3,956.5	9.9	27,855.5	10.7	67,707.5	9.7
50–54	4,724.8	11.5	4,914.9	10.3	4,191.6	10.5	30,514.5	11.7	74,743.6	10.7
55–59	5,622.4	13.6	5,834.4	12.3	4,502.0	11.3	23,695.5	9.1	69,825.8	10.0
60–64	5,254.9	12.7	6,489.8	13.7	4,884.2	12.2	23,272.9	8.9	80,932.1	11.6
≥65	5,126.3	12.4	6,932.9	14.6	7,571.3	19.0	34,416.9	13.2	127,765.6	18.3
U.S. RN Population										
18–29	313,291	9.5	372,716	9.7	334,626	8.4	464,070	11.1	351,145	7.9
30–34	328,759	9.9	386,374	10.0	378,833	9.5	548,763	13.2	454,877	10.2
35–39	315,127	9.5	356,175	9.2	400,232	10.0	481,378	11.6	493,943	11.0
40–44	337,000	10.2	353,430	9.2	364,237	9.1	442,861	10.6	479,980	10.7
45–49	352,843	10.7	425,953	11.1	395,267	9.9	444,442	10.7	433,553	9.7
50–54	379,041	11.5	398,712	10.3	418,754	10.5	486,867	11.7	478,608	10.7
55–59	451,051	13.6	473,303	12.3	449,764	11.3	378,068	9.1	447,118	10.0
60–64	421,574	12.7	526,468	13.7	487,947	12.2	371,326	8.9	518,235	11.6
≥65	411,256	12.4	562,414	14.6	756,397	19.0	549,131	13.2	818,125	18.3

Note. RN = registered nurse.

FIGURE 1

Age Distribution of RNs, 2015–2024



Note. RN = registered nurse.

Gender by Age

The distribution of female RNs was relatively even across most age strata, but the largest cohort of female nurses was the oldest age group (≥65 years). This finding is different than the distribution of male nurses, which tended toward the middle-aged groups, and nonbinary genders, where the age distribution skewed toward younger age groups (Table 7).

TABLE 7

Gender of RNs by Age Distribution, 2024: Weighted Sample Values

	Age, y, *n* (%)									
Gender	**18–29**	**30–34**	**35–39**	**40–44**	**45–49**	**50–54**	**55–59**	**60–64**	**≥65**	***n***
Male	6,399.6 (9.0)	9,517.3 (13.3)	10,177.0 (14.2)	7,504.7 (10.5)	8,455.7 (11.8)	8,274.3 (11.6)	7,637.7 (10.7)	5,112.6 (7.2)	8,386.7 (11.7)	71,465.6
Female	47,728.8 (7.7)	60,390.8 (9.8)	65,696.8 (10.6)	66,193.6 (10.7)	58,194.4 (9.4)	65,212.5 (10.6)	61,219.7 (9.9)	74,757.7 (12.1)	118,270.4 (19.2)	617,664.6
Nonbinary	303.4 (12.8)	540.1 (22.7)	258.9 (10.9)	226.3 (9.5)	434.7 (18.3)	118.5 (5.0)	70.4 (3.0)	152.9 (6.4)	269.6 (11.4)	2,374.8
Total	54,431.9 (7.9)	70,448.1 (10.2)	76,132.8 (11.0)	73,924.6 (10.7)	67,084.8 (9.7)	73,605.3 (10.7)	68,927.8 (10.0)	80,023.1 (11.6)	126,927.6 (18.4)	691,505.0

*Note. R*N = registered nurse. "Other" was added as a response option to the gender question with the 2020 survey and was renamed "nonbinary" in 2022.

Race

From 2022 to 2024, racial diversity among RNs increased. The percentage of respondents who identified as White/Caucasian declined from 80.0% to 76.6%, while the percentage of Black/African American RNs rose from 6.3% to 8.6%. Those marking "other" increased over the same period from 3.0% to 3.5% (Table 8).

TABLE 8

Race of RNs, 2017–2024

Race	2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 47,966.3**		***N* = 41,702.0**		***N* = 272,713.6**		***N* = 719,416.3**	
American Indian or Alaska Native	176.0	0.4	194.1	0.5	1,209.8	0.4	3,814.7	0.5
Asian	3,605.6	7.5	2,996.3	7.2	20,036.9	7.4	56,832.8	7.9
Black/African American	2,995.9	6.2	2,800.7	6.7	17,273.7	6.3	61,489.7	8.6
Native Hawaiian or Other Pacific Islander	226.3	0.5	175.9	0.4	1,136.9	0.4	2,381.1	0.3
Middle Eastern/North African	-	-	89.4	0.2	-	-	-	-
White/Caucasian	38,766.1	80.8	33,595.1	80.6	218,133.9	80.0	551,146.1	76.6
Other	1,367.8	2.9	967.7	2.3	8,133.1	3.0	25,031.2	3.5
More than one race category selected	828.5	1.7	882.8	2.1	6,789.3	2.5	18,720.7	2.6
U.S. RN Population								
American Indian or Alaska Native	14,276	0.4	19,391	0.5	19,303	0.4	24,427	0.5
Asian	292,497	7.5	299,340	7.2	319,695	7.4	363,919	7.9
Black/ African American	243,032	6.2	279,799	6.7	275,607	6.3	393,739	8.6
Native Hawaiian or Other Pacific Islander	18,362	0.5	17,573	0.4	18,139	0.4	15,247	0.3
Middle Eastern/North African	-	-	8,931	0.2	-	-	-	-
White/Caucasian	3,144,812	80.8	3,356,257	80.6	3,480,388	80.0	3,529,169	76.6
Other	110,960	2.9	96,676	2.3	129,766	3.0	160,283	3.5
More than one race category selected	67,214	1.7	88,195	2.1	108,325	2.5	119,875	2.6

Note. RN = registered nurse. Respondents were asked to select all that applied. The responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

Hispanic/Latino Ethnicity

Between 2015 and 2022, the proportion of RNs identifying as Hispanic or Latino steadily increased from 3.6% to 6.9%. That steady increase continued in 2024, with 7.2% of RNs identifying as Hispanic or Latino (Table 9).

TABLE 9

Hispanic or Latino Ethnicity of RNs, 2015–2024

Ethnicity	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Population	***N* = 45,989.3**		***N* = 47,852.6**		***N* = 41,483.3**		***N* = 271,920.8**		***N* = 710,889.9**	
Hispanic or Latino origin	1,654.0	3.6	2,528.1	5.3	2,335.9	5.6	18,780.0	6.9	51,220.9	7.2
Not of Hispanic or Latino origin	44,335.3	96.4	45,324.5	94.7	39,147.4	94.4	253,140.8	93.1	659,669.1	92.8
U.S. RN Population										
Hispanic or Latino origin	136,707	3.6	205,088	5.3	233,364	5.6	299,640	6.9	327,984	7.2
Not of Hispanic or Latino origin	3,556,764	96.4	3,676,844	94.7	3,910,949	94.4	4,038,933	93.1	4,224,078	92.8

Note. RN = registered nurse. In the 2015 survey, the Hispanic/Latino origin and race categories were combined into one question. The Hispanic/Latino origin and race categories were separated for the 2017 survey and those that followed.

Gender by Race

Male RNs tend to be more racially diverse than their female colleagues. For instance, about 78% of female RNs identified as White/Caucasian, while approximately 71% of their male colleagues identified as such. In addition, male RNs identified as Asian (12.8%) almost twice as often as female RNs (7.3%) (Table 10).

TABLE 10

Gender of RNs by Race, 2024: Weighted Sample Values

Gender	Race, *n* (%)							
	American Indian or Alaska Native	Asian	Black/African American	Native Hawaiian or Other Pacific Islander	White / Caucasian	Other	More than one race	*n*
Male	284.8 (0.4)	9,370.1 (12.8)	6,488.0 (8.9)	567.3 (0.8)	51,764.0 (70.7)	2,898.7 (4.0)	1,888.4 (2.6)	73,261.3
Female	3,343.1 (0.5)	46,579.3 (7.3)	54,380.4 (8.6)	1,642.4 (0.3)	493,970.3 (77.8)	18,817.7 (3.0)	16,513.7 (2.6)	635,246.8
Nonbinary	7.9 (0.3)	160.1 (6.0)	134.3 (5.0)	0.6 (0.0)	1,713.2 (64.2)	551.2 (20.7)	99.7 (3.7)	2,667.1
Total	3,635.8 (0.5)	56,109.6 (7.9)	61,002.7 (8.6)	2,210.3 (0.3)	547,447.5 (77.0)	22,267.5 (3.1)	18,501.7 (2.6)	711,175.2

Note. RN = registered nurse. "Other" was added as a response option to the gender question with the 2020 survey and renamed "nonbinary" in 2022. Respondents to the race question were asked to select all that applied. The responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

Age by Race

While younger RNs tended to be more racially diverse than older nurses, the youngest cohort (age 18–29 years) was less diverse than slightly older cohorts. RNs between the ages of 30 and 54 years were the most diverse of all age groups, and each age group was similar in racial composition (Table 11).

TABLE 11

Age of RNs by Race, 2024: Weighted Sample Values

	Race, *n* (%)							
Age, y	American Indian or Alaska Native	Asian	Black/African American	Hawaiian or Other Pacific Islander	White/ Caucasian	Other	More than one race	*n*
18–29	172.7 (0.3)	4,757.2 (8.7)	3,316.5 (6.1)	33.1 (0.1)	42,359.9 (77.6)	1,884.2 (3.5)	2,090.3 (3.8)	54,613.9
30–34	466.4 (0.7)	8,500.2 (12.0)	5,942.6 (8.4)	144.1 (0.2)	49,162.6 (69.6)	3,304.9 (4.7)	3,133.4 (4.4)	70,654.1
35–39	465.3 (0.6)	10,271.5 (13.4)	8,087.4 (10.6)	553.7 (0.7)	51,344.5 (67.0)	3,479.9 (4.5)	2,394.7 (3.1)	76,597.0
40–44	400.1 (0.5)	7,105.1 (9.5)	9,101.6 (12.2)	102.9 (0.1)	52,975.1 (71.0)	2,445.9 (3.3)	2,500.0 (3.4)	74,630.7
45–49	447.5 (0.7)	5,409.4 (8.0)	8,035.0 (11.9)	329.2 (0.5)	48,867.4 (72.4)	2,595.7 (3.9)	1,809.7 (2.7)	67,493.7
50–54	370.8 (0.5)	7,029.0 (9.4)	7,383.3 (9.9)	417.9 (0.6)	54,732.2 (73.4)	2,936.6 (3.9)	1,706.5 (2.3)	74,576.3
55–59	364.3 (0.5)	4,390.2 (6.3)	5,594.1 (8.0)	288.8 (0.4)	56,304.3 (81.0)	1,591.2 (2.3)	1,024.0 (1.5)	69,556.9
60–64	592.6 (0.7)	3,020.3 (3.8)	5,162.6 (6.4)	109.4 (0.1)	67,809.7 (84.2)	2,240.7 (2.8)	1,618.4 (2.0)	80,553.7
≥65	342.1 (0.3)	4,122.0 (3.2)	6,410.0 (5.0)	217.1 (0.2)	111,335.3 (87.6)	2,668.2 (2.1)	1,963.9 (1.6)	127,058.6
Total	3,621.7 (0.5)	54,604.8 (7.9)	59,033.2 (8.5)	2,196.2 (0.3)	534,891.2 (76.9)	23,147.1 (3.3)	18,240.7 (2.6)	695,734.9

Note. RN = registered nurse. Respondents to the race question were asked to select all that applied. The responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

Education

Type of Nursing Degree or Credentials for First U.S. Nursing License

Respondents were asked what credential first authorized them for RN licensure. Answers ranged from vocational/practical certificate, diploma, associate degree in nursing (ADN), baccalaureate degree (bachelor of science in nursing [BSN]), or master's degree in nursing (master of science in nursing [MSN]). From 2015 to 2024, the proportion of RNs whose first credential was a diploma or an ADN both decreased, from 14.3% to 8.6%, and 38.5% to 34.2% respectively. Over the same time frame, RNs first prepared with a BSN increased from 39% to 46% in 2024, while those prepared with a MSN increased from 2.8% to 5.5% (Table 12 and Figure 2).

TABLE 12

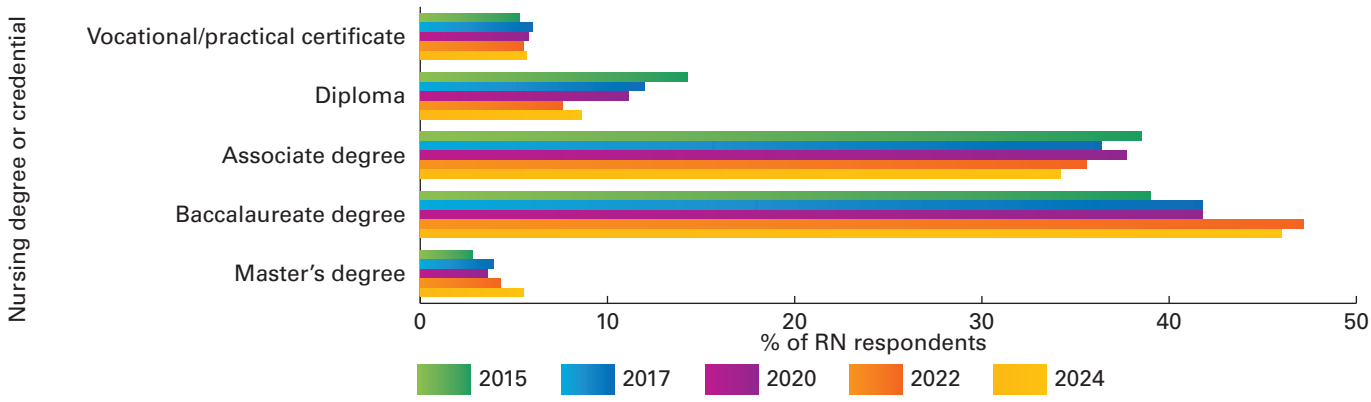
Type of Nursing Degree or Credential of RNs for First U.S. Nursing License, 2015–2024

Nursing Degree or Credential	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 45,758.5**		***N* = 47,650.0**		***N* = 41,383.6**		***N* = 271,402.2**		***N* = 712,957.3**	
Vocational/practical certificate	2,442.1	5.3	2,850.6	6.0	2,382.8	5.8	14,898.2	5.5	40,742.9	5.7
Diploma	6,539.3	14.3	5,708.1	12.0	4,581.2	11.1	20,484.5	7.6	61,234.7	8.6
Associate degree	17,625.9	38.5	17,332.5	36.4	15,611.5	37.7	96,490.5	35.6	244,027.8	34.2
Baccalaureate degree	17,853.4	39.0	19,922.7	41.8	17,313.6	41.8	127,989.8	47.2	328,043.4	46.0
Master's degree	1,297.9	2.8	1,836.0	3.9	1,494.5	3.6	11,539.2	4.3	38,908.5	5.5
U.S. RN Population										
Vocational/practical certificate	195,916	5.3	231,247	6.0	238,049	5.8	237,705	5.5	260,890	5.7
Diploma	524,607	14.3	463,060	12.0	457,676	11.1	326,836	7.6	392,106	8.6
Associate degree	1,414,020	38.5	1,406,062	36.4	1,559,638	37.7	1,539,534	35.6	1,562,590	34.2
Baccalaureate degree	1,432,271	39.0	1,616,186	41.8	1,729,683	41.8	2,042,113	47.2	2,100,570	46.0
Master's degree	104,121	2.8	148,942	3.9	149,305	3.6	184,111	4.3	249,144	5.5

Note. RN = registered nurse.

FIGURE 2

Type of Nursing Degree or Credential of RNs for First U.S. Nursing License, 2015–2024



Note. RN = registered nurse.

Type of Nursing Degree or Credential for First U.S. Nursing License by Age

In 2024, baccalaureate degrees continued to be the most common degree for initial U.S. licensing for nurses younger than 40 years. In 2024, diplomas, associate degrees, and vocational/practical certificates were more common among older nurses, with about 23% of RNs aged 65 years or older holding a diploma when first licensed in the United States (Table 13).

TABLE 13

Type of Nursing Degree or Credential of RNs for First U.S. Nursing License by Age, 2024: Weighted Sample Values

Nursing Degree or Credential	Age, y, *n* (%)									
	18–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	≥65	Total
Vocational/practical certificate	1,534.6 (2.9)	2,606.7 (3.9)	3,958.2 (5.6)	4,580.7 (6.7)	4,970.3 (8.0)	4,999.5 (7.3)	4,284.4 (6.7)	5,546.1 (7.3)	6,844.0 (5.6)	39,324.4 (6.0)
Diploma	1,358.2 (2.6)	1,948.4 (2.9)	2,958.6 (4.2)	2,925.7 (4.3)	2,870.6 (4.6)	4,152.8 (6.1)	5,599.6 (8.7)	10,182.7 (13.5)	27,496.2 (22.6)	59,492.7 (9.1)
Associate degree	12,191.6 (22.9)	17,956.0 (26.8)	22,896.6 (32.1)	27,184.3 (39.7)	25,826.3 (41.4)	27,933.9 (40.9)	26,597.6 (41.3)	30,945.1 (41.0)	44,485.2 (36.6)	236,016.5 (36.2)
Baccalaureate degree	38,160.4 (71.7)	44,557.0 (66.4)	41,524.5 (58.2)	33,725.6 (49.3)	28,679.8 (46.0)	31,174.1 (45.7)	27,902.5 (43.3)	28,871.5 (38.2)	42,730.3 (35.2)	317,325.6 (48.7)
n	53,244.7	67,068.1	71,337.8	68,416.3	62,346.9	68,260.3	64,384.1	75,545.4	121,555.7	652,159.3

Note. RN = registered nurse.

Highest Level of Nursing Education

Respondents were asked their highest level of nursing education, which ranged from a diploma in nursing to an ADN, BSN, MSN, PhD, Doctor of Nursing practice (DNP), or other nursing doctoral degree. From 2015 through 2024, the proportion of respondents whose highest nursing degrees were diplomas decreased from 9.2% to 4.3%, ADNs decreased from 30.1% to 22.8%, BSNs increased from 43.4% to 51.1% in 2022 and decreased to 47.8% in 2024, MSNs increased from 15.8% to 20.6%, PhDs slightly increased from 0.9% to 1.6%, DNPs increased from 0.6% to 2.6%, and other nursing doctoral degrees increased slightly from 0.1% to 0.3% (Table 14 and Figure 3).

TABLE 14

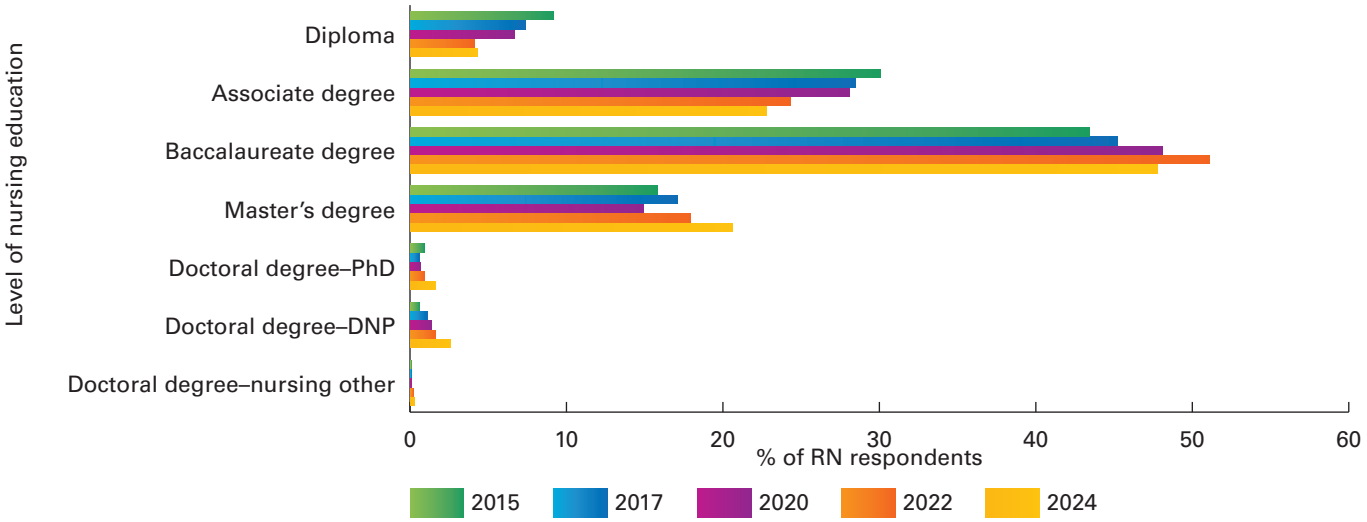
Highest Level of Nursing Education of RNs, 2015–2024

Nursing Education Level	2015 (*N* = 38,625.9)		2017 (*N* = 48,140.7)		2020 (*N* = 41,571.5)		2022 (*N* = 273,272.8)		2024 (*N* = 717,726.9)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Diploma	3,551.3	9.2	3,547.7	7.4	2,782.8	6.7	11,124.2	4.1	30,682.2	4.3
Associate degree	11,608.8	30.1	13,729.1	28.5	11,683.2	28.1	66,312.1	24.3	163,567.9	22.8
Baccalaureate degree	16,762.5	43.4	21,744.1	45.2	19,998.5	48.1	139,614.9	51.1	342,998.3	47.8
Master's degree	6,085.1	15.8	8,238.3	17.1	6,200.5	14.9	49,011.8	17.9	148,156.0	20.6
PhD	340.2	0.9	284.1	0.6	281.2	0.7	2,345.7	0.9	11,779.6	1.6
DNP	239.1	0.6	551.2	1.1	569.1	1.4	4,272.7	1.6	18,709.1	2.6
Other doctoral degree	39.0	0.1	46.1	0.1	56.1	0.1	591.3	0.2	1,833.8	0.3

Note. DNP = doctor of nursing practice; RN = registered nurse. In the 2015 survey, a single question asked "What is your highest level of education?" Possible responses included both nursing and non-nursing degrees. Nursing and non-nursing degrees were asked separately for the 2017 survey and those that followed.

FIGURE 3

Highest Level of Nursing Education of RNs, 2015–2024



Note. DNP = doctor of nursing practice; RN = registered nurse.

Highest Level of Nursing Education by Gender

The highest level of education was very similar for male and female nurses when looking at baccalaureate and associate degrees. The proportion who held these degrees was consistent with their makeup within the nursing workforce. Male RNs (3.2% PhD and 1.7% DNP) and their female RN counterparts (2.6% PhD and 1.6% DNP) reported comparable levels of doctorate-level education (Table 15).

TABLE 15

Highest Level of Nursing Education of RNs by Gender, 2024: Weighted Sample Values

Nursing Education Level	Male		Female		Nonbinary		
	n	%	*n*	%	*n*	%	*N*
Diploma	2,291.5	3.1	27,997.9	4.4	28.5	1.1	30,318.0
Associate degree	17,445.1	23.7	143,966.4	22.8	442.6	16.6	161,854.1
Baccalaureate degree	34,747.2	47.2	302,073.5	47.8	1,543.8	57.9	338,364.6
Master's degree	15,221.6	20.7	130,310.6	20.6	500.6	18.8	146,032.8
PhD	2,348.9	3.2	16,240.4	2.6	19.6	0.7	18,608.9
DNP	1,238.3	1.7	10,202.7	1.6	131.0	4.9	11,572.0
Other doctoral degree	332.2	0.5	1,491.9	0.2	0.0	0.0	1,824.1
Total	73,624.7	10.4	632,283.5	89.2	2,666.2	0.4	708,574.4

Note. RN = registered nurse.

Race/Ethnicity by Highest Level of Nursing Education

A BSN was the most common highest level of education attained across all racial groups. For RNs identifying as Asian, 65.3% reported holding a baccalaureate degree, which was the highest proportion across all racial categories. Slightly fewer than half of White/Caucasian, Black/African American, and American Indian/Alaska Native RNs held a baccalaureate degree (Table 16).

TABLE 16

Highest Level of Nursing Education of RNs by Race/Ethnicity, 2024: Weighted Sample Values

Race/Ethnicity	Nursing Education Level, *n* (%)							
	Diploma	Associate	Baccalaureate	Master's	PhD	DNP	Other Doctoral	*n*
American Indian or Alaska Native	77.3 (2.1)	1,127.1 (30.5)	1,768.0 (47.9)	629.8 (17.1)	24.0 (0.7)	63.2 (1.7)	1.9 (0.1)	3,691.4
Asian	3,414.5 (6.0)	5,459.5 (9.7)	36,911.3 (65.3)	9,249.6 (16.4)	901.5 (1.6)	579.9 (1.0)	35.3 (0.1)	56,551.5
Black/African American	1,626.8 (2.7)	12,042.4 (20.0)	28,673.7 (47.5)	13,804.3 (22.9)	2,158.0 (3.6)	1,842.5 (3.1)	162.5 (0.3)	60,310.2
Native Hawaiian or Other Pacific Islander	86.9 (3.7)	144.8 (6.2)	1,384.6 (59.6)	580.8 (25.0)	15.3 (0.7)	111.1 (4.8)	0.0 (0.0)	2,323.5
White/Caucasian	23,787.0 (4.4)	134,235.0 (24.6)	249,871.2 (45.7)	114,276.7 (20.9)	14,532.2 (2.7)	8,722.6 (1.6)	1,444.7 (0.3)	546,869.4
Other	1,179.9 (4.8)	5,060.8 (20.6)	12,974.7 (52.8)	4,698.9 (19.1)	379.2 (1.5)	242.6 (1.0)	41.4 (0.2)	24,577.4
More than one race category selected	315.3 (1.7)	4,137.1 (22.3)	9,314.6 (50.1)	3,987.2 (21.4)	589.5 (3.2)	211.5 (1.1)	42.6 (0.2)	18,597.9
Total	30,487.7 (4.3)	162,206.8 (22.8)	340,898.0 (47.8)	147,227.3 (20.7)	18,599.8 (2.6)	11,773.3 (1.7)	1,728.5 (0.2)	712,921.3
Hispanic/Latino	830.7 (1.7)	12,462.5 (24.7)	25,422.4 (50.4)	9,712.6 (19.3)	1,033.7 (2.1)	835.5 (1.7)	152.6 (0.3)	50,450.0

Note. RN = registered nurse. For the race question, respondents were asked to select all that applied. The responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

Highest Level of Nursing Education by Age

Younger nurses (aged 18–39 years) tended to hold a baccalaureate degree as their highest level of nursing education. A higher proportion of older nurses (aged ≥55 years) held diplomas or associate degrees as their highest level of nursing education. RNs aged 35 years or older were somewhat more likely to hold an advanced nursing degree (i.e., MSN, PhD, and DNP) than their younger colleagues (Table 17).

TABLE 17

Highest Level of Nursing Education by Age of RNs, 2024: Weighted Sample Values

Highest Level of Nursing Education	Age, y, *n* (%)									
	18–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	≥65	Total
Diploma	1,076.1 (2.0)	1,176.5 (1.7)	1,467.6 (1.9)	1,008.2 (1.4)	1,285.1 (1.9)	1,556.7 (2.1)	2,633.8 (3.8)	4,761.1 (5.9)	15,080.6 (11.9)	30,045.5 (4.3)
Associate degree	8,157.6 (15.0)	11,872.7 (16.8)	13,833.6 (18.1)	15,710.9 (21.1)	16,270.2 (24.1)	17,375.5 (23.4)	18,626.3 (26.8)	23,245.4 (28.9)	33,898.6 (26.7)	158,990.8 (22.9)
Baccalaureate degree	41,806.5 (76.8)	43,864.6 (62.2)	41,291.5 (54.0)	35,266.5 (47.4)	30,627.7 (45.4)	33,835.3 (45.6)	28,978.4 (41.8)	32,013.9 (39.8)	43,723.4 (34.5)	331,407.8 (47.7)
Master's degree	2,855.4 (5.3)	11,721.0 (16.6)	16,446.0 (21.5)	19,159.5 (25.8)	16,072.6 (23.8)	16,765.8 (22.6)	15,266.4 (22.0)	16,999.1 (21.1)	27,372.3 (21.6)	142,658.0 (20.5)
PhD	189.0 (0.4)	546.5 (0.8)	944.6 (1.2)	1,121.3 (1.5)	1,244.7 (1.9)	1,494.9 (2.0)	1,398.3 (2.0)	1,302.5 (1.6)	3,301.8 (2.6)	11,543.6 (1.7)
DNP	312.4 (0.6)	1,321.9 (1.9)	2,342.8 (3.1)	2,027.8 (2.7)	1,872.8 (2.8)	3,014.6 (4.1)	2,430.0 (3.5)	1,950.7 (2.4)	2,623.4 (2.1)	17,896.4 (2.6)
Other doctoral degree	13.0 (0.0)	71.9 (0.1)	162.1 (0.2)	111.6 (0.2)	47.5 (0.1)	220.4 (0.3)	51.7 (0.1)	199.8 (0.3)	928.3 (0.7)	1,806.2 (0.3)
Total	54,410.0	70,575.0	76,488.2	74,405.8	67,420.6	74,263.1	69,384.8	80,472.5	126,928.3	694,348.3

Note. DNP = doctor of nursing practice; RN = registered nurse.

Highest Level of Non-nursing Education

Respondents were asked about their highest level of non-nursing education from associate degree through doctoral degree. From 2017 through 2024, non-nursing associate degrees decreased from 35.3% to 30.5%, non-nursing baccalaureate degrees increased from 45.8% to 49.8%, non-nursing master's degrees decreased from 15.8% to 13.9% through 2022, but then increased to 17.0% in 2024, and non-nursing doctoral degrees decreased slightly from 3.1% to 2.8% (Table 18 and Figure 4).

TABLE 18

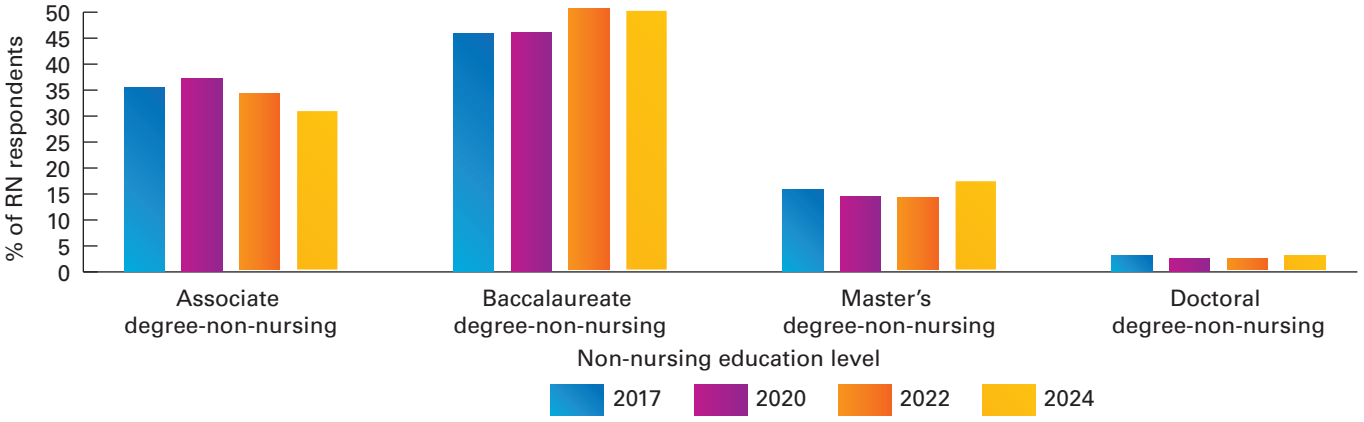
Highest Level of Non-nursing Education of RNs, 2017–2024

Highest Level of Non-nursing Education	2017 (*N* = 19,904.5)		2020 (*N* = 17,698.1)		2022 (*N* = 113,020.7)		2024 (*N* = 289,745.4)	
	n	%	*n*	%	*n*	%	*n*	%
Associate degree	7,025.9	35.3	6,578.1	37.2	38,275	33.9	88,233.4	30.5
Baccalaureate degree	9,115.4	45.8	8,141.5	46.0	56,706	50.2	144,341.9	49.8
Master's degree	3,150.8	15.8	2,547.4	14.4	15,660	13.9	49,196.8	17.0
Doctoral degree	612.4	3.1	431.1	2.4	2,380	2.1	7,973.3	2.8

Note. RN = registered nurse. Data from 2015 unavailable because nursing and non-nursing degrees were not separately requested.

FIGURE 4

Highest Level of Non-nursing Education of RNs, 2017–2024



Note. RN = registered nurse.

Licensure

Type of License Currently Held

Respondents were asked to report the type of nursing license that they currently hold. Like previous years, less than 1% of responding RNs held an LPN/LVN license. Of note, a record percentage held an APRN credential, surpassing the previous high of 10% in 2017 (Table 19 and Figure 5).

TABLE 19

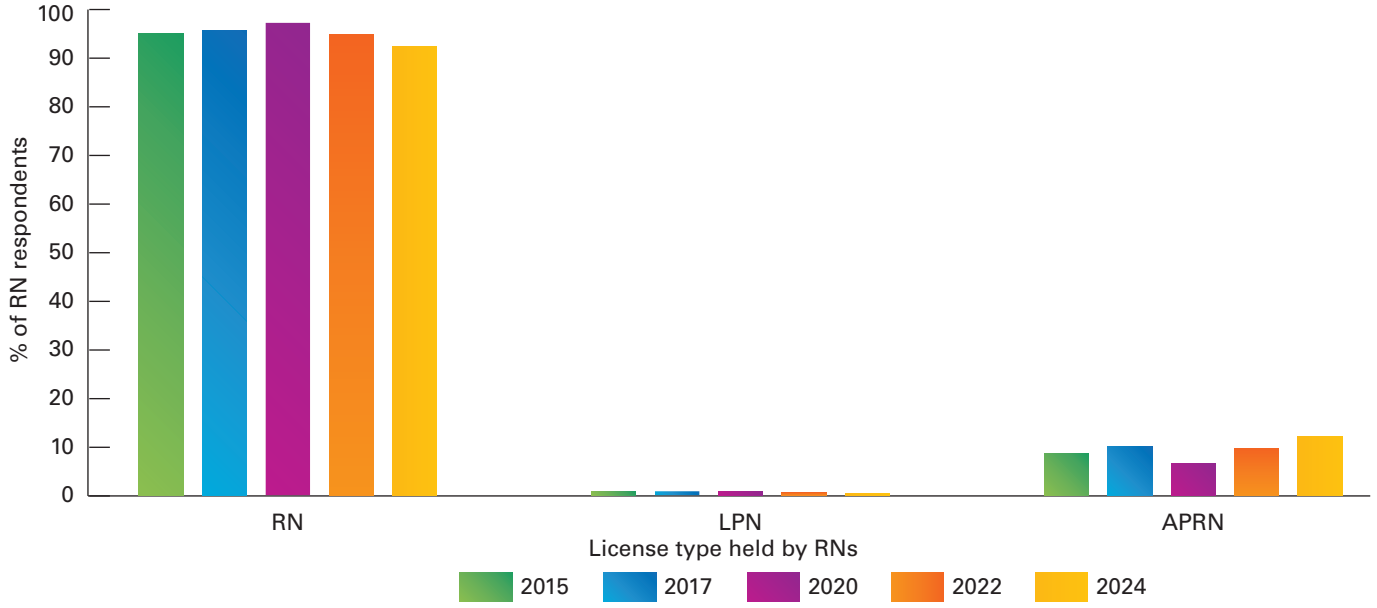
Type of License Currently Held by RNs, 2015–2024

License	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 46,047.8**		***N* = 48,128.0**		***N* = 41,601.8**		***N* = 252,623.7**		***N* = 743,696.6**	
RN	43,730.2	95.0	45,971.3	95.5	40,378.3	97.1	239,838.6	94.9	686,533.0	92.3
LPN/LVN	330.8	0.7	386.2	0.8	323.6	0.8	2,109.2	0.8	4,450.4	0.6
APRN	3,974.7	8.6	4,788.6	10.0	2,763.2	6.6	24,633.4	9.8	90,473.4	12.2
U.S. RN Population										
RN	3,508,219	95.0	3,729,318	95.5	4,033,920	97.1	3,826,692	94.9	4,396,096	92.3
LPN/LVN	26,534	0.7	31,328	0.8	32,329	0.8	33,653	0.8	28,497	0.6
APRN	318,870	8.6	388,461	10.0	276,052	6.6	393,032	9.8	579,331	12.2

Note. RN = registered nurse; LPN/LVN = licensed practical nurse/licensed vocational nurse; APRN = advanced practice registered nurse. Respondents were asked to select all that applied.

FIGURE 5

Type of License Currently Held by RNs, 2015–2024



Note. APRN = advanced practice registered nurse; LPN/LVN = licensed practical nurse/licensed vocational nurse; RN = registered nurse. Respondents were asked to select all that applied.

Number of Years Licensed

RNs responding to the 2024 survey were licensed for a median of 17 years, as compared to a median of 15 years in the 2022 survey. Almost one-third (32.1%) were licensed for 10 or fewer years. An additional 24.9% were licensed between 11 and 20 years, resulting in 57% of RNs reporting fewer than 20 years of being licensed. The proportion licensed for more than 20 years rebounded (42.9%) from 2022 (37.6%), but this percentage is still below the high of 47% recorded in 2015 (Table 20 and Figure 6).

TABLE 20

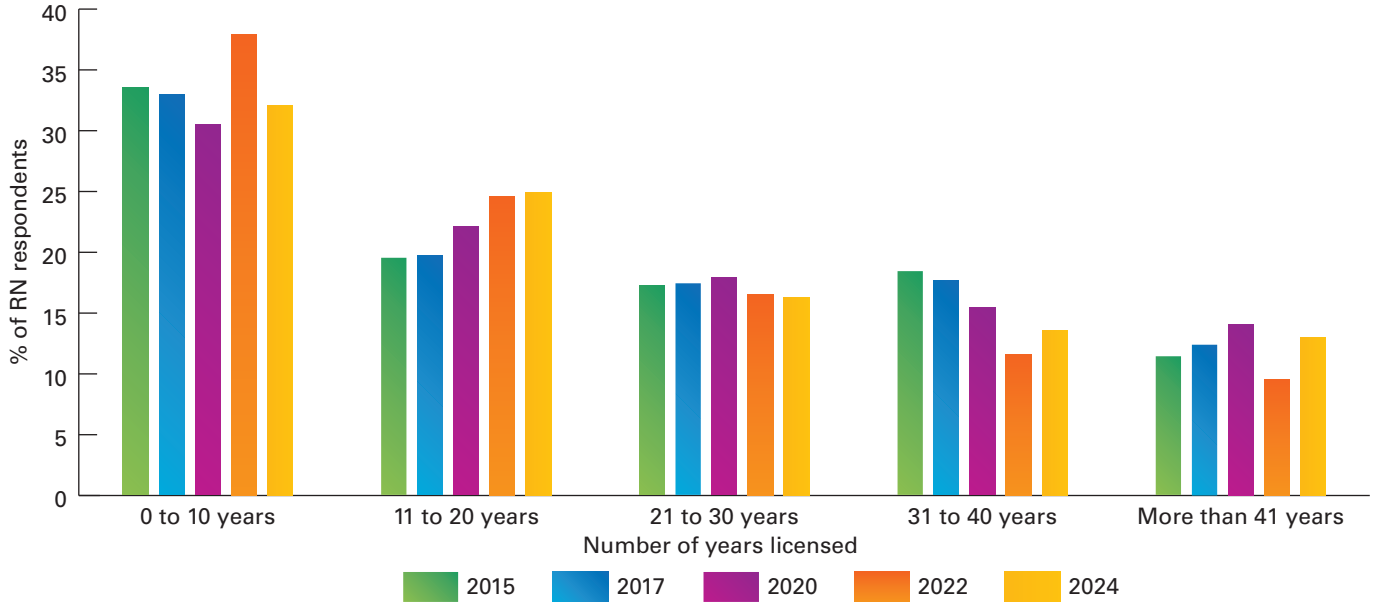
Number of Years the RN Has Been Licensed, 2015–2024

Years Licensed	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 39,771.5**		***N* = 46,757.6**		***N* = 38,741.0**		***N* = 255,537.8**		***N* = 668,155.4**	
0–10	13,307.3	33.5	15,397.6	32.9	11,802.6	30.5	96,801.6	37.9	214,614.3	32.1
11–20	7,753.4	19.5	9,217.7	19.7	8,577.4	22.1	62,790.2	24.6	166,538.5	24.9
21–30	6,855.8	17.2	8,121.6	17.4	6,934.1	17.9	42,027.9	16.5	108,780.2	16.3
31–40	7,311.4	18.4	8,226.1	17.6	5,951.6	15.4	29,614.8	11.6	91,109.3	13.6
≥41	4,543.7	11.4	5,794.6	12.4	5,475.4	14.1	24,303.1	9.5	87,113.0	13.0
U.S. RN Population										
0–10	1,067,569	33.5	1,249,096	32.9	1,179,117	30.5	1,544,497	37.9	1,374,246	32.1
11–20	622,009	19.5	747,767	19.7	856,909	22.1	1,001,835	24.6	1,066,401	24.9
21–30	549,997	17.2	658,844	17.4	692,739	17.9	670,566	16.5	696,555	16.3
31–40	586,547	18.4	667,326	17.6	594,584	15.4	472,513	11.6	583,403	13.6
≥41	364,511	11.4	470,073	12.4	547,010	14.1	387,763	9.5	557,813	13.0

Note. RN = registered nurse.

FIGURE 6

Number of Years the RN Has Been Licensed, 2015–2024



Note. RN = registered nurse.

Country Where Entry-Level Education Was Received

Most RNs (93.2%) reported obtaining their entry-level nursing education in the United States in 2024, a slight decrease from the 94.8% who reported the same in 2022. Another 3.6% obtained their entry-level nursing education in the Philippines, 0.6% in India, and 0.5% in Canada (Table 21).

TABLE 21

Country of Entry-Level Nursing Education of RNs, 2020–2024

Country	2020		2022		2024	
	n	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 41,745.5**		***N* = 252,307.9**		***N* = 743,069.4**	
United States	39,192.5	93.9	239,250.2	94.8	692,155.1	93.2
Canada	224.7	0.5	1,256.5	0.5	3,813.1	0.5
Philippines	1,360.3	3.3	7,089.6	2.8	26,798.8	3.6
India	212.8	0.5	883.8	0.4	4,674.1	0.6
Other	755.2	1.8	3,827.9	1.5	15,628.3	2.1
U.S. RN Population						
United States	3,915,455	93.9	3,817,304	94.8	4,432,096	93.2
Canada	22,448	0.5	20,048	0.5	24,416	0.5
Philippines	135,898	3.3	113,116	2.8	171,602	3.6
India	21,259	0.5	14,101	0.4	29,930	0.6
Other	75,447	1.8	61,075	1.5	100,073	2.1

Note. RN = registered nurse.

Credentials to Practice as an APRN

Respondents were asked whether they were credentialed as an APRN in their state, enabling them to practice in any of the four APRN roles: certified nurse practitioner (CNP), clinical nurse specialist (CNS), certified registered nurse anesthetist (CRNA), or certified nurse midwife (CNM). Most respondents (86.7%) indicated they were not credentialed to practice as an APRN. This represents a lower proportion of RNs not credentialed as an APRN compared to 88.4% in 2022. In 2024, 9.9% of respondents reported being credentialed as a CNP, compared to 8.6% in 2022 (Table 22 and Figure 7).

TABLE 22

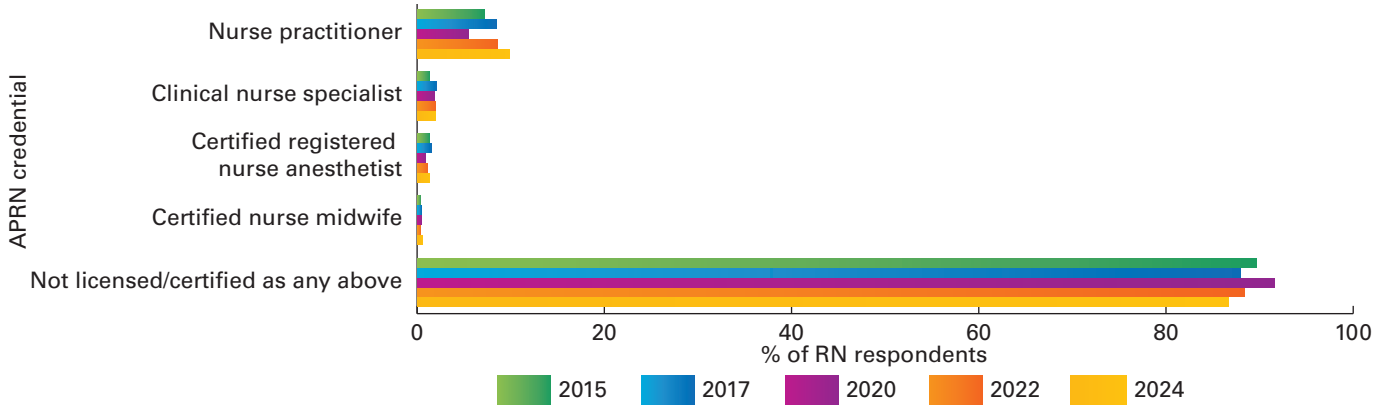
Credentials to Practice as an APRN, 2015–2024

Credential	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 43,045.0**		***N* = 47,713.6**		***N* = 41,129.2**		***N* = 271,194.6**		***N* = 738,704.3**	
Certified nurse practitioner	3,129.4	7.2	4,067.1	8.5	2,257.1	5.5	23,188.1	8.6	73,188.6	9.9
Clinical nurse specialist	576.8	1.3	983.5	2.1	769.2	1.9	5,466.0	2.0	14,534.0	2.0
Certified registered nurse anesthetist	571.9	1.3	728.7	1.5	399.7	0.9	2,959.5	1.1	9,900.4	1.3
Certified nurse midwife	167.7	0.4	242.0	0.5	192.0	0.5	994.2	0.4	4,677.4	0.6
Not licensed/certified as any above	38,599.3	89.7	42,004.2	88.0	37,677.6	91.6	239,699.1	88.4	640,312.2	86.7
U.S. RN Population										
Certified nurse practitioner	251,053	7.2	329,933	8.5	225,491	5.5	369,972	8.6	468,651	9.9
Clinical nurse specialist	46,275	1.3	79,787	2.1	76,846	1.9	87,212	2.0	93,066	2.0
Certified registered nurse anesthetist	45,879	1.3	59,114	1.5	39,931	0.9	47,219	1.1	63,395	1.3
Certified nurse midwife	13,452	0.4	19,636	0.5	19,181	0.5	15,863	0.4	29,951	0.6
Not licensed/certified as any above	3,096,595	89.7	3,407,498	88.0	3,764,112	91.6	3,824,467	88.4	4,100,129	86.7

Note. APRN = advanced practice registered nurse. Respondents were asked to select all that applied.

FIGURE 7

Credentials to Practice as an APRN, 2015–2024



Note. APRN = advanced practice registered nurse; RN = registered nurse. Respondents were asked to select all that applied.

Multistate licensure

Multistate License

Respondents were asked if they held a multistate license. Between 2022 and 2024, multistate licensure among RNs increased by 5.6% from 30.3% in 2022 to 35.9% in 2024 (Table 23).

TABLE 23

RNs Holding a Multistate License, 2020–2024

Multistate License	2020 (*N* = 34,825.9)		2022 (*N* = 214,686.7)		2024 (*N* = 515,410.1)	
	n	%	*n*	%	*n*	%
Yes	8,367.4	24.0	65,087.7	30.3	184,797.7	35.9
No	26,458.5	76.0	149,599.1	69.7	330,612.3	64.2

Note. Respondents were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Multistate License Use

From 2022 to 2024, the proportion of those who had used their multistate license increased from 32.2% to 38.4% among RNs. The proportion of those who used their multistate license for telehealth increased from 8.9% in 2022 to 12.0% in 2024 (Table 24).

TABLE 24

Multistate License Use by RNs, 2022–2024

Multistate License Use	2022 (*N* = 66,014.3)		2024 (*N* = 176,750.9)	
	n	%	*n*	%
Telehealth	5,850.0	8.9	21,238.0	12.0
Distance education	1,686.0	2.6	5,842.7	3.3
Disaster support	1,800.6	2.7	4,227.1	2.4
Have not used	44,777.2	67.8	108,939.0	61.6
Other	13,472.2	20.4	37,362.1	21.1

Note. RN = registered nurse. Respondents were asked to answer this question only if they were actively employed in nursing. Respondents were asked to select all that applied. This question was not administered in Hawaii.

Employment

Employment Status

Most RNs (87.7%) were actively employed in nursing, with 68.9% employed in nursing full-time. This represents a 4% increase in those working full-time from 2020. The proportion of RNs who indicated they were actively employed in nursing slightly decreased since 2022 (88.9%) (Table 25 and Figure 8).

TABLE 25

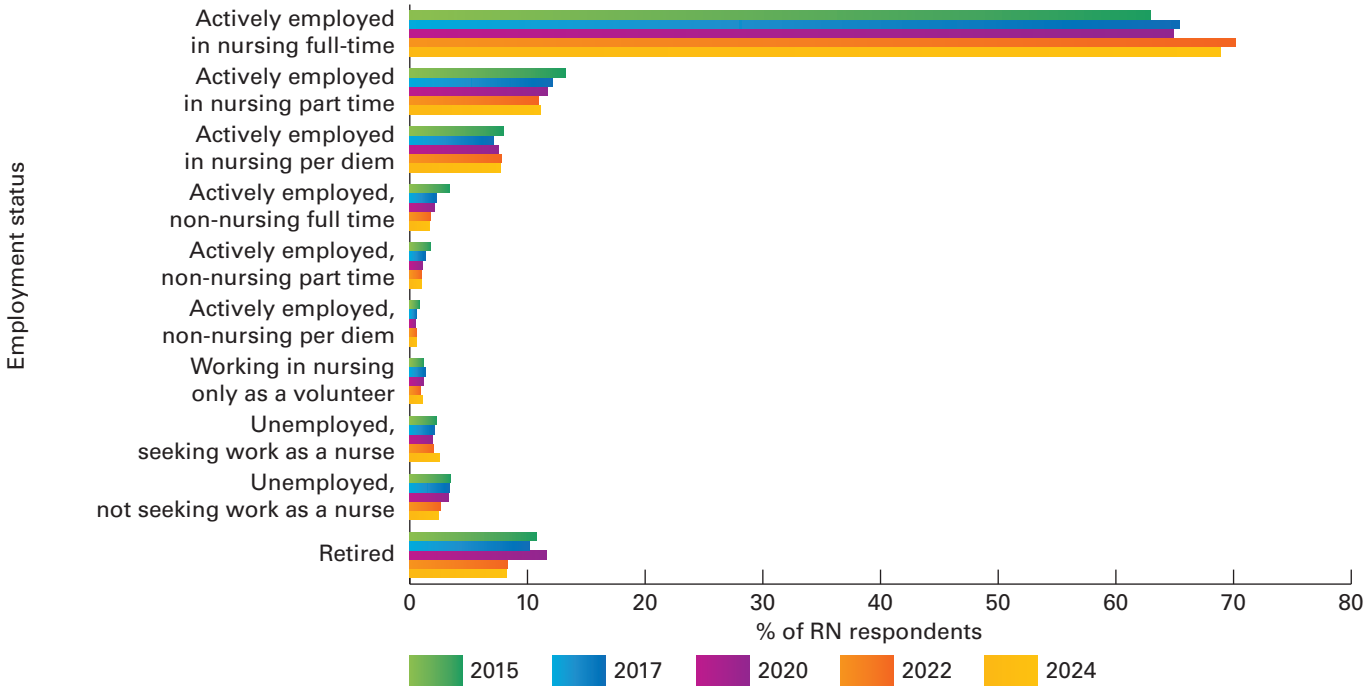
Employment Status of RNs, 2015–2024

Employment Status	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 46,210.2**		***N* = 48,146.9**		***N* = 41,783.4**		***N* = 277,034.9**		***N* = 741,464.6**	
Actively employed in nursing full-time	29,088.5	62.9	31,476.6	65.4	27,101.0	64.9	194,565.3	70.2	510,638.8	68.9
Actively employed in nursing part-time	6,088.0	13.2	5,820.9	12.1	4,901.7	11.7	30,268.8	10.9	82,006.2	11.1
Actively employed in nursing per diem	3,675.2	8.0	3,424.9	7.1	3,133.6	7.5	21,526.3	7.8	57,179.9	7.7
Actively employed in a field other than nursing full-time	1,576.1	3.4	1,108.9	2.3	882.4	2.1	5,098.3	1.8	12,651.4	1.7
Actively employed in a field other than nursing part-time	850.8	1.8	605.7	1.3	438.5	1.1	2,727.8	1.0	7,508.8	1.0
Actively employed in a field other than nursing per diem	377.7	0.8	267.5	0.6	188.5	0.5	1,521.2	0.6	4,058.2	0.6
Working in nursing only as a volunteer	564.5	1.2	645.6	1.3	517.1	1.2	2,553.8	0.9	8,000.0	1.1
Unemployed, seeking work as a nurse	1,070.7	2.3	1,030.2	2.1	809.1	1.9	5,443.9	2.0	18,629.1	2.5
Unemployed, not seeking work as a nurse	1,611.6	3.5	1,616.2	3.4	1,362.4	3.3	7,223.8	2.6	17,904.5	2.4
Retired	4,993.7	10.8	4,916.9	10.2	4,824.7	11.6	23,038.1	8.3	60,668.8	8.2
U.S. RN Population										
Actively employed in nursing full-time	2,333,606	62.9	2,553,467	65.4	2,707,476	64.9	3,104,344	70.2	3,269,787.7	68.9
Actively employed in nursing part-time	488,405	13.2	472,204	12.1	489,695	11.7	482,946	10.9	525,112.9	11.1
Actively employed in nursing per diem	294,837	8.0	277,834	7.1	313,057	7.5	343,458	7.8	366,141.7	7.7
Actively employed in a field other than nursing full-time	126,445	3.4	89,956	2.3	88,155	2.1	81,345	1.8	81,011.3	1.7
Actively employed in a field other than nursing part-time	68,255	1.8	49,139	1.3	43,808	1.1	43,522	1.0	48,081.2	1.0
Actively employed in a field other than nursing per diem	30,298	0.8	21,702	0.6	18,832	0.5	24,271	0.6	25,985.7	0.6
Working in nursing only as a volunteer	45,288	1.2	52,374	1.3	51,660	1.2	40,746	0.9	51,226.3	1.1
Unemployed, seeking work as a nurse	85,896	2.3	83,573	2.1	80,832	1.9	86,859	2.0	119,287.9	2.5
Unemployed, not seeking work as a nurse	129,287	3.5	131,114	3.4	136,108	3.3	115,258	2.6	114,648.3	2.4
Retired	400,613	10.8	398,871	10.2	482,003	11.6	367,580	8.3	388,482.4	8.2

Note. RN = registered nurse. Respondents were asked to select all that applied. In Hawaii, "Working in nursing only as a volunteer" was not offered as an option.

FIGURE 8

Employment Status of RNs, 2015–2024



Note. RN = registered nurse. Respondents were asked to select all that applied. In Hawaii, "Working in nursing only as a volunteer" was not offered as an option.

Reasons for Unemployment

Respondents were asked to select all applicable reasons for being unemployed. Taking care of home and family continued to be the most frequently selected option outside of "other." However, this comprised a smaller proportion of respondents (39.8%) than in any previous cycle. Furthermore, 8.4% of RNs stated they were unemployed due to inadequate salary. While this decreased from 11.9% in 2022, this still represents a marked increase in the reporting of an inadequate salary prior to the pandemic, as the proportion of RNs who reported an inadequate salary in 2020 and before ranged from 2.1% to 2.9%. The proportion of RNs who indicated unemployment because they had trouble finding a nursing position was 12.9%, which was down from 14.6% in 2020, but a slight increase from 10.7% in 2022. The percentage of RNs who selected disability as the reason for unemployment was 6.6%, the lowest percentage yet observed (Table 26 and Figure 9).

TABLE 26

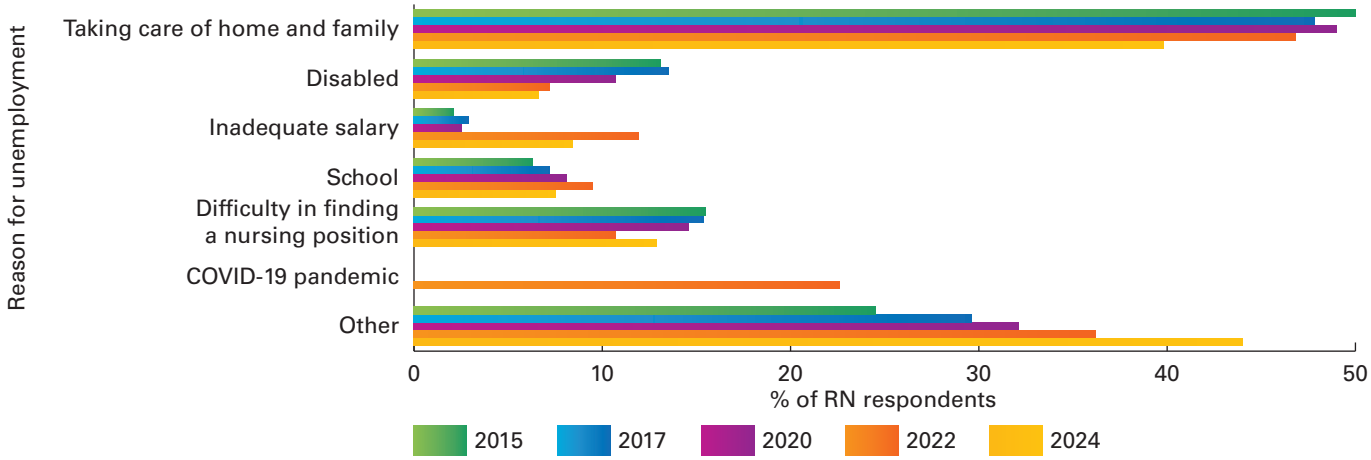
Reasons for Unemployment of RNs, 2015–2024

Reasons for Unemployment	2015 (*N* = 2,272.4)		2017 (*N* = 2,567.2)		2020 (*N* = 2,122.1)		2022 (*N* = 12,397.1)		2024 (*N* = 36,208.73)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Taking care of home and family	1137.3	50.0	1226.8	47.8	1,039.5	49.0	5,805.8	46.8	14,403.1	39.8
Disabled	298.5	13.1	347.6	13.5	226.4	10.7	893.9	7.2	2,394.0	6.6
Inadequate salary	48.2	2.1	73.7	2.9	53.7	2.5	1,477.7	11.9	2,999.6	8.4
School	143.1	6.3	186.0	7.2	172.2	8.1	1,171.1	9.5	2,722.0	7.5
Difficulty in finding a nursing position	352.0	15.5	395.0	15.4	310.3	14.6	1,327.6	10.7	4,652.0	12.9
Other	557.4	24.5	758.9	29.6	680.2	32.1	4,486.6	36.2	15,917.3	44.0

Note. Survey participants were asked to answer this question only if they were unemployed. Respondents were asked to select all that applied. The "inadequate salary" category was not offered as a response option in Hawaii.

FIGURE 9

Reasons for Unemployment of RNs, 2015–2024



Note. RN = registered nurse.

Intent to Leave or Retire

Approximately 40% of RNs reported they plan to retire or leave nursing within the next 5 years, a 11.2% increase over the proportion who reported similar intentions on the 2022 survey (28.7%). Of the roughly 40% who reported intent to retire or leave in the next 5 years, 21.9% reported they planned to retire and 18.0% reported they plan to leave nursing. This question was altered in 2024 to differentiate those retiring and those leaving nursing practice for other reasons (Table 27).

TABLE 27

Plans of RNs for the Next 5 Years, 2020–2024

Intent to Leave Nursing	2020 (*N* = 34,360.2)		2022 (*N* = 216,831.7)		2024 (*N* = 542,343.9)	
	n	%	*n*	%	*n*	%
Yes	7,584.5	22.1	62,234.8	28.7	216,151.3	39.9
I plan to retire	-	-	-	-	118,480.0	21.9
I plan to leave nursing	-	-	-	-	97,671.3	18.0
No	26,775.8	77.9	154,597.0	71.3	326,192.5	60.1

Note. RN = registered nurse. This question was introduced in the 2020 survey and modified in 2024 to offer separate options for those who plan to retire, and those who plan to leave nursing. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Reasons for Leaving Nursing/Retiring in the Next 5 Years

New to the 2024 survey, respondents who indicated they planned to leave or retire within 5 years were asked what reasons drove their response. Respondents were able to select more than one reason. Most RNs (61.4%) indicated they planned to retire, while the second highest option selected was stress and burnout (41.3%). Additionally, notable proportions of RNs selected workload (32.8%) and understaffing (26.0%) as reasons for leaving (Table 28).

TABLE 28

Reasons for RN Plans to Retire or Leave Nursing in the Next 5 Years, 2024

Reasons for Plans to Leave Nursing/Retire	2024 (*N* = 182,357.4)	
	n	%
Retirement	111,913.0	61.4
Taking care of home and family	22,957.4	12.6
School	5,334.5	2.9
Inadequate salary	39,798.1	21.8
Understaffing	47,345.4	26.0
Workplace violence or bullying	22,389.0	12.3
Workload	59,891.9	32.8
Disability	4,022.2	2.2
Stress and burnout	75,293.7	41.3
Other	14,348.2	7.9

Note. RN = registered nurse.

Number of Positions Currently Held

Respondents were asked to identify the number of positions in which they were currently employed as a nurse. Most respondents (82.2%) reported holding just one position as a nurse, which was consistent with 2022 results. The proportion of nurses who reported working in two positions also held steady, marginally decreasing from 15.0% in 2022 to 14.6% in 2024. The percentage of respondents who indicated that they held three or more positions in nursing increased from 2.6% in 2022 to 3.2% in 2024 (Table 29).

TABLE 29

Number of Positions Currently Held by RNs, 2015–2024

No. of Positions Held	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 37,114.2**		***N* = 39,414.3**		***N* = 33,992.6**		***N* = 235,732.0**		***N* = 613,864.7**	
1	31,499.3	84.9	32,827.2	83.3	28,516.3	83.9	194,280.1	82.4	504,444.0	82.2
2	4,744.0	12.8	5,496.7	13.9	4,664.1	13.7	35,280.2	15.0	89,767.5	14.6
≥3	870.8	2.4	1,090.5	2.8	812.2	2.4	6,171.7	2.6	19,653.3	3.2
U.S. RN Population										
1	2,527,010	84.9	2,663,030	83.3	2,848,869	83.9	3,099,794	82.4	3,230,120	82.2
2	380,585	12.8	445,905	13.9	465,958	13.7	562,905	15.0	574,811	14.6
≥3	69,861	2.4	88,463	2.8	81,141	2.4	98,471	2.6	125,846	3.2

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Number of Hours Worked During a Typical Week in All Nursing Positions

More than half (57.4%) of responding RNs reported working 32 to 40 hours in a typical week in all positions. This was consistent with results from 2015 (58.4%) to 2020 (58.7%) but represented an increase from 2022 (54.6%). The second most frequently reported category was 41 to 50 hours (17.4%), which decreased from its highest reported rate of 19.0% in 2022 (Table 30 and Figure 10).

TABLE 30

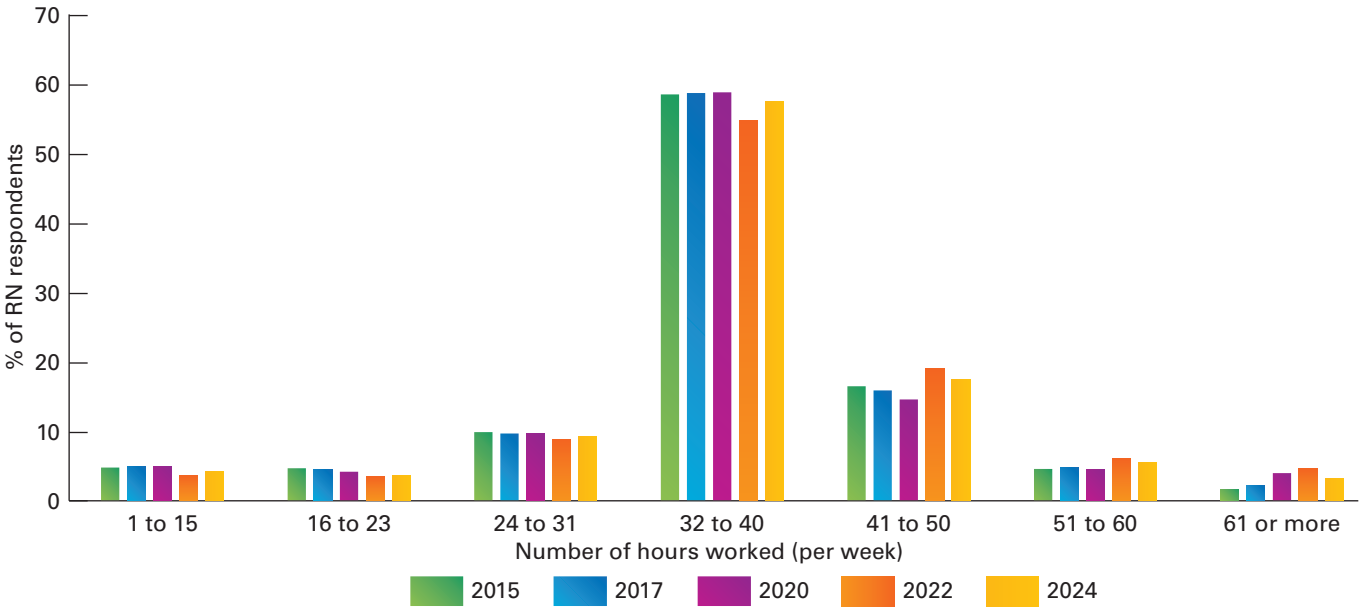
Number of Hours RNs Worked During a Typical Week in All Nursing Positions, 2015–2024

Hours Worked per Week	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 36,327.6**		***N* = 39,293.3**		***N* = 33,847.5**		***N* = 235,197.9**		***N* = 607,844.0**	
1–15	1,697.7	4.7	1,903.7	4.8	1,624.0	4.8	8,482.5	3.6	25,495.1	4.2
16–23	1,655.7	4.6	1,728.1	4.4	1,402.3	4.1	7,897.3	3.4	20,982.9	3.5
24–31	3,536.9	9.8	3,765.0	9.6	3,251.0	9.6	20,715.0	8.8	55,082.4	9.1
32–40	21,174.3	58.4	23,012.6	58.6	19,850.6	58.7	128,375.1	54.6	348,947.7	57.4
41–50	5,957.3	16.4	6,198.0	15.8	4,915.1	14.5	44,684.8	19.0	105,660.8	17.4
51–60	1,636.9	4.5	1,851.3	4.7	1,479.9	4.4	14,197.5	6.0	32,613.1	5.4
≥61	578.8	1.6	834.7	2.1	1,324.5	3.9	10,845.7	4.6	19,062.0	3.1
U.S. RN Population										
1–15	136,200	4.7	154,434	4.8	162,243	4.8	135,340	3.6	163,254	4.2
16–23	132,826	4.6	140,190	4.4	140,094	4.1	126,004	3.4	134,360	3.5
24–31	283,745	9.8	305,426	9.6	324,785	9.6	330,513	8.8	352,711	9.1
32–40	1,698,692	58.4	1,866,841	58.6	1,983,138	58.7	2,048,261	54.6	2,234,427	57.4
41–50	477,918	16.4	502,796	15.8	491,034	14.5	712,959	19.0	676,581	17.4
51–60	131,318	4.5	150,180	4.7	147,847	4.4	226,525	6.0	208,832	5.4
≥61	46,432	1.6	67,712	2.1	132,322	3.9	173,046	4.6	122,060	3.1

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

FIGURE 10

Number of Hours RNs Worked During a Typical Week in All Nursing Positions, 2015–2024



Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

(continued)

Primary Nurse Practice Setting

Of those RNs who provided information on their practice setting, 53.3% indicated that a hospital was the location of their primary nursing practice. This represents a decrease of 4.2% from 2022. Ambulatory care setting was the second most frequently selected setting by 11.5% of RNs, followed by nursing home/extended care at 4.7% and community health at 2.3%. The percentage of respondents at schools of nursing increased to 3.2% in 2024 compared to 2.1% in 2022 (Table 31 and Figure 11).

TABLE 31

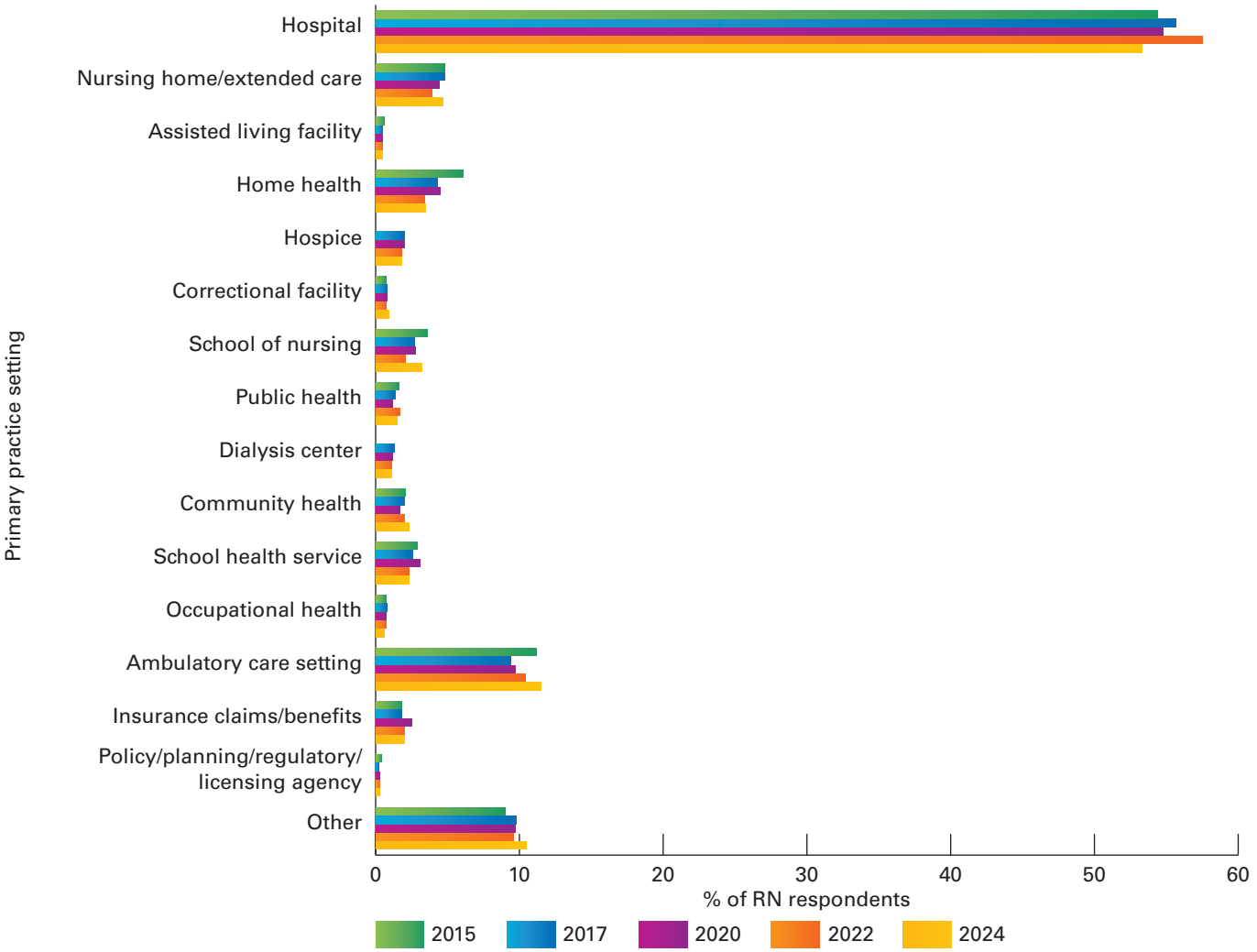
Primary Nurse Practice Setting of RNs, 2015–2024

Practice Setting	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 37,372.1**		***N* = 38,870.1**		***N* = 33,640.6**		***N* = 232,872.0**		***N* = 482,762.1**	
Hospital	20,311.9	54.4	21,646.5	55.7	18,441.8	54.8	133,911.7	57.5	257,170.5	53.3
Nursing home/extended care	1,807.2	4.8	1,859.7	4.8	1,486.7	4.4	9,024.8	3.9	22,594.9	4.7
Assisted living facility	233.3	0.6	211.2	0.5	177.5	0.5	1,187.3	0.5	2,467.6	0.5
Home health	2,288.0	6.1	1,685.9	4.3	1,501.7	4.5	7,818.4	3.4	17,085.8	3.5
Hospice	-	-	757.8	2.0	674.3	2.0	4,175.6	1.8	8,842.2	1.8
Correctional facility	259.6	0.7	294.8	0.8	277.7	0.8	1,525.4	0.7	4,494.2	0.9
School of nursing	1,357.0	3.6	1,028.9	2.7	954.1	2.8	4,908.9	2.1	15,337.0	3.2
Public health	595.4	1.6	539.3	1.4	407.5	1.2	3,832.2	1.7	7,127.2	1.5
Dialysis center	-	-	493.6	1.3	386.8	1.2	2,643.9	1.1	5,134.3	1.1
Community health	786.9	2.1	780.8	2.0	565.3	1.7	4,655.2	2.0	11,175.2	2.3
School health service	1,092.8	2.9	1,025.3	2.6	1,057.8	3.1	5,441.8	2.3	11,217.7	2.3
Occupational health	250.3	0.7	292.6	0.8	230.7	0.7	1,642.9	0.7	2,929.7	0.6
Ambulatory care setting	4,201.1	11.2	3,649.2	9.4	3,271.6	9.7	24,267.2	10.4	55,464.2	11.5
Insurance claims/benefits	673.7	1.8	694.1	1.8	841.1	2.5	4,642.6	2.0	9,613.5	2.0
Policy/planning/regulatory/licensing agency	148.7	0.4	86.9	0.2	88.1	0.3	746.5	0.3	1,518.4	0.3
Other	3,366.3	9.0	3,823.6	9.8	3,278.0	9.7	22,447.4	9.6	50,589.6	10.5
U.S. RN Population										
Hospital	1,629,506	54.4	1,756,021	55.7	1,842,394	54.8	2,136,599	57.5	1,646,747	53.3
Nursing home/extended care	144,982	4.8	150,865	4.8	148,526	4.4	143,994	3.9	144,682	4.7
Assisted living facility	18,718	0.6	17,132	0.5	17,733	0.5	18,943	0.5	15,801	0.5
Home health	183,553	6.1	136,765	4.3	150,025	4.5	124,744	3.4	109,406	3.5
Hospice	-	-	61,471	2.0	67,365	2.0	66,623	1.8	56,619	1.8
Correctional facility	20,828	0.7	23,918	0.8	27,743	0.8	24,338	0.7	28,778	0.9
School of nursing	108,863	3.6	83,466	2.7	95,318	2.8	78,324	2.1	98,208	3.2
Public health	47,763	1.6	43,748	1.4	40,711	1.2	61,143	1.7	45,638	1.5
Dialysis center	-	-	40,040	1.3	38,643	1.2	42,185	1.1	32,877	1.1
Community health	63,128	2.1	63,337	2.0	56,475	1.7	74,275	2.0	71,559	2.3
School health service	87,666	2.9	83,178	2.6	105,678	3.1	86,826	2.3	71,830	2.3
Occupational health	20,080	0.7	23,736	0.8	23,048	0.7	26,213	0.7	18,760	0.6
Ambulatory care setting	337,028	11.2	296,030	9.4	326,843	9.7	387,190	10.4	355,156	11.5
Insurance claims/benefits	54,046	1.8	56,306	1.8	84,029	2.5	74,075	2.0	61,559	2.0
Policy/planning/regulatory/licensing agency	11,930	0.4	7,050	0.2	8,801	0.3	11,910	0.3	9,723	0.3
Other	270,057	9.0	310,178	9.8	327,483	9.7	358,155	9.6	323,942	10.5

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

FIGURE 11

Primary Nurse Practice Setting of RNs, 2015–2024



Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Primary Nursing Position Title

In 2024, more than half of RNs (57.1%) reported their primary nursing position title as staff nurse, which represents a marginal increase from 2022 (56.5%). The title of nurse faculty/educator accounted for 4.5% of nursing titles, which increased from 3.3% in the 2022 survey (Table 32 and Figure 12).

TABLE 32

Primary Nursing Position Title of RNs, 2015–2024

Primary Title	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents	***N* = 37,711.1**	**%**	***N* = 39,063.1**		***N* = 33,713.7**		***N* = 233,841.4**		***N* = 481,670.0**	
Consultant	672.4	1.8	577.4	1.5	531.7	1.6	2,782.6	1.2	7,053.2	1.5
Nurse researcher	247.2	0.7	235.9	0.6	155.6	0.5	1,140.6	0.5	2,934.8	0.6
Nurse executive	881.4	2.3	725.3	1.9	647.7	1.9	4,326.3	1.9	10,726.7	2.2
Nurse manager	3,045.8	8.1	3,126.2	8.0	2,673.3	7.9	17,149.0	7.3	35,129.3	7.3
Nurse faculty/educator	1,422.2	3.8	1,558.2	4.0	1,392.5	4.1	7,673.0	3.3	21,795.2	4.5

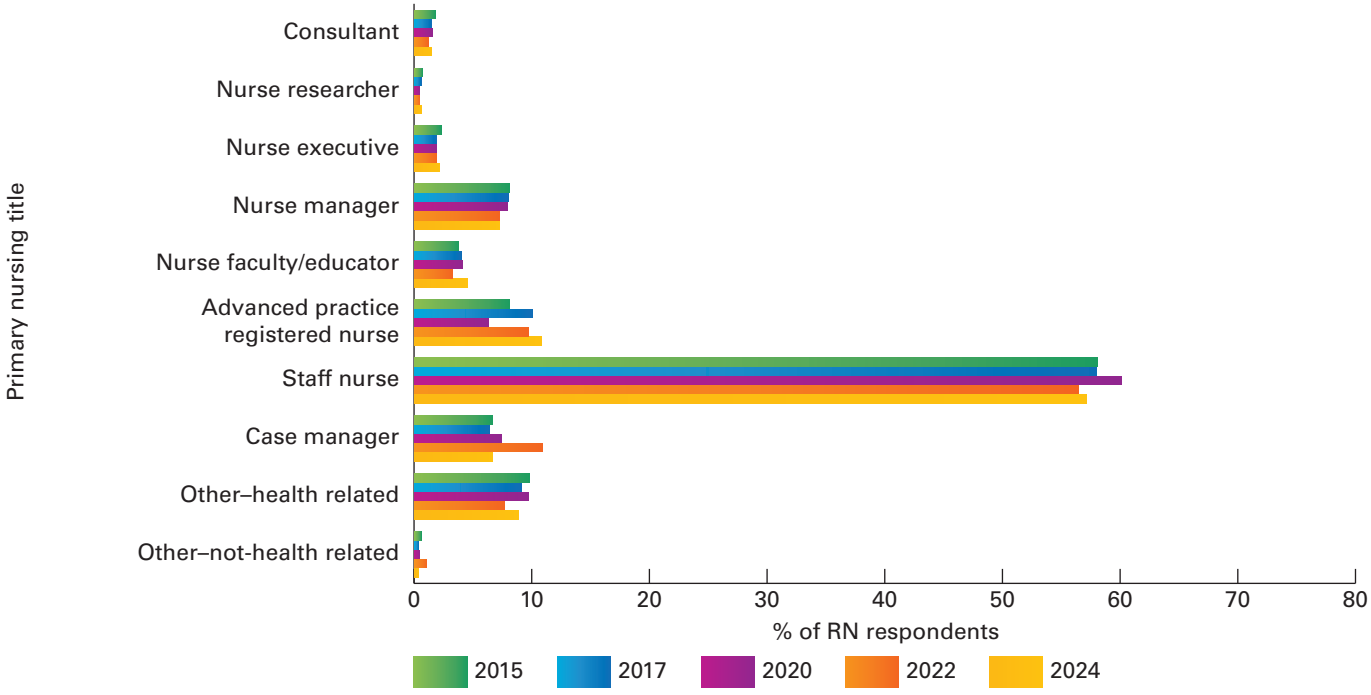
Primary Nursing Position Title of RNs, 2015–2024 *(continued)*

Primary Title	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
APRN	3,069.1	8.1	3,946.1	10.1	2,130.2	6.3	22,782.1	9.7	51,826.7	10.8
Staff nurse	21,920.7	58.1	22,673.0	58.0	20,265.9	60.1	132,070.7	56.5	275,207.6	57.1
Case manager	2,524.8	6.7	2,519.2	6.4	2,485.3	7.4	25,478.9	10.9	32,159.8	6.7
Other—health related	3,685.1	9.8	3,561.9	9.1	3,277.4	9.7	17,964.2	7.7	42,804.7	8.9
Other—not health related	242.5	0.6	139.7	0.4	154.2	0.5	2,474.0	1.1	2,032.0	0.4
U.S. RN Population										
Consultant	53,944	1.8	46,844	1.5	53,119	1.6	44,397	1.2	45,164	1.5
Nurse researcher	19,830	0.7	19,139	0.6	15,545	0.5	18,199	0.5	18,793	0.6
Nurse executive	70,706	2.3	58,836	1.9	64,707	1.9	69,027	1.9	68,686	2.2
Nurse manager	244,343	8.1	253,609	8.0	267,071	7.9	273,617	7.3	224,945	7.3
Nurse faculty/educator	114,099	3.8	126,408	4.0	139,115	4.1	122,425	3.3	139,562	4.5
APRN	246,214	8.1	320,121	10.1	212,814	6.3	363,495	9.7	331,863	10.8
Staff nurse	1,758,573	58.1	1,839,294	58.0	2,024,628	60.1	2,107,225	56.5	1,762,245	57.1
Case manager	202,546	6.7	204,368	6.4	248,289	7.4	406,523	10.9	205,929	6.7
Other—health related	295,637	9.8	288,950	9.1	327,423	9.7	286,625	7.7	274,092	8.9
Other—not health related	19,453	0.6	11,332	0.4	15,405	0.5	39,473	1.1	13,011	0.4

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

FIGURE 12

Primary Nursing Position Title of RNs, 2015–2024



Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Travel Nurse Status

In the 2022 survey, a new question was added: "Are you currently a travel nurse?" In 2024, 5.3% reported being a travel nurse, reflecting a decrease from 6.2% in 2022 (Table 33).

TABLE 33

Travel Nurse Status of RNs, 2022–2024

Travel Nurse Status	2022 (*N* = 215,429.5)		2024 (*N* = 491,885.0)	
	n	%	*n*	%
Yes	13,296.0	6.2	25,978.4	5.3
No	202,133.5	93.8	465,906.7	94.7

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Primary Nursing Position Specialty

From 2022 to 2024, the proportion of RNs who reported their primary practice specialty as acute care/critical care decreased from 16.5% to 13.9%, but it remained the most common primary specialty. The second most common position specialty in 2024 was medical-surgical at 8.8% compared to 10.0% reported in 2022. Emergency/trauma was the third most-often reported practice specialty at 6.6%, a decrease from 8.1% in 2022 (Table 34 and Figure 13).

TABLE 34

Primary Nursing Position Specialty of RNs, 2015–2024

Primary Specialty	2015 (*N* = 36,424.1)		2017 (*N* = 37,484.3)		2020 (*N* = 32,364.8)		2022 (*N* = 199,133.7)		2024 (*N* = 552,746.5)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Acute care/critical care	4,159.1	11.4	5,239.2	14.0	4,338.5	13.4	32,897.2	16.5	76,531.8	13.9
Adult health	756.1	2.1	1,447.1	3.9	1,172.9	3.6	5,069.8	2.6	20,338.8	3.7
Anesthesia	549.9	1.5	705.5	1.9	379.4	1.2	3,516.5	1.8	10,213.3	1.9
Cardiology	-	-	1,291.0	3.4	1,086.0	3.4	7,394.4	3.7	18,844.6	3.4
Community	356.7	1.0	386.6	1.0	300.9	0.9	1,920.1	1.0	5,759.4	1.0
Emergency/trauma	2,026.7	5.6	2,027.3	5.4	1,818.4	5.6	16,108.5	8.1	36,666.5	6.6
Family health	-	-	1,243.4	3.3	801.2	2.5	5,251.3	2.6	18,121.4	3.3
Genetics	40.6	0.1	-	-	-	-	328.6	0.2	1,146.2	0.2
Geriatric/gerontology	1,754.7	4.8	1,918.5	5.1	1,614.2	5.0	8,796.8	4.4	26,450.8	4.8
Home health	1,604.0	4.4	1,360.1	3.6	1,226.1	3.8	5,890.7	3.0	17,755.9	3.2
Informatics	318.2	0.9	-	-	-	-	1,071.7	0.5	2,379.8	0.4
Information technology	-	-	-	-	-	-	255.7	0.1	659.9	0.1
Maternal-child health/ obstetrics	1,633.9	4.5	1,778.1	4.7	1,422.3	4.4	8,892.7	4.5	24,756.2	4.5
Medical-surgical	3,695.7	10.1	3,203.1	8.6	2,757.8	8.5	19,876.0	10.0	48,410.0	8.8
Neonatal	808.4	2.2	809.5	2.2	725.4	2.2	4,750.5	2.4	12,013.5	2.2
Nephrology	476.4	1.3	555.7	1.5	500.7	1.6	3,237.7	1.6	7,986.4	1.4
Neurology/neurosurgical	337.1	0.9	-	-	-	-	1,924.3	1.0	5,562.4	1.0
Occupational health	280.7	0.8	339.8	0.9	314.4	1.0	1,892.8	1.0	4,650.9	0.8
Oncology	1,044.0	2.9	1,046.9	2.8	955.9	3.0	6,514.0	3.3	17,094.5	3.1
Orthopedic	436.1	1.2	-	-	-	-	2,373.4	1.2	5,054.9	0.9
Palliative care/hospice	529.1	1.5	643.3	1.7	522.2	1.6	4,099.7	2.1	10,124.9	1.8
Pediatrics	1,570.3	4.3	1,774.1	4.7	1,345.9	4.2	9,652.4	4.9	23,781.4	4.3
Perioperative	2,195.7	6.0	2,187.7	5.8	2,173.2	6.7	12,690.4	6.4	33,717.5	6.1
Primary care	1,092.5	3.0	-	-	-	-	4,661.5	2.3	11,843.8	2.1
Public health	466.0	1.3	472.3	1.3	428.9	1.3	3,440.5	1.7	8,181.5	1.5
Psychiatric/mental health/ substance abuse	1,418.4	3.9	1,534.1	4.1	1,206.8	3.7	5,036.1	2.5	19,888.6	3.6

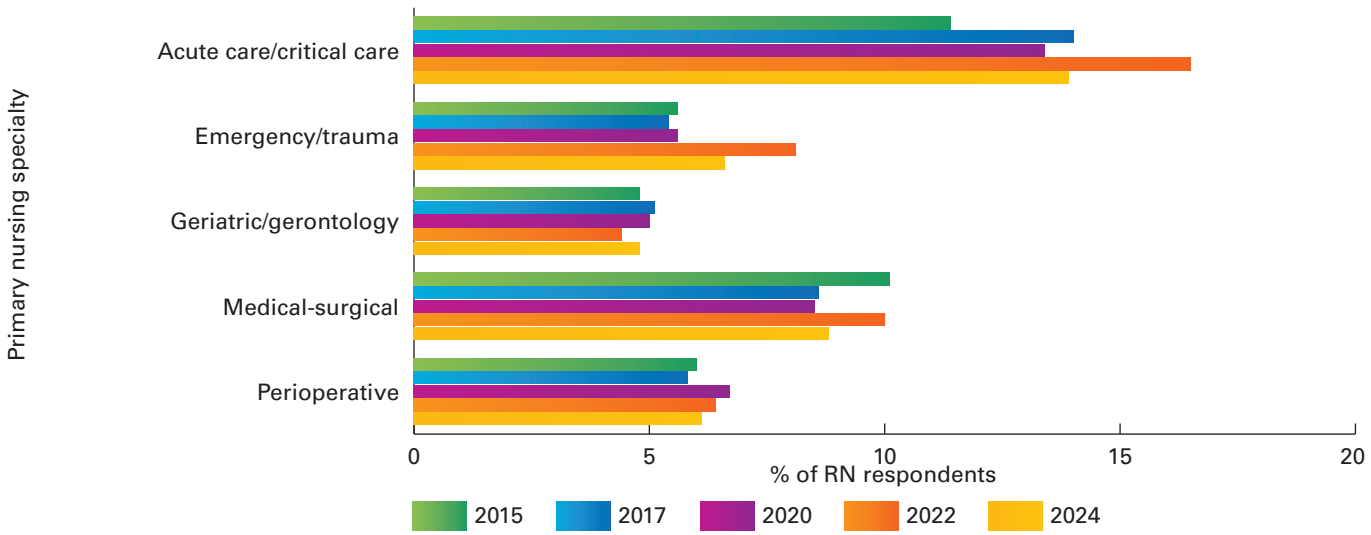
Primary Nursing Position Specialty of RNs, 2015–2024 *(continued)*

Primary Specialty	2015 (*N* = 36,424.1)		2017 (*N* = 37,484.3)		2020 (*N* = 32,364.8)		2022 (*N* = 199,133.7)		2024 (*N* = 552,746.5)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Radiology	191.2	0.5	-	-	-	-	376.8	0.2	1,518.5	0.3
Rehabilitation	717.3	2.0	725.4	1.9	541.4	1.7	1,847.2	0.9	7,731.5	1.4
School health	1,025.1	2.8	945.5	2.5	980.0	3.0	2,469.0	1.2	8,484.9	1.5
Urology	87.5	0.2	-	-	-	-	65.7	0.0	434.7	0.1
Women's health	651.7	1.8	567.1	1.5	490.5	1.5	2,111.8	1.1	6,425.2	1.2
Other—clinical specialties	-	-	4,507.7	12.0	4,229.5	13.1	3,566.0	1.8	20,645.4	3.7
Other—nonclinical specialties	-	-	775.1	2.1	1,032.1	3.2	11,154.0	5.6	39,571.5	7.2

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

FIGURE 13

Most-Reported Primary Nursing Position Specialty of RNs, 2015–2024



Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Providing Direct Patient Care—Primary Nursing Position

In 2024, 68.3% of survey respondents actively employed in nursing, reported providing direct patient care in their primary nursing position. This dropped from 2022, when 72.5% of nurses said they provided direct patient care in their primary nursing position, but is consistent with the 2020 finding of 68.6% (Table 35).

TABLE 35

RNs Providing Direct Patient Care—Primary Nursing Position, 2015–2024

Providing Direct Patient Care	2020 (*N* = 34,080.7)		2022 (*N* = 215,838.4)		2024 (*N* = 510,511.1)	
	n	%	*n*	%	*n*	%
Yes	23,391.8	68.6	156,539.8	72.5	348,479.4	68.3
No	10,688.9	31.4	59,298.6	27.5	162,031.7	31.7

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Secondary Nurse Practice Setting of RNs

Of the 17.8% of RNs who reported holding more than one nursing position (Table 29), 34.1% reported practicing in a hospital setting, 9.9% in schools of nursing, and 9.4% in an ambulatory care setting in their secondary position. While the proportion of RNs practicing in schools of nursing grew by nearly 3 percentage points from 2022 to 2024, there was a commensurate drop in the proportion of RNs working in nursing homes/extended care facilities, from 9.2% in 2022 to 6.4% in 2024 (Table 36 and Figure 14).

TABLE 36

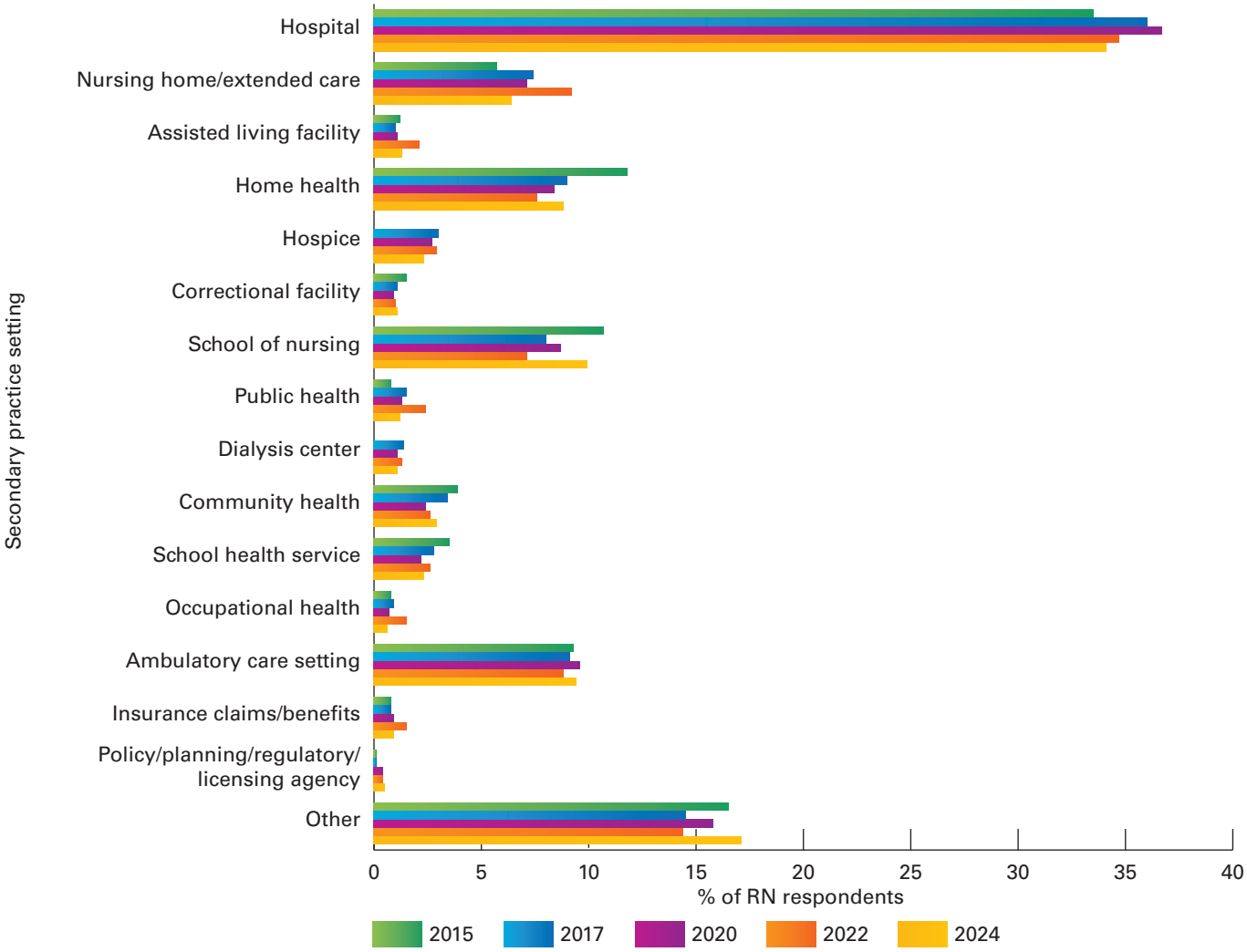
Secondary Nursing Practice Position Setting of RNs, 2015–2024

Secondary Practice Setting	2015 (*N* = 4,877.3)		2017 (*N* = 6,153.3)		2020 (*N* = 5,121.6)		2022 (*N* = 39,004.5)		2024 (*N* = 104,702.4)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Hospital	1,632.6	33.5	2,213.4	36.0	1,879.1	36.7	13,548.1	34.7	35,726.7	34.1
Nursing home/extended care	277.2	5.7	456.7	7.4	363.8	7.1	3,575.2	9.2	6,695.6	6.4
Assisted living facility	58.9	1.2	58.4	1.0	58.3	1.1	815.6	2.1	1,310.8	1.3
Home health	577.5	11.8	555.7	9.0	430.1	8.4	2,977.1	7.6	9,254.7	8.8
Hospice	-	-	185.9	3.0	139.3	2.7	1,122.3	2.9	2,419.5	2.3
Correctional facility	72.2	1.5	68.3	1.1	46.2	0.9	403.5	1.0	1,192.1	1.1
School of nursing	519.7	10.7	493.6	8.0	446.2	8.7	2,776.4	7.1	10,373.0	9.9
Public health	38.1	0.8	89.2	1.5	68.9	1.3	935.7	2.4	1,243.4	1.2
Dialysis center	-	-	87.7	1.4	54.7	1.1	521.7	1.3	1,169.6	1.1
Community health	191.1	3.9	209.6	3.4	121.6	2.4	1,002.7	2.6	3,080.2	2.9
School health service	171.7	3.5	173.0	2.8	113.2	2.2	1,006.0	2.6	2,449.6	2.3
Occupational health	39.0	0.8	57.1	0.9	36.3	0.7	564.0	1.5	633.4	0.6
Ambulatory care setting	451.2	9.3	556.7	9.1	492.6	9.6	3,438.9	8.8	9,832.5	9.4
Insurance claims/benefits	39.4	0.8	51.7	0.8	44.1	0.9	565.5	1.5	964.9	0.9
Policy/planning/regulatory/licensing agency	6.1	0.1	7.1	0.1	22.5	0.4	145.2	0.4	499.6	0.5
Other	802.5	16.5	889.3	14.5	806.9	15.8	5,606.5	14.4	17,856.8	17.1

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

FIGURE 14

Secondary Nursing Practice Position Setting of RNs, 2015–2024



Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Secondary Nursing Position Title

Of those nurses reporting more than one nursing position, 49.3% worked as staff nurses in their secondary position. This represents a decline from 2022 (52.9%). About 9% of respondents reported other health-related titles, a decrease from 15% in 2022. Additionally, 16.7% were APRNs, which increased by 4.1% from 2022 (Table 37 and Figure 15).

TABLE 37

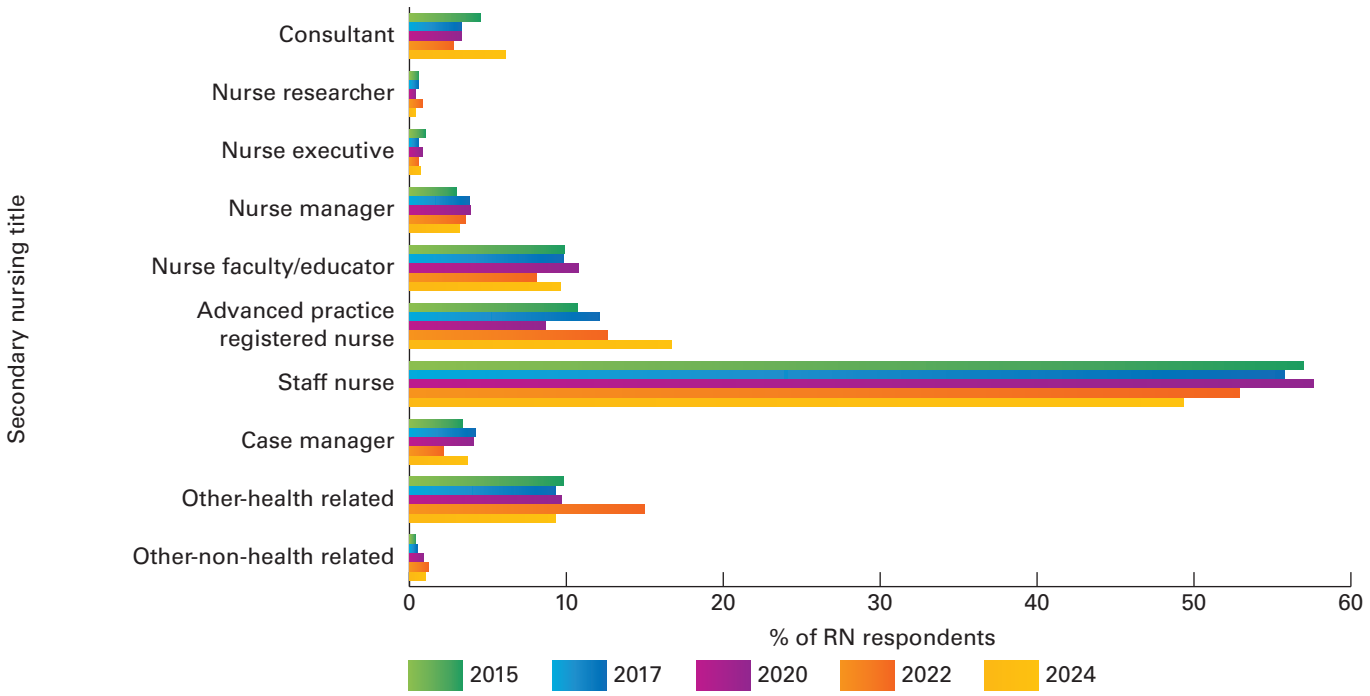
Secondary Nursing Practice Position Title of RNs, 2015–2024

Secondary Title	2015 (*N* = 4,857.8)		2017 (*N* = 6,145.9)		2020 (*N* = 5,080.8)		2022 (*N* = 38,665.7)		2024 (*N* = 107,289.8)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Consultant	216.0	4.5	201.2	3.3	165.6	3.3	1,085.5	2.8	6,574.8	6.1
Nurse researcher	28.9	0.6	36.2	0.6	21.9	0.4	300.4	0.8	383.7	0.4
Nurse executive	46.6	1.0	34.6	0.6	40.3	0.8	245.2	0.6	742.7	0.7
Nurse manager	143.2	3.0	235.4	3.8	196.2	3.9	1,408.7	3.6	3,436.1	3.2
Nurse faculty/educator	482.0	9.9	601.5	9.8	547.0	10.8	3,135.3	8.1	10,295.2	9.6
Advanced practice registered nurse	521.8	10.7	743.0	12.1	443.9	8.7	4,887.6	12.6	17,932.3	16.7
Staff nurse	2,767.9	57.0	3,430.8	55.8	2,924.9	57.6	20,461.2	52.9	52,865.8	49.3
Case manager	157.8	3.4	256.3	4.2	205.5	4.1	866.9	2.2	3,916.7	3.7
Other—health related	475.0	9.8	573.7	9.3	490.2	9.7	5,800.5	15.0	10,022.7	9.3
Other—not health related	18.6	0.4	33.3	0.5	45.3	0.9	474.2	1.2	1,119.9	1.0

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

FIGURE 15

Secondary Nursing Practice Position Title of RNs, 2015–2024



Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Providing Direct Patient Care—Secondary Nursing Practice Position

In 2024, 70.7% of respondents reported providing direct patient care in their secondary nursing position. This was a decrease from 2022, in which 75.4% of nurses said they provided direct patient care in their secondary nursing position (Table 38).

TABLE 38

Providing Direct Patient Care—Secondary Nursing Position of RNs, 2020–2024

Providing Direct Patient Care	2020 (*N* = 5,076.1)		2022 (*N* = 35,791.8)		2024 (*N* = 88,398.1)	
	n	%	*n*	%	*n*	%
Yes	3,653.3	72.0	26,985.5	75.4	62,510.8	70.7
No	1,422.7	28.0	8,806.3	24.6	25,887.2	29.3

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Salary and Earnings

Pre-tax Annual Earnings From Primary Nursing Position

The median pretax annual earnings for RNs grew to $88,000 in 2024. The percentage of respondents earning less than $40,000 annually (7.4%) decreased by 4.0% relative to 2020, and those earning between $40,000 and $60,000 (8.9%) decreased by 10.3% between 2020 and 2024. The proportion of respondents making between $60,000 and $80,000 per year (22.1%) also declined by 7.8% between 2020 and 2024. The proportion of RNs who made between $80,000 and $100,000 (24.4%) increased by 5.3%, and those making more than $100,000 per year (37.2%) increased by 16.7% between 2020 and 2024 (Table 39 and Figure 16).

TABLE 39

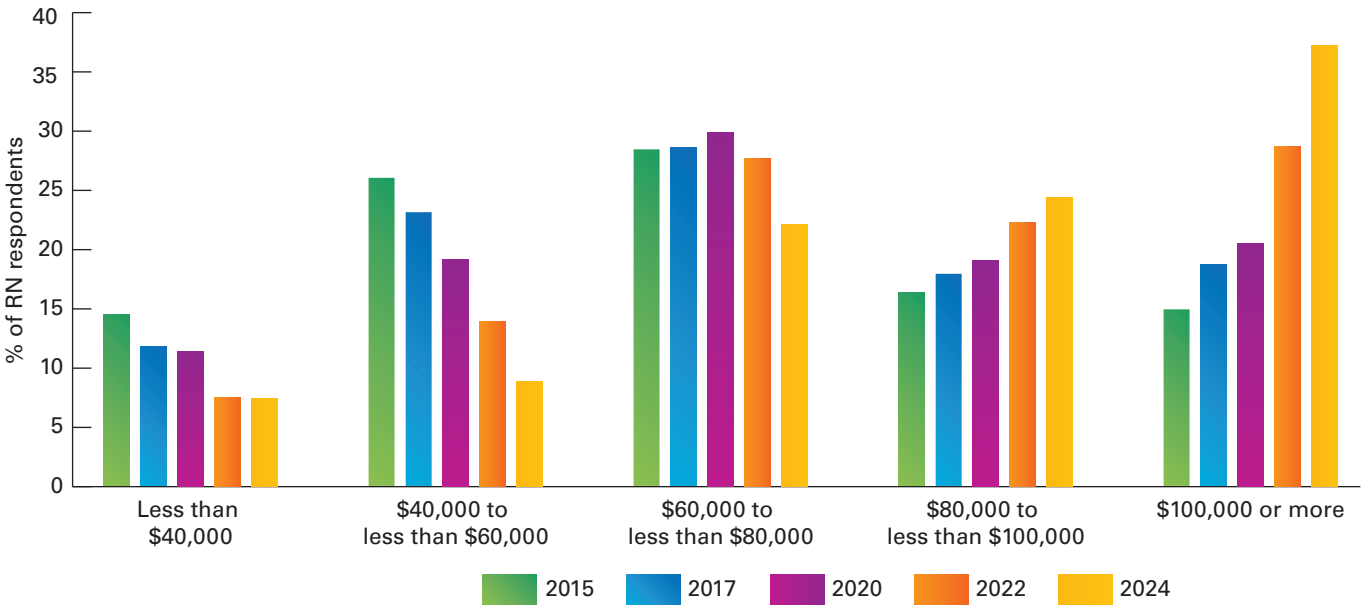
Median Annual Earnings of RNs From Primary Nursing Position, 2015–2024

Annual Earnings	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
RN Survey Respondents										
	N = 32,455.7		*N* = 35,745.6		*N* = 29,453.8		*N* = 181,491.9		*N* = 424,729.6	
<$40,000	4,711.3	14.5	4,217.8	11.8	3,355.6	11.4	13,599.2	7.5	31,272.4	7.4
$40,000 to <$60,000	8,436.8	26.0	8,243.4	23.1	5,639.5	19.2	25,203.8	13.9	37,918.4	8.9
$60,000 to <$80,000	9,202.0	28.4	10,213.3	28.6	8,808.0	29.9	50,193.6	27.7	93,910.3	22.1
$80,000 to <$100,000	5,279.8	16.3	6,386.3	17.9	5,617.0	19.1	40,376.6	22.3	103,660.6	24.4
≥$100,000	4,825.7	14.9	6,684.8	18.7	6,033.8	20.5	52,118.8	28.7	157,967.9	37.2
U.S. RN Population										
<$40,000	377,964	14.5	342,160	11.8	335,235	11.4	216,979	7.5	200,247	7.4
$40,000 to <$60,000	676,837	26.0	668,729	23.1	563,404	19.2	402,133	13.9	242,804	8.9
$60,000 to <$80,000	738,224	28.4	828,530	28.6	879,947	29.9	800,853	27.7	601,338	22.1
$80,000 to <$100,000	423,568	16.3	518,071	17.9	561,156	19.1	644,220	22.3	663,773	24.4
≥$100,000	387,136	14.9	542,292	18.7	602,796	20.5	831,570	28.7	1,011,520	37.2

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

FIGURE 16

Median Annual Earnings of RNs From Primary Position, 2015–2024



Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Earnings by Gender and Specialty

The specialty with the highest median annual wage was anesthesia at $215,000. Overall, women earned 90% of men's median wage and men reported higher earnings across most specialties. In 2024, women earned more than men in the specialties of informatics, rehabilitation, and women's health (Table 40).

TABLE 40

Median Annual Earnings of RNs for Primary Nursing Position by Specialty and Gender, 2024

Specialty	Male		Female		Nonbinary		Total	
	n	Mdn	*n*	Mdn	*n*	Mdn	*n*	Mdn
Acute care/critical care	1,859	$97,000	7,666	$90,000	19	$125,000	9,544	$91,000
Adult health	337	$86,000	2,468	$85,000	1	$60,000	2,806	$85,000
Anesthesia	981	$247,000	1,378	$200,000	2	$85,000	2,361	$215,000
Cardiology	414	$89,000	2,211	$85,000	7	$75,000	2,632	$85,000
Community	83	$83,950	844	$80,000	3	$103,000	930	$83,950
Emergency/trauma	1,105	$96,000	3,802	$86,000	4	$100,000	4,911	$90,000
Family health	319	$165,000	2,917	$100,000	6	$100,000	3,242	$100,000
Genetics	-	-	37	$85,000	-	-	37	$85,000
Geriatric/gerontology	302	$92,000	3,164	$85,000	6	$142,000	3,472	$85,000
Home health	226	$84,816	2,103	$80,000	3	$37,699	2,332	$80,000
Informatics	16	$93,000	77	$109,000	-	-	93	$108,000
Information technology	8	$106,870	16	$85,000	-	-	24	$98,000
Maternal-child health/obstetrics	18	$220,000	2,918	$85,000	4	$86,000	2,940	$85,000
Medical-surgical	715	$79,000	5,374	$80,000	12	$180,000	6,101	$80,000
Neonatal	60	$100,000	1,802	$86,000	4	$83,000	1,866	$87,000
Nephrology	187	$80,000	916	$89,000	1	$105,000	1,104	$89,000
Neurology/neurosurgical	21	$100,000	170	$90,000	-	-	191	$92,000
Occupational health	91	$117,000	623	$90,000	-	-	714	$90,000

Median Annual Earnings of RNs for Primary Nursing Position by Specialty and Gender, 2024

(continued)

Specialty	Male		Female		Nonbinary		Total	
	n	Mdn	*n*	Mdn	*n*	Mdn	*n*	Mdn
Oncology	142	$98,000	2,029	$90,000	5	$72,000	2,176	$90,000
Orthopedic	18	$109,000	194	$85,000	1	$80,000	213	$85,000
Palliative care/hospice	98	$96,000	1,254	$88,000	1	$75,000	1,353	$89,000
Pediatrics	214	$120,000	3,508	$80,000	9	$75,000	3,731	$80,000
Perioperative	493	$95,000	3,629	$84,249	6	$75,000	4,128	$85,000
Primary care	46	$110,000	529	$96,000	1	$121,500	576	$96,000
Public health	53	$17,000	789	$83,000	3	$88,000	845	$82,000
Psychiatric/mental health/substance abuse	610	$90,000	2,979	$90,000	4	$60,000	3,593	$90,000
Radiology	9	$114,000	43	$91,000	-	-	52	$95,000
Rehabilitation	132	$70,560	832	$80,000	2	$90,000	966	$79,500
School health	24	$74,961	1,342	$64,000	2	$70,000	1,368	$65,000
Urology	1	$95,000	20	$69,000	-	-	21	$70,000
Women's health	13	$80,000	1,411	$82,000	11	$87,360	1,435	$84,000
Other—clinical specialties	589	$106,000	4,715	$93,000	10	$10,000	5,314	$95,000
Other—nonclinical specialties	265	$90,000	2,588	$88,000	7	$65,520	2,860	$88,000
Total	9,449	$95,000	64,348	$86,000	134	$86,000		

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Earnings by Highest Education

In 2024, wage growth was most pronounced among RNs holding associate degrees, baccalaureate degrees, and nursing doctorates other than DNP or PhD. RNs holding a PhD reported the highest median earnings at $125,000 per year. RNs with a DNP or nursing doctorate other than a DNP or PhD both reported annual median wages of $115,000, while RNs holding a master's earned $106,000. BSN-educated RNs earned $85,000, while their ADN and diploma-educated colleagues earned $80,000 and $73,000 per year, respectively (Table 41).

TABLE 41

Median Annual Earnings of RNs for Primary Nursing Position by Nurses' Highest Education, 2017–2024

Highest Education	2017		2020		2022		2024	
	n	Mdn	*n*	Mdn	*n*	Mdn	*n*	Mdn
Diploma	1,358	$72,900	1,318	$65,000	635	$70,000	2,602	$73,000
Associate degree	8,303	$65,000	8,308	$63,000	4,847	$70,000	18,398	$80,000
Baccalaureate degree	12,714	$68,000	14,964	$67,000	10,183	$75,000	35,637	$85,000
Master's degree	4,999	$95,000	4,617	$90,000	3,620	$100,000	19,555	$106,000
PhD	200	$100,000	209	$93,600	151	$105,000	704	$125,000
DNP	413	$104,000	519	$100,000	411	$110,000	2,729	$115,000
Other nursing doctoral degree	37	$96,000	40	$96,000	43	$100,000	199	$115,000

Note. DNP = doctor of nursing practice; RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Earnings by State

Annual median wages grew in 2024 compared to 2022 earnings in every state. As in previous surveys, the states with the highest reported median wages were California ($120,000), Oregon ($100,000), New York ($97,000), and the District of Columbia ($93,000). The state with the lowest annual median wage was Tennessee ($77,636) (Table 42).

TABLE 42

Median Annual Earnings in Primary Nursing Position by Jurisdiction Where RNs are Currently Practicing, 2015–2024

Jurisdiction	2015	2017	2020	2022	2024
Alabama	$55,000	$60,000	$68,000	$70,000	$80,000
Alaska	$70,000	$76,000	$79,000	$85,000	$92,000
Arizona	$69,000	$70,500	$75,000	$81,000	$90,000
Arkansas	$56,000	$61,605	$68,000	$70,765	$82,000
California	$90,000	$88,000	$90,000	$104,000	$120,000
Colorado	$63,000	$65,000	$74,030	$79,000	$84,000
Connecticut	$75,000	$75,000	$80,000	$86,500	$92,000
Delaware	$71,000	$71,900	$75,000	$80,000	-
District of Columbia	$75,000	$79,000	$80,000	$90,000	$93,000
Florida	$60,000	$65,500	$72,000	$77,751	$85,000
Georgia	$64,000	$68,000	$75,000	$80,000	$85,000
Hawaii	$82,000	$85,000	$90,000	$100,000	-
Idaho	$60,000	$62,000	$70,000	$73,000	$84,000
Illinois	$65,000	$67,000	$73,169	$79,000	$80,000
Indiana	$53,000	$64,000	$69,000	$75,000	$80,000
Iowa	$51,662	$58,000	$63,000	$68,000	$80,000
Kansas	$54,000	$64,000	$65,000	$73,000	$80,000
Kentucky	$60,000	$64,000	$68,000	$74,000	$80,000
Louisiana	$60,000	$65,000	$68,000	$78,000	-
Maine	$60,000	$63,000	$68,800	$75,000	$82,000
Maryland	$70,000	$74,466	$78,000	$80,000	$90,000
Massachusetts	$75,633	$76,000	$79,655	$83,000	$92,000
Michigan	$60,000	$67,000	$73,000	$78,000	$80,800
Minnesota	$64,870	$66,000	$74,000	$77,000	$85,000
Mississippi	$58,000	$60,000	$68,000	$73,000	$80,000
Missouri	-	-	$68,640	$81,000	-
Montana	$58,000	$60,000	$66,000	$74,800	$80,000
Nebraska	$54,000	$60,000	$68,000	$70,441	$82,000
Nevada	$72,000	$77,000	$78,000	$83,750	-
New Hampshire	$64,000	$66,500	$75,000	$75,000	$85,000
New Jersey	$76,000	$75,915	$80,000	$88,000	$92,000
New Mexico	$62,000	$69,500	$73,000	$81,125	-
New York	$77,000	$80,000	$80,000	$90,000	$97,000
North Carolina	$58,890	$61,000	$69,000	$78,316	-
North Dakota	$54,000	$60,000	$65,000	$70,000	$80,000
Ohio	$58,000	$65,000	$70,000	$74,000	$80,000
Oklahoma	$58,326	$64,000	$70,000	$75,000	$84,000
Oregon	$75,000	$80,000	$80,000	$91,500	$100,000
Pennsylvania	$62,000	$70,000	$75,000	$81,000	$90,000
Rhode Island	$70,000	$70,000	$77,400	$82,000	$85,000
South Carolina	$57,000	$64,000	$69,609	$78,000	$80,000
South Dakota	$51,000	$54,000	$62,000	$71,025	$80,000
Tennessee	$55,000	$62,000	$70,000	$70,000	$77,636
Texas	$68,700	$72,000	$75,000	$80,000	-
Utah	$53,000	$65,000	$68,000	$73,000	$80,000
Vermont	$62,000	$61,000	$73,492	$76,000	$85,000

Median Annual Earnings in Primary Nursing Position by Jurisdiction Where RNs are Currently Practicing, 2015–2024 *(continued)*

Jurisdiction	2015	2017	2020	2022	2024
Virginia	$60,000	$69,000	$75,000	$79,000	$87,000
Washington	$70,000	$75,000	$80,000	$86,000	-
West Virginia	$55,000	$62,000	$68,000	$72,000	-
Wisconsin	$60,000	$63,000	$70,500	$75,000	$80,000
Wyoming	$64,000	$65,000	$70,000	$81,000	-
Guam	-	-	-	-	$80,000
Northern Mariana Islands	$35,000	$41,600	$60,000	$64,000	$80,000

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming. Additionally, Missouri did not participate in the 2015 and 2017 surveys, and Guam did not participate in the 2015-2022 surveys.

Earnings by Age and Years Licensed

Median annual earnings tend to increase with both age and experience; however, an examination of Table 43 suggests these increases are more dependent on experience rather than on age. Earnings grew consistently with experience, while growth with age varies and begins to decrease after 60 years of age.

TABLE 43

Median Annual Earnings of RNs for Primary Nursing Position by Nurses' Age and Years Licensed, 2024

Age, y	No. of Years Licensed								Total	
	0–1		2–5		6–10		≥11			
	n	Mdn	*n*	Mdn	*n*	Mdn	*n*	Mdn	*n*	Mdn
18–29	2,609	$60,000	3,825	$74,000	795	$80,000	8	$84,000	7,236	$72,000
30–34	869	$63,000	1,835	$77,000	4,310	$85,000	1,011	$85,000	8,025	$80,000
35–39	613	$65,000	1,132	$80,000	2,513	$90,000	5,505	$91,000	9,763	$87,000
40–44	379	$75,000	770	$80,000	1,765	$89,000	7,965	$95,000	10,889	$90,000
45–49	210	$67,000	457	$80,000	1,050	$90,000	7,599	$95,000	9,316	$90,000
50–54	129	$65,000	296	$75,000	742	$84,199	9,024	$97,000	10,191	$95,000
55–59	72	$64,000	140	$75,000	409	$90,000	7,600	$95,000	8,221	$95,000
60–64	16	$60,000	67	$79,783	233	$92,000	7,574	$95,000	7,890	$94,000
≥65	7	$50,000	12	$80,000	69	$72,000	7,469	$80,000	7,557	$80,000
Total	4,904	$63,000	8,534	$75,000	11,885	$87,000	53,765	$93,000	-	-

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Earnings by APRNs

In 2024, CRNAs continued to report the highest earnings among APRNs (median $218,000), with NPs reporting the second highest wages (median $120,000) followed by CNMs (median $116,000). Earnings grew for all APRN roles in 2024, with median earnings for CNMs and CNSs growing 18.3% and 11.3%, respectively, compared to 2022 earnings (Table 44).

TABLE 44

Median Annual Earnings for Primary Nursing Position by APRN Role, 2017–2024

APRN Role	2017		2020		2022		2024	
	n	Mdn	*n*	Mdn	*n*	Mdn	*n*	Mdn
CNP	2,982	$100,000	1,958	$100,000	1,755	$108,000	8,064	$120,000
CNS	644	$88,000	448	$80,000	399	$89,000	637	$100,000
CRNA	557	$171,000	341	$180,000	244	$197,500	1,396	$218,000
CNM	186	$97,750	116	$86,000	74	$101,739	316	$116,000

Note. APRN = advanced practice registered nurse; CNM = certified nurse midwife; CNP = certified nurse practitioner; CRNA = certified registered nurse anesthetist. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Telehealth Utilization

Percentage of RNs Providing Telehealth

The telehealth question was revised for the 2024 survey to reflect nurses' current use of telehealth technologies. The proportion of respondents who reported that they provided no telehealth increased by nearly 25%, with 74.2% of nurses reporting no telehealth usage in 2024. One in 5 respondents (19.3%) provided nursing services via telehealth to patients within state borders, and 8.9% reported communicating or providing services across state borders. Few nurses (1.2%) reported communicating with patients or providing services across national borders (Table 45).

TABLE 45

RNs Providing Telehealth, 2015–2024

Providing Telehealth	2015 (*N* = 37,354.6)		2017 (*N* = 39,441.6)		2020 (*N* = 33,582.4)		2022 (*N* = 203,074.2)		2024 (*N* = 485,415.7)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
No	19,119.1	51.2	18,095.1	45.9	17,460.2	52.0	101,365.6	49.9	360,228.2	74.2
Yes, to clients or patients within state borders	-	-	-	-	-	-	-	-	93,789.4	19.3
Yes, to clients or patients across state borders	-	-	-	-	-	-	-	-	43,156.0	8.9
Yes, to clients or patients across national borders	-	-	-	-	-	-	-	-	5,714.0	1.2

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. In 2024, respondents were asked to select all that applied. This question was modified for the 2024 survey to become a single set of binary yes-no questions; previously, participants were asked to estimate the percentage of their work time spent providing telehealth. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Modes of Communication Used for Telehealth

As seen in previous years, telephone was the most common mode of communication for the provision of telehealth services in 2024 (82.8%). The use of electronic messaging was the second most common mode (38.2%), which has increased steadily since 2015. Video calls held steady from 2022 levels (35.4%) as the third most common mode at 34.8% in 2024 (Table 46).

TABLE 46

Modes of Communication Used for Telehealth by RNs, 2015–2024

Mode of Telehealth	2015 (*N* = 15,864.1)		2017 (*N* = 17,066.0		2020 (*N* = 13,775.4)		2022 (*N* = 83,950.6)		2024 (*N* = 158,412.2)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Electronic messaging	2,954.0	18.6	3,599.6	21.1	3,379.3	24.5	27,458.1	32.7	60,509.6	38.2
Virtual intensive care unit	167.7	1.1	276.9	1.6	316.3	2.3	3,046.7	3.6	5,756.9	3.6
Telephone	15,406.7	97.1	16,143.9	94.6	12,893.3	93.6	73,855.0	88.0	131,164.1	82.8
Email	5,128.2	32.3	5,574.4	32.7	4,497.9	32.7	28,028.3	33.4	53,806.0	34.0
Video call	463.7	2.9	619.8	3.6	1,517.1	11.0	29,677.6	35.4	55,180.7	34.8
Other	1,070.9	6.8	926.4	5.4	753.5	5.5	5,561.9	6.6	13,046.1	8.2

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Employment Changes Over the Prior 2 Years

Impact on Employment

In 2022, RNs were asked about changes in their employment caused by the COVID-19 pandemic (Table 47). In 2024, RNs were asked more broadly if similar changes had occurred in the past 2 years. Significantly fewer RNs reported their workload increased over the past 2 years (35.8%) compared to 2022 (61.8%). However, a higher proportion of RNs (19.6%) indicated they changed their practice setting compared to 2022 (15.6%). Furthermore, the proportion of RNs who indicated they had retired increased from 6.0% in 2022 to 10.5% in 2024. Approximately 31% of RNs reported that there was no impact on their employment over the past 2 years (Table 48).

TABLE 47

Impact of the COVID-19 Pandemic on RN Employment, 2022

Impact of COVID-19	2022	
	n	%
RN Survey Respondents	**(*N* = 250,709.3)**	
My workload increased	154,905.6	61.8
I became a travel nurse	13,434.5	5.4
I changed my practice setting	39,109.8	15.6
I started doing telehealth	15,268.1	6.1
I left nursing	6,719.7	2.7
I retired	15,035.5	6.0
No impact	31,184.7	12.4
Other	43,185.8	17.2
U.S. RN Population		
My workload increased	2,471,562	61.8
I became a travel nurse	214,351	5.4
I changed my practice setting	624,007	15.6
I started doing telehealth	243,606	6.1
I left nursing	107,215	2.7
I retired	239,895	6.0
No impact	497,561	12.4
Other	689,042	17.2

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Missouri, North Carolina, New Mexico, Washington, and Wyoming.

TABLE 48

Employment Changes Over Previous 2 Years, 2024

Employment Changes	2024	
	n	%
RN Survey Respondents	**(*N* = 609,064.4)**	
My workload increased	218,257.8	35.8
I became a travel nurse	30,518.3	5.0
I changed my practice setting	119,229.9	19.6
I started doing telehealth	14,484.4	2.4
I left nursing	17,742.7	2.9
I retired	63,671.4	10.5
No impact	189,669.6	31.1
Other	75,711.1	12.4
U.S. RN Population		
My workload increased	1,397,576	35.8
I became a travel nurse	195,419	5.0
I changed my practice setting	763,468	19.6
I started doing telehealth	92,748	2.4
I left nursing	113,613	2.9
I retired	407,709	10.5
No impact	1,214,517	31.1
Other	484,803	12.4

Note. RN = registered nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Nurse Well-Being

Emotionally Drained

Nearly one-fifth of RNs (18.9%) reported that they felt emotionally drained from work every day in 2024, representing a decrease from 23.9% in 2022. However, nearly a quarter of RNs (24.6%) reported they were emotionally drained from work at least a few times every week. Only 6.8% reported never feeling emotionally drained from work (Table 49).

TABLE 49

Prevalence of RNs Feeling Emotionally Drained, 2022–2024

Felt Emotionally Drained	2022 (*N* = 239,525.5)		2024 (*N* = 590,274.5)	
	n	%	*n*	%
Never	11,997.6	5.0	39,886.9	6.8
A few times a year	22,007.6	9.2	75,911.9	12.9
Once a month or less	18,481.9	7.7	55,325.4	9.4
A few times a month	37,914.3	15.8	104,204.9	17.7
Once a week	27,374.7	11.4	57,915.5	9.8
A few times a week	64,472.9	26.9	145,430.7	24.6
Every day	57,276.6	23.9	111,599.1	18.9

Note. RN = registered nurse. This question was not administered in Hawaii.

Used Up

Half of RNs reported feeling used up at the end of their workday a few times per week or every day (49.7%). Only 7.6% reported never feeling used up at the end of their workday (Table 50).

TABLE 50

Prevalence of RNs Feeling Used Up, 2022–2024

Felt Used Up	2022 (N = 238,535.4)		2024 (N = 591,562.6)	
	n	%	n	%
Never	13,423.1	5.6	44,656.2	7.6
A few times a year	17,208.9	7.2	62,979.1	10.7
Once a month or less	15,702.6	6.6	50,281.0	8.5
A few times a month	30,373.2	12.7	85,764.6	14.5
Once a week	26,609.1	11.2	54,315.0	9.2
A few times a week	62,924.5	26.4	144,171.9	24.4
Every day	72,293.9	30.3	149,394.8	25.3

Note. RN = registered nurse. This question was not administered in Hawaii.

Fatigue

One-fifth of RNs (21.2%) reported feeling fatigued when they get up and face another day on the job every day. Another fifth (20.9%) reported feeling fatigued a few times per week. Furthermore, 9.8% of RNs reported feeling this way once per week. Only 11.5% reported never feeling fatigued (Table 51).

TABLE 51

Prevalence of RNs Feeling Fatigued, 2022–2024

Felt Fatigue	2022 (*N* = 238,780.7)		2024 (*N* = 591,135.6)	
	n	%	*n*	%
Never	19,594.7	8.2	68,135.4	11.5
A few times a year	21,548.7	9.0	74,475.8	12.6
Once a month or less	19,788.0	8.3	54,325.6	9.2
A few times a month	31,919.5	13.4	86,895.6	14.7
Once a week	27,482.0	11.5	58,164.3	9.8
A few times a week	55,652.9	23.3	123,674.1	20.9
Every day	62,795.0	26.3	125,464.9	21.2

Note. RN = registered nurse. This question was not administered in Hawaii.

Burnout

The proportion of RNs reporting they feel burned out from work either every day or a few times per week decreased from 45.2% in 2022 to 35.4% in 2024. Of note, 15.0% reported no burnout from work (Table 52).

TABLE 52

Prevalence of RNs Feeling Burned Out, 2022–2024

Felt Burned Out	2022 (*N* = 238,420.3)		2024 (*N* = 590,411.9)	
	n	%	*n*	%
Never	26,003.5	10.9	88,392.6	15.0
A few times a year	29,406.4	12.3	101,132.2	17.1
Once a month or less	21,739.6	9.1	62,137.7	10.5
A few times a month	30,730.1	12.9	84,384.9	14.3
Once a week	22,876.1	9.6	45,276.1	7.7
A few times a week	46,233.6	19.4	97,061.5	16.4
Every day	61,431.0	25.8	112,027.0	19.0

Note. RN = registered nurse. This question was not administered in Hawaii.

End of Your Rope

Proportionally fewer RNs reported that they felt they were at the end of their rope at least a few times per week or every day in 2024 (22.2%) compared to 2022 (29.4%). The percentage of RNs reporting they felt they were at the end of their rope once per week proportionally decreased between 2022 (9.2%) and 2024 (5.9%). More than one-third of RNs (36.3%) indicated they never felt like they were at the end of their rope in 2024 (Table 53).

TABLE 53

Prevalence of RNs Feeling at the End of Their Rope, 2022–2024

Felt at End of Rope	2022 (N = 238,187.0)		2024 (N = 585,343.7)	
	n	%	n	%
Never	66,571.2	28.0	212,683.1	36.3
A few times a year	31,951.3	13.4	95,516.0	16.3
Once a month or less	21,266.7	8.9	50,561.1	8.6
A few times a month	26,454.6	11.1	61,813.1	10.6
Once a week	21,834.0	9.2	34,791.2	5.9
A few times a week	35,017.1	14.7	68,100.7	11.6
Every day	35,092.1	14.7	61,878.6	10.6

Note. RN = registered nurse. This question was not administered in Hawaii.

Licensed Practical Nurses/Licensed Vocational Nurses

Demographics

Gender

The proportion of LPNs/LVNs who identified as male was 9.1% in 2024, reflecting a small drop from the 10.2% who identified as male in 2022, but still indicating a marginal upward trend since 2015 (Table 54).

TABLE 54

Gender Distribution of LPNs/LVNs, 2015–2024

Gender	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents										
	***N* = 28,891.0**		***N* = 34,616.8**		***N* = 39,530.0**		***N* = 54,380.7**	%	***N* = 130,670.2**	
Male	2,169.7	7.5	2,670.9	7.7	3,195.8	8.1	5,563.2	10.2	11,824.6	9.1
Female	26,721.3	92.5	31,945.9	92.3	36,303.1	91.8	48,712.3	89.6	118,623.7	90.8
Nonbinary	-	-	-	-	31.1	0.1	105.2	0.2	221.9	0.2
U.S. LPN/LVN Population										
Male	65,246	7.5	61,064	7.7	75,932	8.1	92,604	10.2	78,891	9.1
Female	803,559	92.5	730,383	92.3	862,559	91.8	810,861	89.6	791,432	90.8
Nonbinary	-	-	-	-	739	0.1	1,751	0.2	1,480	0.2

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. "Other" was added as a response option with the 2020 survey, and it was renamed "nonbinary" in 2022.

Age

The median age for LPNs/LVNs in 2024 was 50 years. The largest age bracket of LPNs/LVNs in 2024 was age 65 years or older (16.1%), but the mid-range age brackets (40–54 years) made up a larger proportion of the workforce than in previous years when the plurality was similarly older than 65 years, such as 2017 and 2020. Compared to 2022, there appeared to be a reversion toward an older workforce. Notably, the proportion of the LPN/LVN workforce younger than 30 years is the lowest that has been observed since 2015, at 7.0%, compared to the previous low point of 7.4% in 2020 (Table 55 and Figure 17).

TABLE 55

Age Distribution of LPNs/LVNs, 2015–2024

Age, y	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents										
	***N* = 27,172.4**		***N* = 34,454.1**		***N* = 37,868.7**		***N* = 51,883.5**		***N* = 126,797.4**	
16–29	2,652.5	9.8	3,072.7	8.9	2,816.1	7.4	4,955.1	9.6	8,910.9	7.0
30–34	2,579.5	9.5	2,930.1	8.5	3,163.8	8.4	5,783.9	11.2	11,223.7	8.9
35–39	2,689.3	9.9	3,541.2	10.3	3,710.1	9.8	5,485.8	10.6	12,441.1	9.8
40–44	3,331.8	12.3	3,539.4	10.3	3,885.0	10.3	6,280.0	12.1	14,381.3	11.3
45–49	3,375.1	12.4	4,052.6	11.8	4,253.5	11.2	6,205.3	12.0	14,739.5	11.6
50–54	3,076.4	11.3	3,875.0	11.2	4,056.5	10.7	7,787.3	15.0	15,864.1	12.5
55–59	3,516.3	12.9	4,428.0	12.9	4,305.6	11.4	5,073.6	9.8	13,993.5	11.0
60–64	3,264.9	12.0	4,476.9	13.0	4,770.8	12.6	4,177.8	8.1	14,794.6	11.7
≥65	2,686.6	9.9	4,538.3	13.2	6,907.3	18.2	6,134.5	11.8	20,448.6	16.1
U.S. LPN/LVN Population										
16–29	79,764	9.8	70,251	8.9	66,910	7.4	82,482	9.6	59,452	7.0
30–34	77,569	9.5	66,991	8.5	75,172	8.4	96,279	11.2	74,882	8.9
35–39	80,873	9.9	80,962	10.3	88,152	9.8	91,316	10.6	83,005	9.8
40–44	100,194	12.3	80,921	10.3	92,307	10.3	104,537	12.1	95,949	11.3
45–49	101,495	12.4	92,654	11.8	101,063	11.2	103,293	12.0	98,339	11.6
50–54	92,513	11.3	88,595	11.2	96,382	10.7	129,626	15.0	105,842	12.5
55–59	105,742	12.9	101,239	12.9	102,301	11.4	84,455	9.8	93,362	11.0

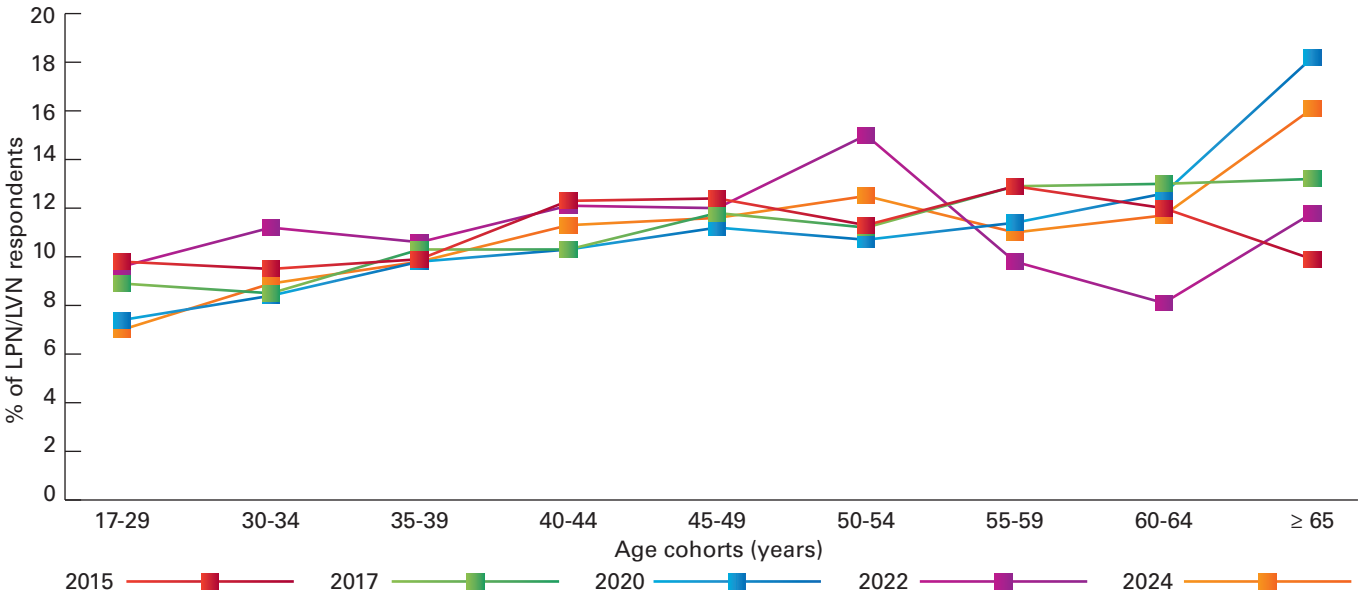
Age Distribution of LPNs/LVNs, 2015–2024 *(continued)*

Age, y	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
60–64	98,182	12.0	102,356	13.0	113,354	12.6	69,544	8.1	98,706	11.7
≥65	80,791	9.9	103,759	13.2	164,117	18.2	102,115	11.8	136,429	16.1

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

FIGURE 17

Age Distribution of LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Gender by Age

The distribution of female LPNs/LVNs largely reflects the age distribution of the LPN/LVN workforce overall, with an increase in proportion from the youngest age groups until age 40 years, where it plateaus until another jump within the oldest age group. Male nurses appeared to be slightly younger, with a plurality aged between 50–54 years. Nonbinary LPNs/LVNs reflected a very different distribution, with the majority being younger than 40 years (Table 56).

TABLE 56

Gender of LPNs/LVNs by Age, 2024: Weighted Sample Values

Gender	Age, y, n (%)									
	16–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	≥65	n
Male	910.2 (8.1)	1,042.4 (9.2)	1,163.1 (10.3)	1,110.2 (9.8)	1,400.6 (12.4)	1,524.8 (13.5)	1,350.9 (12.0)	1,301.2 (11.5)	1,481.0 (13.1)	11,284.3
Female	7,892.4 (6.9)	10,058.1 (8.8)	11,132.9 (9.8)	13,099.6 (11.5)	13,221.2 (11.6)	14,205.5 (12.5)	12,437.2 (10.9)	13,335.3 (11.7)	18,741.5 (16.4)	114,123.7
Nonbinary	42.4 (20.9)	16.6 (8.2)	57.3 (28.2)	30.2 (14.9)	22.2 (10.9)	11.6 (5.7)	10.3 (5.1)	0.9 (0.5)	11.6 (5.7)	203.2
Total	8,845.1 (7.0)	11,117.1 (8.9)	12,353.2 (9.8)	14,240.0 (11.3)	14,643.9 (11.7)	15,741.9 (12.5)	13,798.5 (11.0)	14,637.4 (11.7)	20,234.1 (16.1)	125,611.3

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Race

From 2017 to 2024, the proportion of LPNs/LVNs who identified as White/Caucasian continued to decrease, from 71.4% in 2017 to 64.8% in 2024. Compared to 2022, the proportion of LPNs/LVNs who identified as Black/African American increased from 17.6% to 20.1% (Table 57 and Figure 18).

TABLE 57

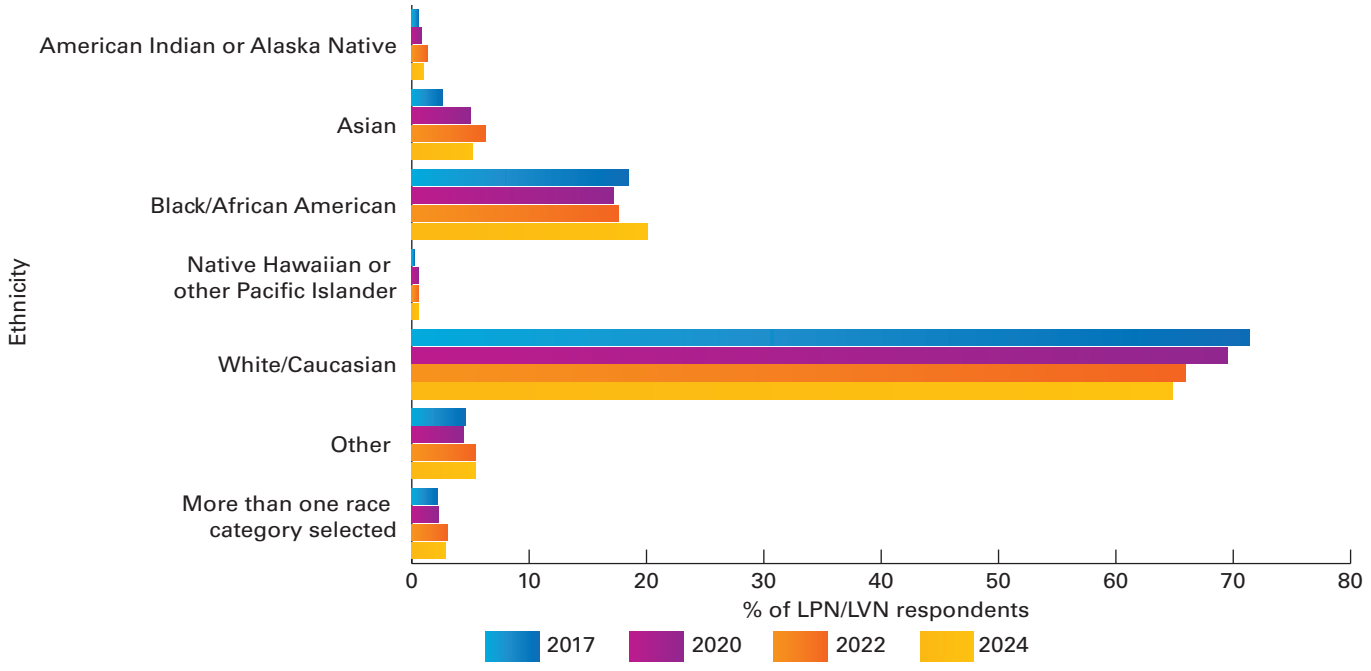
Race of LPNs/LVNs, 2017–2024

Race	2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	***N* = 34,467.5**		***N* = 39,397.4**		***N* = 53,913.0**		***N* = 131,086**	
American Indian or Alaska Native	219.8	0.6	316.6	0.8	673.1	1.3	1,342.2	1.0
Asian	897.4	2.6	1,980.6	5.0	3,415.1	6.3	6,784.5	5.2
Black/African American	6,372.4	18.5	6,790.7	17.2	9,482.5	17.6	26,378.2	20.1
Native Hawaiian or Other Pacific Islander	62.4	0.2	225.2	0.6	309.3	0.6	742.6	0.6
White/Caucasian	24,604.0	71.4	27,385.1	69.5	35,527.2	65.9	84,920.8	64.8
Other	1,568.5	4.6	1,743.9	4.4	2,915.6	5.4	7,066.8	5.4
More than one race category selected	743.1	2.2	921.6	2.3	1,590.2	3.0	3,851.0	2.9
U.S. LPN/LVN Population								
American Indian or Alaska Native	5,024	0.6	7,522	0.8	11,205	1.3	8,955	1.0
Asian	20,517	2.6	47,059	5.0	56,848	6.3	45,265	5.2
Black/ African American	145,692	18.5	161,346	17.2	157,844	17.6	175,990	20.1
Native Hawaiian or Other Pacific Islander	1,427	0.2	5,351	0.6	5,149	0.6	4,954	0.6
White/Caucasian	562,524	71.4	650,668	69.5	591,382	65.9	566,574	64.8
Other	35,860	4.6	41,435	4.4	48,533	5.4	47,148	5.4
More than one race category selected	16,990	2.2	21,897	2.3	26,471	3.0	25,693	2.9

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Respondents were asked to select all that applied. Responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

FIGURE 18

Race of LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Hispanic/Latino Ethnicity

In 2024, 11.7% of LPNs/LVNs identified as being of Hispanic/Latino origin. This finding represented a small increase from 2022, when 11.5% of LPNs/LVNs identified as Hispanic/Latino (Table 58).

TABLE 58

Hispanic/Latino Ethnicity of LPNs/LVNs, 2015–2024

Ethnicity	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents										
	***N* = 30,620.8**		***N* = 34,449.3**		***N* = 39,335.6**		***N* = 53,914.9**		***N* = 129,432.3**	
Hispanic or Latino origin	1,964.6	6.4	2,558.6	7.4	3,912.8	10.0	6,219.1	11.5	15,143.2	11.7
Not of Hispanic or Latino origin	28,656.3	93.6	31,890.6	92.6	35,422.9	90.0	47,695.8	88.5	114,289.1	88.3
U.S. LPN/LVN Population										
Hispanic or Latino origin	59,079	6.4	58,498	7.4	92,968	10.0	103,522	11.5	101,032	11.7
Not of Hispanic or Latino origin	861,746	93.6	729,119	92.6	841,645	90.0	793,940	88.5	762,513	88.3

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. In the 2015 survey, the Hispanic/Latino origin and race categories were combined into one question. The Hispanic/Latino origin and race categories were separated for the 2017 survey and those that followed.

Gender by Race

Although the majority of LPNs/LVNs of each gender identified as White/Caucasian, the male population appeared more racially diverse than their female colleagues. About 55% of male LPNs/LVNs identified as White/Caucasian, whereas 65.9% of female LPNs/LVNs reported the same. Male LPNs/LVNs were also more likely than female LPNs/LVNs to identify as Asian (11.2% vs. 4.6%) (Table 59).

TABLE 59

Gender of LPNs/LVNs by Race, 2024: Weighted Sample Values

Gender	*n* (%)							
	American Indian or Alaska Native	Asian	Black/African American	Hawaiian or Other Pacific Islander	White/ Caucasian	Other	More than one race	*n*
Male	140.0 (1.2)	1,318.5 (11.2)	2,461.6 (20.9)	152.5 (1.3)	6,513.6 (55.4)	767.3 (6.5)	402.9 (3.4)	11,756.4
Female	1,171.7 (1.0)	5,438.1 (4.6)	23,675.8 (20.1)	584.9 (0.5)	77,667.8 (65.9)	5,939.6 (5.0)	356.6 (2.9)	117,834.5
Nonbinary	1.5 (0.7)	5.0 (2.3)	22.0 (10.1)	0.0 (0.0)	132.8 (61.0)	25.7 (11.8)	30.4 (14.0)	217.5
Total	1,313.2 (1.0)	6,761.6 (5.2)	26,159.5 (20.2)	737.5 (0.6)	84,314.2 (65.0	6,732.6 (5.2)	3,789.9 (2.9)	129,808.5

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Respondents were asked to select all that applied. The responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

Age by Race

As with the 2020 and 2022 nursing workforce studies, in 2024, nurses older than 55 years (and especially older than 60 years) continued to mostly identify as White/Caucasian relative to the rest of the LPN/LVN cohort. However, the youngest age bracket appeared to be less diverse than the middle age brackets: 65.8% of LPNs/LVNs younger than 30 years were identified as White/Caucasian compared to 57.2% of the nurses between the ages of 30–34 years, which is the most diverse age group (Table 60).

TABLE 60

Age of LPNs/LVNs by Race, 2024: Weighted Sample Values

Age, y	*n* (%)							
	American Indian or Alaska Native	Asian	Black/African American	Hawaiian or Other Pacific Islander	White/ Caucasian	Other	More than one race	*n*
16–29	109.3 (1.2)	628.5 (7.1)	1,408.4 (15.8)	35.0 (0.4)	5,861.4 (65.8)	551.8 (6.2)	307.4 (3.5)	8,901.9
30–34	136.4 (1.2)	768.6 (6.9)	2,623.5 (23.6)	44.2 (0.4)	6,360.6 (57.2)	791.1 (7.1)	397.3 (3.6)	11,121.7
35–39	102.7 (0.8)	678.3 (5.5)	2,767.2 (22.5)	48.6 (0.4)	7,463.1 (60.6)	805.6 (6.5)	445.3 (3.6)	12,310.9
40–44	152.0 (1.1)	897.8 (6.3)	3,453.2 (24.2)	116.5 (0.8)	8,378.0 (58.6)	682.2 (4.8)	609.4 (4.3)	14,289.0
45–49	211.8 (1.4)	695.5 (4.7)	3,389.7 (23.1)	158.8 (1.1)	8,659.1 (59.0)	979.1 (6.7)	588.3 (4.0)	14,682.2
50–54	117.7 (0.8)	820.4 (5.2)	3,577.3 (22.7)	104.8 (0.7)	9,962.7 (63.2)	718.4 (4.6)	464.6 (3.0)	15,765.8
55–59	178.4 (1.3)	894.4 (6.4)	2,622.9 (18.8)	58.1 (0.4)	9,240.2 (66.1)	744.6 (5.3)	239.7 (1.7)	13,978.3
60–64	138.3 (0.9)	471.4 (3.2)	2,316.5 (15.7)	79.6 (0.5)	10,844.9 (73.7)	585.1 (4.0)	285.5 (1.9)	14,721.2
≥65	151.8 (0.8)	574.0 (2.8)	3,061.8 (15.1)	52.8 (0.3)	15,401.4 (75.7)	681.1 (3.4)	422.3 (2.1)	20,345.3
Total	1,298.6 (1.0)	6,428.9 (5.1)	25,220.4 (20.0)	698.3 (0.6)	82,171.5 (65.2)	6,538.9 (5.2)	3,759.8 (3.0)	126,116.4

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Respondents were asked to select all that applied. The responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

Education

Type of Nursing Degree or Credentials for First U.S. Nursing License

Similar to 2022, in 2024, a majority of LPNs/LVNs (82.1%) held a practical/vocational certificate when first licensed in the United States. Around 10% of those surveyed held a nursing diploma, and 6.6% held an associate degree (Table 61 and Figure 19).

TABLE 61

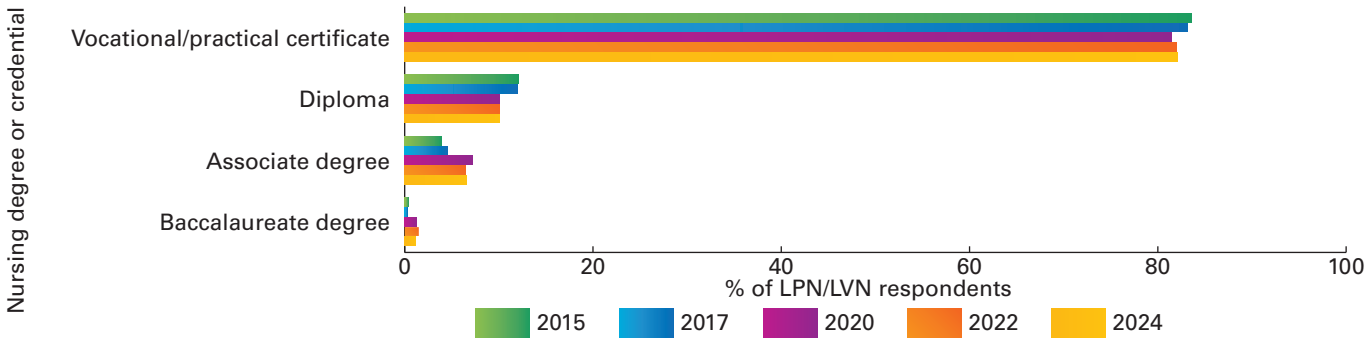
Type of Nursing Degree or Credential of LPNs/LVNs for First U.S. Nursing License, 2015–2024

Nursing Degree or Credential	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	***N* = 30,223.3**		***N* = 34,108.8**		***N* = 38,868.2**		***N* = 52,916.2**		***N* = 128,986.8**	
Vocational/practical certificate	25,257.4	83.6	28,395.0	83.2	31,665.6	81.5	43,388.8	82.0	105,923.7	82.1
Diploma	3,661.3	12.1	4,098.6	12.0	3,914.4	10.1	5,317.0	10.1	13,066.3	10.1
Associate degree	1,168.8	3.9	1,521.3	4.5	2,793.3	7.2	3,423.7	6.5	8,479.5	6.6
Baccalaureate degree	135.8	0.4	93.9	0.3	495.0	1.3	786.7	1.5	1,517.3	1.2
U.S. LPN/LVN Population										
Vocational/practical certificate	759,537	83.6	649,197	83.2	752,371	81.5	722,246	82.0	706,701	82.1
Diploma	110,101	12.1	93,707	12.0	93,006	10.1	88,507	10.1	87,176	10.1
Associate degree	35,146	3.9	34,782	4.5	66,368	7.2	56,990	6.5	56,574	6.6
Baccalaureate degree	4,085	0.4	2,146	0.3	11,760	1.3	13,095	1.5	10,123	1.2

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

FIGURE 19

Type of Nursing Degree or Credential of LPNs/LVNs for First U.S. Nursing License



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Type of Nursing Degree or Credential for First U.S. Nursing License by Age

There was a drop-off among younger LPNs/LVNs who had nursing diplomas when they were first licensed in the United States, with 6.3% of those younger than 30 years holding a diploma compared to 11.3% of those between the ages of 60–64 years. This youngest group was also the most likely to have had a practical/vocational certificate, with 86.4% of nurses younger than 30 years compared to the overall rate of 82.3% (Table 62).

TABLE 62

Type of Nursing Degree or Credential of LPNs/LVNs for First U.S. Nursing License by Age, 2024: Weighted Sample Values

Nursing Degree or Credential	Age, y, *n* (%)									
	16–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	≥65	*n*
Practical/vocational certificate	7,655.7 (86.4)	9,222.0 (82.9)	9,955.2 (81.6)	11,619.0 (81.7)	11,644.8 (80.4)	12,641.3 (81.5)	11,213.1 (82.0)	11,872.0 (81.6)	16,648.4 (83.9)	102,471.4 (82.3)
Diploma	554.5 (6.3)	933.1 (8.4)	1,188.3 (9.7)	1,386.2 (9.8)	1,581.5 (10.9)	1,703.4 (11.0)	1,446.8 (10.6)	1,650.6 (11.3)	2,114.6 (10.7)	12,558.9 (10.1)
Associate degree	557.4 (6.3)	774.5 (7.0)	862.6 (7.1)	978.4 (6.9)	1,065.1 (7.4)	919.6 (5.9)	905.1 (6.6)	921.5 (6.3)	1,004.2 (5.1)	7,988.5 (6.4)
Baccalaureate degree	90.6 (1.0)	198.1 (1.8)	201.0 (1.7)	239.0 (1.7)	201.6 (1.4)	243.3 (1.6)	102.7 (0.8)	110.3 (0.8)	78.6 (0.4)	1,465.2 (1.2)
Total	8,858.1 (7.1)	11,127.8 (8.9)	12,207.2 (9.8)	14,222.5 (11.4)	14,493.1 (11.6)	15,507.6 (12.5)	13,667.6 (11.0)	14,554.5 (11.7)	19,845.7 (15.9)	124,484.1

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Highest Level of Nursing Education

In 2024, 74.9% of LPNs/LVNs reported their highest level of nursing education as a practical/vocational certificate, followed by an associate degree (11.4%) and a nursing diploma (11.3%) (Table 63 and Figure 20).

TABLE 63

Highest Level of Nursing Education Among LPNs/LVNs, 2015–2024

Nursing Degree or Credential	2015 (*N* = 25,626.5)		2017 (*N* = 34,208.6)		2020 (*N* = 38,746.1)		2022 (*N* = 49.455.0)		2024 (*N* = 128,575.0)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Practical/vocational certificate	19,481.3	76.0	26,615.3	77.8	27,899.9	72.0	35,510.0	71.8	96,239.9	74.9
Diploma	3,882.5	15.2	4,900.8	14.3	4,732.5	12.2	6,051.6	12.2	14,548.7	11.3
Associate degree	1,888.6	7.4	2,509.6	7.3	4,910.1	12.7	6,473.3	13.1	14,604.8	11.4

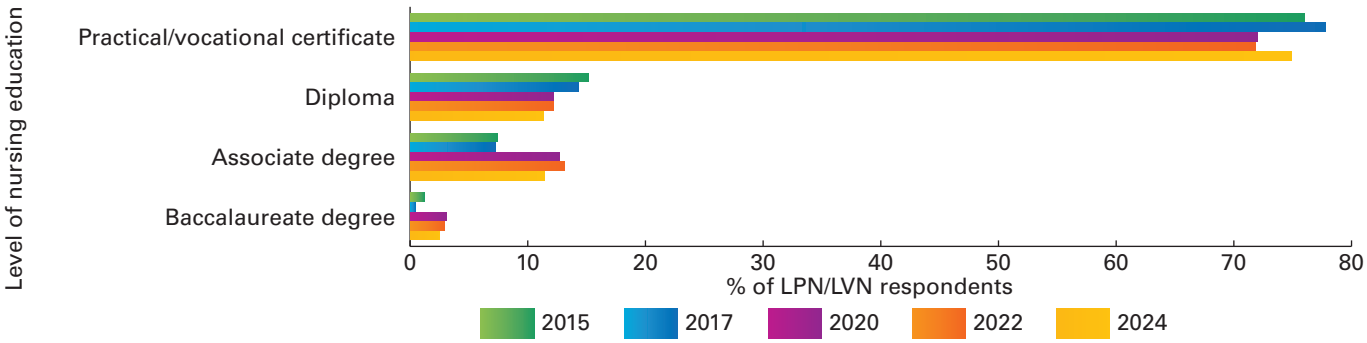
Highest Level of Nursing Education Among LPNs/LVNs, 2015–2024 *(continued)*

Nursing Degree or Credential	2015 (*N* = 25,626.5)		2017 (*N* = 34,208.6)		2020 (*N* = 38,746.1)		2022 (*N* = 49.455.0)		2024 (*N* = 128,575.0)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Baccalaureate degree	308.5	1.2	182.8	0.5	1,203.5	3.1	1,420.1	2.9	3,181.6	2.5

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. In the 2015 survey, a single question asked, "What is your highest level of education?" Possible responses included both nursing and non-nursing degrees. Nursing and non-nursing degrees were asked separately beginning with the 2017 survey.

FIGURE 20

Highest Level of Nursing Education Among LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Race by Highest Level of Nursing Education

Broadly, LPNs/LVNs across many racial groups exhibited a similar pattern for their highest level of nursing education. Nearly three-quarters of LPNs/LVNs (of all races) reported earning a practical/vocational certificate as their highest nursing education credential (74.8%). Most racial groups were more likely to have an associate degree than a nursing diploma, though LPNs/LVNs who identified as Black/African American were more likely to have a diploma (15.9%) than an associate degree (12.1%). Asian nurses were more likely to have a baccalaureate degree (17.3%) than a diploma (6.7%) or associate degree (10.0%), and more than a quarter (27.3%) of LPNs/LVNs who identified as Asian had either an associate or baccalaureate degree (Table 64).

TABLE 64

Race of LPNs/LVNs by Highest Level of Nursing Education, 2024: Weighted Sample Values

Race	*n* (%)				*n*
	Practical/Vocational Certificate	Diploma	Associate Degree	Baccalaureate Degree	
American Indian or Alaska Native	982.4 (74.9)	71.9 (5.5)	219.3 (16.7)	38.1 (2.9)	1,311.7
Asian	4,322.9 (66.0)	440.0 (6.7)	655.2 (10.0)	1,130.7 (17.3)	6,548.7
Black/African American	17,891.2 (69.9)	4,065.7 (15.9)	3,091.8 (12.1)	565.9 (2.2)	25,614.6
Native Hawaiian or Other Pacific Islander	560.6 (77.8)	11.6 (1.6)	116.8 (16.2)	31.4 (4.4)	720.4
White/Caucasian	64,371.0 (77.6)	8,504.6 (10.3)	8,885.4 (10.7)	1,161.1 (1.4)	82,922.0
Other	4,782.0 (70.6)	862.9 (12.7)	978.5 (14.4)	153.1 (2.3)	6,776.6
More than one race category selected	2,627.4 (69.3)	489.5 (12.9)	580.9 (15.3)	91.2 (2.4)	3,788.9
Total	95,537.4 (74.8)	14,446.2 (11.3)	14,528.0 (11.4)	3,171.4 (2.5)	127,682.9

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. For the race question, respondents were asked to select all that applied. The responses were subsequently recoded to ensure that the race categories were mutually exclusive. Respondents selecting multiple race categories were reclassified under "more than one race category selected."

Highest Level of Non-nursing Education

The majority of LPNs/LVNs who reported attaining a non-nursing education credential held an associate degree (68.8%). The distribution of the highest non-nursing education credentials held by LPNs/LVNs has not changed substantially since 2017 (Table 65).

TABLE 65

Highest Level of Non-nursing Education of LPNs/LVNs, 2017–2024

Highest Non-nursing Degree	2017 (*N* = 9,832.6)		2020 (*N* = 12,497.8)		2022 (*N* = 18,469.8)		2024 (*N* = 39,577.3)	
	n	%	*n*	%	*n*	%	*n*	%
Associate degree	6,762.0	68.8	8,719.7	69.8	12,786.6	69.2	27,236.3	68.8
Baccalaureate degree	2,460.1	25.0	3,008.1	24.1	4,612.7	25.0	9,593.9	24.2
Master's degree	515.6	5.2	674.0	5.4	877.0	4.8	2,336.7	5.9
Doctoral degree	95.0	1.0	95.9	0.8	193.5	1.1	410.3	1.0

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Licensure

Number of Years Licensed

LPN/LVN respondents reported they were licensed for a median of 15 years in 2024 compared to the 13 years reported in the 2022 survey. The proportion of respondents who have been licensed for 10 or fewer years (36.2%) is the lowest rate observed since these surveys began in 2015, whereas the proportion of those who have been licensed between 11–20 years (28.7%) is the highest rate observed since 2015 (Table 66 and Figure 21).

TABLE 66

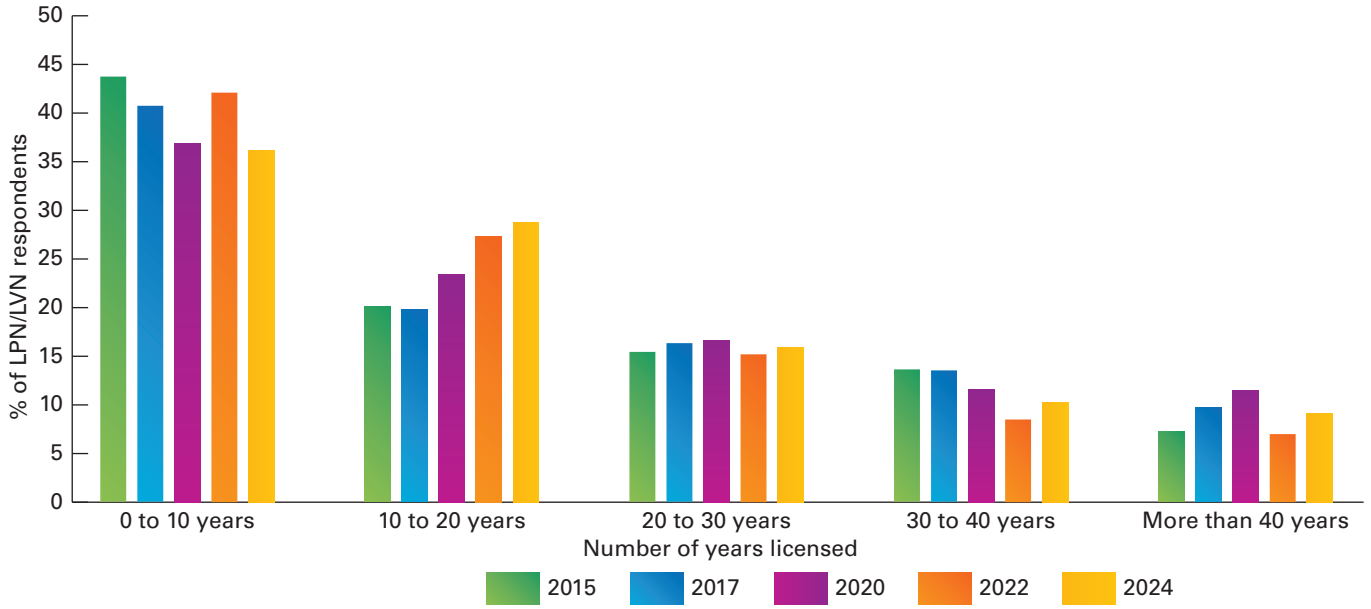
Number of Years Licensed as an LPN/LVN, 2015–2024

Years Licensed	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents										
	***N* = 26,138.0**		***N* = 33,652.6**		***N* = 36,311.8**		***N* = 50,033.44**		***N* = 118,874.8**	
0–10	11,417.8	43.7	13,694.1	40.7	13,401.4	36.9	21,074.2	42.1	42,968.0	36.2
11–20	5,258.9	20.1	6,674.0	19.8	8,502.2	23.4	13,658.1	27.3	34,155.7	28.7
21–30	4,018.0	15.4	5,483.9	16.3	6,028.3	16.6	7,578.4	15.2	18,879.0	15.9
31–40	3,552.0	13.6	4,531.9	13.5	4,213.2	11.6	4,229.0	8.5	12,089.2	10.2
≥41	1,891.4	7.2	3,268.6	9.7	4,166.7	11.5	3,493.8	7.0	10,783.0	9.1
U.S. LPN/LVN Population										
0–10	343,353	43.7	313,090	40.7	318,416	36.9	350,798	42.1	286,673	36.2
11–20	158,145	20.1	152,589	19.8	202,012	23.4	227,352	27.3	227,879	28.7
21–30	120,828	15.4	125,379	16.3	143,232	16.6	126,149	15.2	125,957	15.9
31–40	106,815	13.6	103,614	13.5	100,105	11.6	70,395	8.5	80,657	10.2
≥41	56,877	7.2	74,730	9.7	99,000	11.5	58,157	7.0	71,942	9.1

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

FIGURE 21

Number of Years Licensed as an LPN/LVN, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Country in Which LPN/LVN Was Initially Licensed

Almost all (99.0%) of LPN/LVN respondents were initially licensed in the United States, the same proportion seen in 2020 and 2022. Another 0.3% were licensed in the Philippines, 0.2% in Canada, and 0.1% in India (Table 67).

TABLE 67

Country in Which LPNs/LVNs Were Initially Licensed, 2020–2024

Country	2020		2022		2024	
	n	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	***N* = 39,472.5**		***N* = 54,920.8**		***N* = 137,184.0**	
United States	38,959.1	98.7	54,218.6	98.7	135,790.1	99.0
Canada	48.2	0.1	55.6	0.1	235.0	0.2
Philippines	237.9	0.6	397.6	0.7	463.1	0.3
India	28.9	0.1	29.6	0.1	75.3	0.1
Other	198.4	0.5	219.5	0.4	620.5	0.5
U.S. LPN/LVN Population						
United States	925,665	98.7	902,518	98.7	905,963	99.0
Canada	1,145	0.1	925	0.1	1,568	0.2
Philippines	5,652	0.6	6,618	0.7	3,090	0.3
India	687	0.1	492	0.1	503	0.1
Other	4,714	0.5	3,654	0.4	4,140	0.5

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. This question was not administered in Hawaii.

Country in Which Entry-Level Education was Received

More than 98.0% of LPN/LVN respondents received their entry-level nursing education in the United States, the highest rate observed since we first asked this question in 2020. The most popular other country was the Philippines at nearly 1% (Table 68).

TABLE 68

Country in Which LPNs/LVNs Received Entry-Level Nursing Education, 2020–2024

Country	2020		2022		2024	
	n	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	**(*N* = 39,562.0)**		**(*N* = 51,136.5)**		***N* = 137,616.6)**	
United States	38,669.4	97.7	49,923.7	97.6	135,195.5	98.2
Canada	62.4	0.2	52.3	0.1	323.8	0.2
Philippines	517.3	1.3	809.1	1.6	1,188.0	0.9
India	50.2	0.1	60.1	0.1	135.3	0.1
Other	262.7	0.7	291.3	0.6	774.1	0.6
U.S. LPN/LVN Population						
United States	918,782	97.7	831,026	97.6	901,996	98.2
Canada	1,483	0.2	871	0.1	2,160	0.2
Philippines	12,291	1.3	13,468	1.6	7,926	0.9
India	1,193	0.1	1,000	0.1	902	0.1
Other	6,242	0.7	4,849	0.6	5,165	0.6

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Multistate License

In 2024, 32.6% of LPNs/LVNs reported having a multistate license. This finding represents an 11.4% increase in the number of LPNs/LVNs possessing a multistate license since 2020 (Table 69).

TABLE 69

LPNs/LVNs Holding a Multistate License, 2020–2024

Multistate License	2020 (*N* = 32,235.9)		2022 (*N* = 42,649.7)		2024 (*N* = 93032.02)	
	n	%	*n*	%	*n*	%
Yes	6,847.5	21.2	12,223.9	28.7	30,354.6	32.6
No	25,388.3	78.8	30,425.8	71.3	62,677.5	67.4

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Multistate License Use

Compared to 2022, the proportion of LPNs/LVNs who used their multistate license increased by 4.7% in 2024. For LPNs/LVNs who had a multistate license, 5.3% used it for telehealth, 1.8% used it for disaster support, 1.1% for distance education, and 18.5% used it for another purpose (Table 70).

TABLE 70

Multistate License Use by LPNs/LVNs, 2022–2024

Multistate License Use	2022 (*N* = 12,135.0)		2024 (*N* = 28,343.52)	
	n	%	*n*	%
Telehealth	531.0	4.4	1,508.6	5.3
Distance education	115.2	1.0	311.1	1.1
Disaster support	293.1	2.4	496.2	1.8
Have not used	9,296.3	76.6	20,364.4	71.9
Other	2,134.6	17.6	5,230.8	18.5

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Employment

Employment Status

The proportion of LPNs/LVNs who were actively employed in nursing in 2024 (88.4%) was the highest rate observed since 2015; however, the proportion employed full-time (70.6%) dropped slightly since 2022 (71.0%). The proportions of LPNs/LVNs who are actively employed in a field other than nursing (5.1%), unemployed (6.5%), or retired (6.4%) are the lowest on record (Table 71 and Figure 22).

TABLE 71

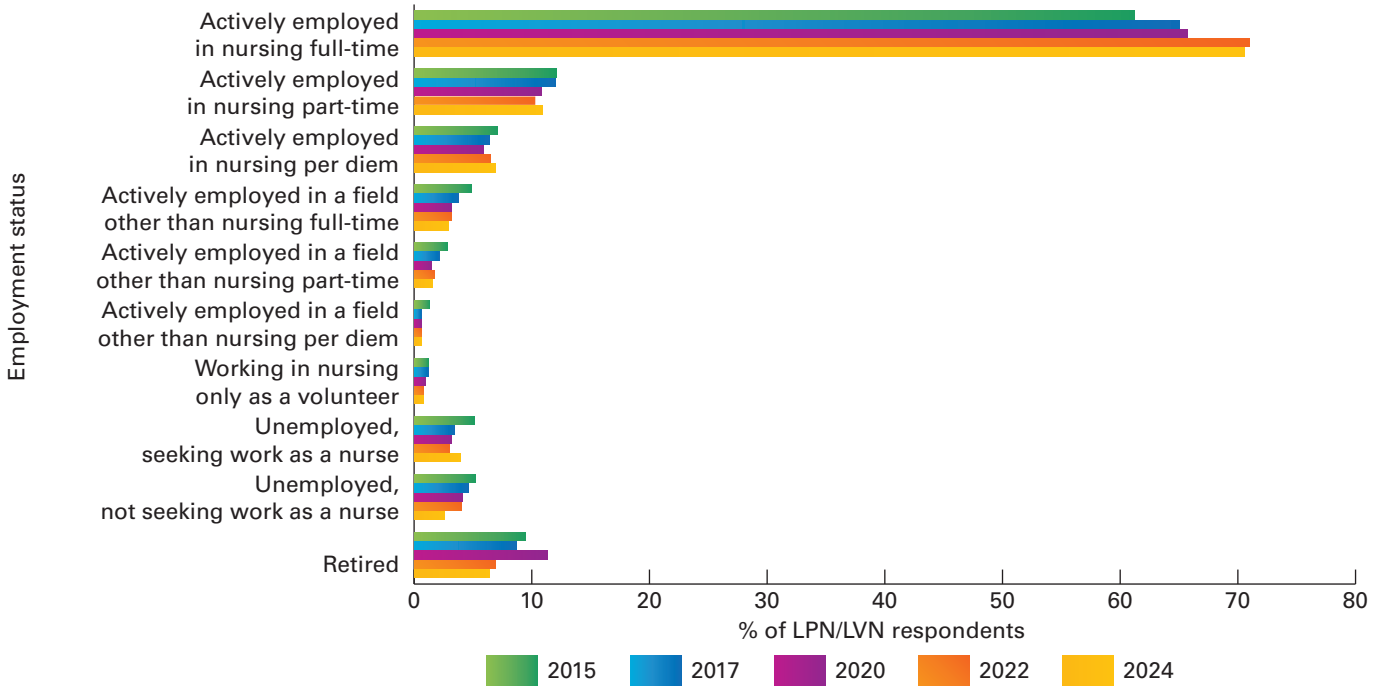
Employment Status of LPNs/LVNs, 2015–2024

Employment Status	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	***N* = 30,766.0**		***N* = 34,570.2**		***N* = 39,579.6**		***N* = 54,901.4**		***N* = 137,203.3**	
Actively employed in nursing full-time	18,823.4	61.2	22,476.5	65.0	26,020.5	65.7	38,963.4	71.0	96,872.2	70.6
Actively employed in nursing part-time	3,714.0	12.1	4,151.9	12.0	4,275.9	10.8	5,633.0	10.3	14,967.2	10.9
Actively employed in nursing per diem	2,179.4	7.1	2,227.5	6.4	2,326.0	5.9	3,567.4	6.5	9,401.2	6.9
Actively employed in a field other than nursing full-time	1,504.3	4.9	1,306.6	3.8	1,257.8	3.2	1,769.1	3.2	3,924.9	2.9
Actively employed in a field other than nursing part-time	868.5	2.8	756.7	2.2	600.9	1.5	938.7	1.7	2,218.2	1.6
Actively employed in a field other than nursing per diem	386.7	1.3	193.6	0.6	230.5	0.6	331.1	0.6	835.9	0.6
Working in nursing only as a volunteer	366.1	1.2	408.9	1.2	383.6	1.0	455.6	0.8	1,062.0	0.8
Unemployed, seeking work as a nurse	1,558.7	5.1	1,162.0	3.4	1,260.9	3.2	1,625.4	3.0	5,312.7	3.9
Unemployed, not seeking work as a nurse	1,588.9	5.2	1,595.0	4.6	1,614.7	4.1	2,203.0	4.0	3,548.1	2.6
Retired	2,927.1	9.5	2,991.2	8.7	4,457.7	11.3	3,798.7	6.9	8,735.7	6.4
U.S. LPN/LVN Population										
Actively employed in nursing full-time	566,053	61.2	513,884	65.0	618,245	65.7	648,581	71.0	646,311	70.6
Actively employed in nursing part-time	111,686	12.1	94,925	12.0	101,595	10.8	93,766	10.3	99,858	10.9
Actively employed in nursing per diem	65,540	7.1	50,928	6.4	55,266	5.9	59,383	6.5	62,723	6.9
Actively employed in a field other than nursing full-time	45,236	4.9	29,874	3.8	29,885	3.2	29,448	3.2	26,186	2.9
Actively employed in a field other than nursing part-time	26,116	2.8	17,301	2.2	14,277	1.5	15,625	1.7	14,800	1.6
Actively employed in a field other than nursing per diem	11,629	1.3	4,427	0.6	5,477	0.6	5,511	0.6	5,577	0.6
Working in nursing only as a volunteer	11,008	1.2	9,350	1.2	9,114	1.0	7,583	0.8	7,085	0.8
Unemployed, seeking work as a nurse	46,873	5.1	26,566	3.4	29,959	3.2	27,056	3.0	35,445	3.9
Unemployed, not seeking work as a nurse	47,782	5.2	36,467	4.6	38,365	4.1	36,670	4.0	23,672	2.6
Retired	88,024	9.5	68,387	8.7	105,915	11.3	63,232	6.9	58,283	6.4

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Respondents were asked to select all that applied. In Hawaii, "working in nursing only as a volunteer" was not offered as an option.

FIGURE 22

Employment Status of LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Reasons for Unemployment

As in previous cycles, the most frequently selected reason for being unemployed was "taking care of home and family" (35.3%). Nonetheless, this represented the lowest reported rate for this category since 2015. Also, fewer LPNs/LVNs selected "school" as their reason for being unemployed (10.2%), again representing the lowest proportion observed since 2015. By contrast, the proportion of respondents who noted "difficulty in finding a nursing position" (13.2%) increased compared with 2022 (8.9%). Another 8.6% of respondents reported inadequate salary, a higher proportion than in all previous years except for 2022 (Table 72 and Figure 23).

TABLE 72

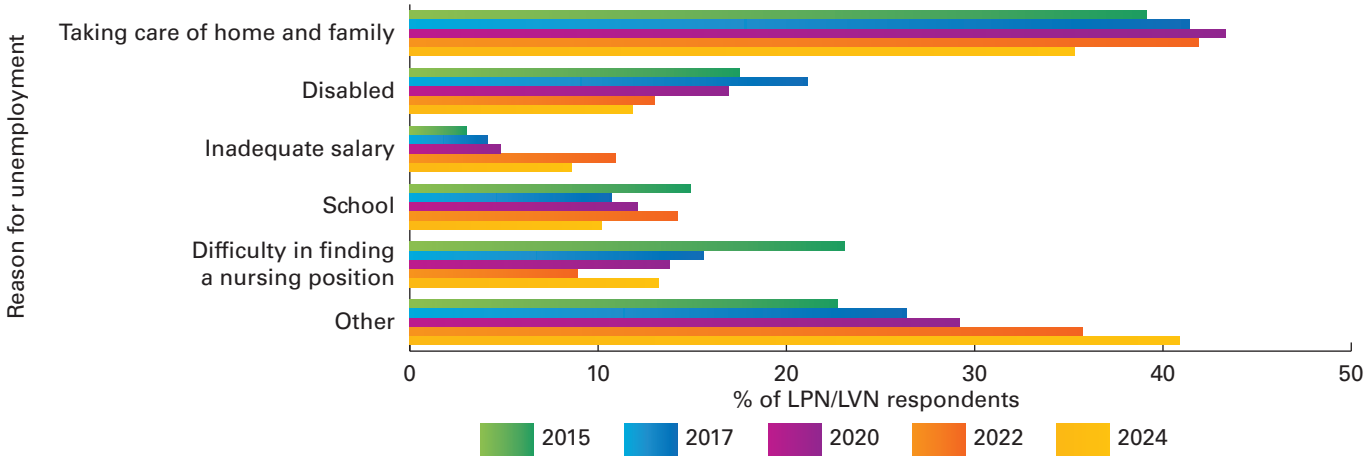
Reasons for Unemployment Among LPNs/LVNs, 2015–2024

Reasons for Unemployment	2015 (*N* = 2,644.5)		2017 (*N* = 2,696.8)		2020 (*N* = 2,781.4)		2022 (*N* = 3,672.8)		2024 (*N* = 8,690.0)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Taking care of home and family	1,033.0	39.1	1,117.4	41.4	1,203.2	43.3	1,537.9	41.9	3,065.0	35.3
Disabled	463.3	17.5	570.0	21.1	470.5	16.9	478.7	13.0	1,026.6	11.8
Inadequate salary	77.9	3.0	111.5	4.1	133.7	4.8	401.8	10.9	743.5	8.6
School	393.9	14.9	288.4	10.7	336.5	12.1	521.2	14.2	882.2	10.2
Difficulty in finding a nursing position	610.4	23.1	419.6	15.6	384.5	13.8	325.6	8.9	1,148.1	13.2
Other	600.1	22.7	713.0	26.4	812.3	29.2	1,309.7	35.7	3,557.5	40.9

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were unemployed or retired. Respondents were asked to select all that applied. In Hawaii, "inadequate salary" was not offered as an option.

FIGURE 23

Reasons for Unemployment Among LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse.

Intent to Leave or Retire

For the 2024 survey, new options were added to the question regarding nurses' intent to retire or leave nursing in the next 5 years, differentiating between those who intended to retire relative to those who intended to leave the profession for other reasons. More than 40% of respondents reported an intent to leave or retire within the next 5 years. Of this group, 18.6% intended to retire, whereas 22.7% intended to leave nursing for other reasons (Table 73).

TABLE 73

Plans of LPNs/LVNs for the Next 5 Years, 2020–2024

5 Year Plans	2020 (*N* = 31,693.0)		2022 (*N* = 43,129.4)		2024 (*N* = 100,835.4)	
	n	%	*n*	%	*n*	%
Yes	6,406.8	20.2	11,041.4	25.6	41,663.4	41.3
Yes, I plan to retire	-	-	-	-	18,746.6	18.6
Yes, I plan to leave nursing	-	-	-	-	22,916.8	22.7
No	25,286.2	79.8	32,087.9	74.4	59,172.0	58.7

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii. This question was introduced in the 2020 survey and modified in 2024 to offer separate options for those who plan to retire, and those who plan to leave nursing.

Reasons for Intent to Leave or Retire

Nurses who reported an intent to retire or leave the profession in the next 5 years were also asked to select all the reasons that influenced their decision. More than half of the respondents to this question (52.4%) indicated that retirement was the reason, and 41.5% indicated that stress and burnout were the cause. Respondents also identified "workload" (32.6%), "understaffing" (29.5%), and "inadequate salary" (25.0%) as drivers of their intent to leave (Table 74).

TABLE 74

Reason for Intent to Leave or Retire Within the Next 5 Five Years for LPNs/LVNs, 2024

Reasons to Retire or Leave	2024 (*N* = 34,644.3)	
	n	%
Retirement	18,135.5	52.4
Taking care of home and family	4,452.5	12.9
School	1,883.3	5.4
Inadequate salary	8,648.6	25.0
Understaffing	10,215.8	29.5
Workplace violence or bullying	3,791.8	11.0
Workload	11,297.6	32.6
Disability	1,410.0	4.1
Stress and burnout	14,367.4	41.5
Other	3,533.3	10.2

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing and planned to retire or leave nursing in the next 5 years. This question was not administered in Hawaii.

Number of Positions Currently Held

Four-fifths of LPNs/LVNs reported working in one nursing position (80.1%). In 2024, the percentage of LPNs/LVNs who reported working in two positions decreased to 16.6% from 17.4% in 2022 (Table 75).

TABLE 75

Number of Positions Currently Held by LPNs/LVNs, 2015–2024

No. of Positions Held	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents										
	(*N* = 23,317.3)		(*N* = 27,576.8)		(*N* = 31,231.7)		(*N* = 45,431.9)		(*N* = 111,027.3)	
1	19,706.5	84.5	22,725.0	82.4	25,738.9	82.4	35,983.4	79.2	88,956.5	80.1
2	3,113.0	13.4	4,117.5	14.9	4,705.7	15.1	7,882.7	17.4	18,446.2	16.6
≥3	497.8	2.1	734.3	2.7	787.1	2.5	1,565.8	3.5	3,624.7	3.3
U.S. LPN/LVN Population										
1	592,611	84.5	519,563	82.4	611,554	82.4	598,977	79.2	593,499	80.1
2	93,613	13.4	94,139	14.9	111,807	15.1	131,214	17.4	123,069	16.6
≥3	14,970	2.1	16,788	2.7	18,701	2.5	26,064	3.5	24,183	3.3

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Number of Hours Worked During a Typical Week in All Nursing Positions

More than half (55.3%) of LPNs/LVNs reported working 32 to 40 hours in a typical week, inclusive of all nursing positions. Outside of those nurses working 32 to 40 hours, nurses were more likely to work more than 40 hours per week than less than 32 hours per week; however, 2024 reflects a slight reversion compared to the extreme values of 2022. Nurses who worked fewer than 32 hours per week made up 17.3% of the 2015 respondents and 13.6% of the 2024 respondents. The proportion of nurses who worked more than 40 hours increased from 22.3% in 2015 to 31.2% in 2024, with a more recent decrease from 36.8% in 2022 (Table 76 and Figure 24).

TABLE 76

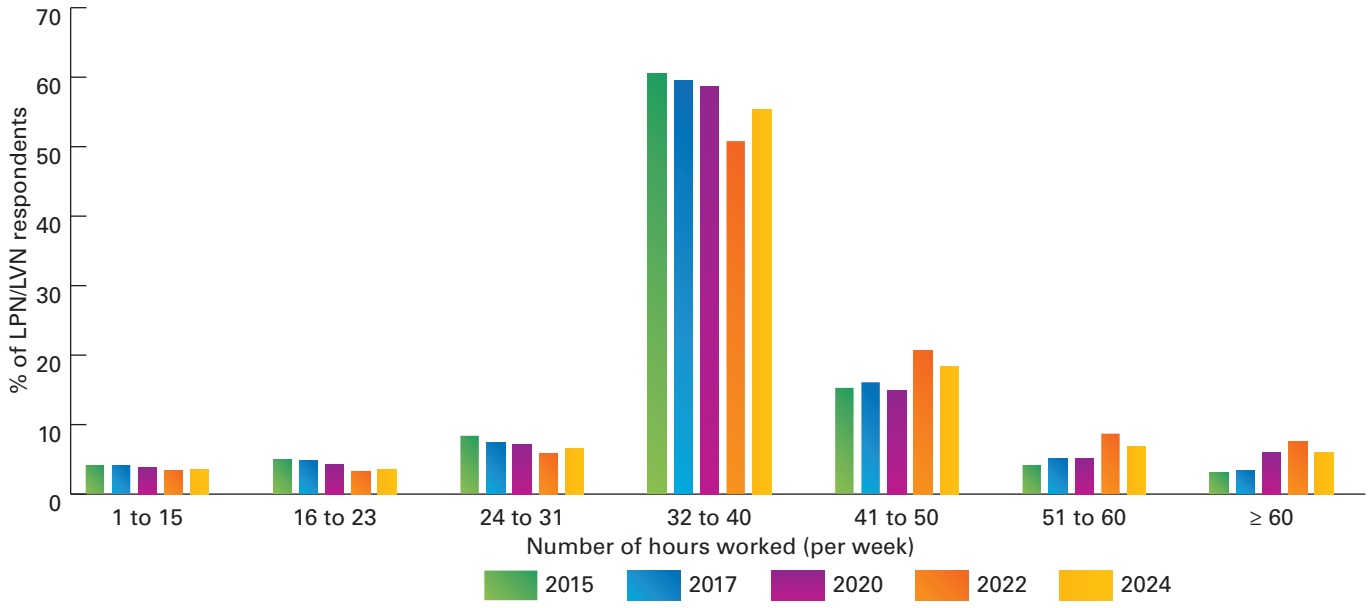
Number of Hours Worked by LPNs/LVNs During a Typical Week in All Nursing Positions, 2015–2024

Hours Worked per Week	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Population	***N* = 22,450.6**		***N* = 27,505.7**		***N* = 30,985.7**		***N* = 45,095.9**		***N* = 109,351.5**	
1–15	913.1	4.1	1,132.6	4.1	1,214.4	3.9	1,527.3	3.4	3,940.8	3.6
16–23	1,088.9	4.9	1,298.4	4.7	1,323.6	4.3	1,461.9	3.2	3,778.0	3.5
24–31	1,866.4	8.3	2,031.1	7.4	2,238.6	7.2	2,622.0	5.8	7,061.9	6.5
32–40	13,562.8	60.4	16,328.2	59.4	18,164.7	58.6	22,901.9	50.8	60,475.2	55.3
41–50	3,410.0	15.2	4,412.7	16.0	4,609.1	14.9	9,292.1	20.6	20,008.6	18.3
51–60	928.3	4.1	1,391.1	5.1	1,567.2	5.1	3,933.0	8.7	7,512.0	6.9
≥61	681.1	3.0	911.5	3.3	1,868.1	6.0	3,357.6	7.5	6,575.0	6.0
U.S. LPN/LVN Population										
1–15	27,459	4.1	25,896	4.1	28,854	3.9	25,424	3.4	26,292	3.6
16–23	32,744	4.9	29,686	4.7	31,449	4.3	24,335	3.2	25,206	3.5
24–31	56,126	8.3	46,437	7.4	53,189	7.2	43,646	5.8	47,116	6.5
32–40	407,859	60.4	373,314	59.4	431,592	58.6	381,223	50.8	403,478	55.3
41–50	102,546	15.2	100,888	16.0	109,512	14.9	154,676	20.6	133,493	18.3
51–60	27,916	4.1	31,805	5.1	37,237	5.1	65,468	8.7	50,119	6.9
≥61	20,482	3.0	20,841	3.3	44,386	6.0	55,890	7.5	43,867	6.0

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

FIGURE 24

Number of Hours Worked by LPNs/LVNs During a Typical Week in All Nursing Positions, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Primary Nurse Practice Setting

Of those LPNs/LVNs who responded to the question, 31.6% indicated that a nursing home/extended care facility was their primary practice setting. This represented a marginal increase from 2022 (30.6%). The hospital setting was the second most frequently identified setting coming in at 11.9% of LPNs/LVNs, followed by home health at 10.3% and ambulatory care at 9.1% (Table 77 and Figure 25).

TABLE 77

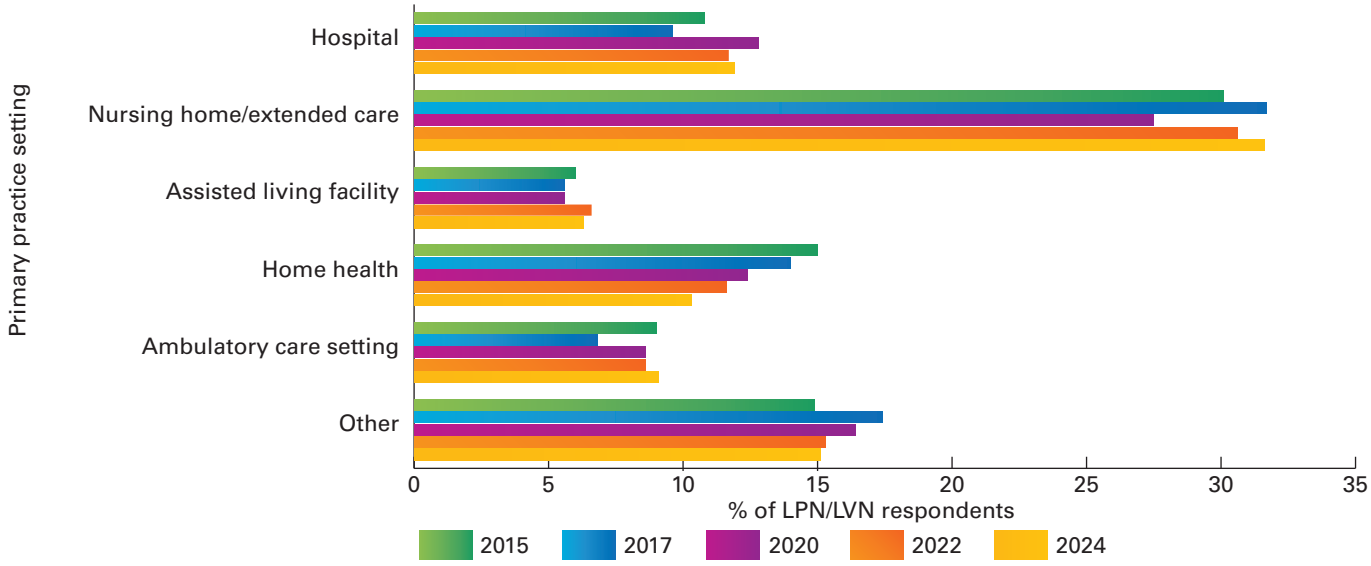
Primary Nurse Practice Setting of LPNs/LVNs, 2015–2024

Primary Practice Setting	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	***N* = 22,989.1**		***N* = 26,459.8**		***N* = 30,055.4**		***N* = 43,306.2**		***N* = 82,751.9**	
Hospital	2,478.9	10.8	2,540.3	9.6	3,831.4	12.8	5,084.7	11.7	9,876.5	11.9
Nursing home/extended care	6,911.9	30.1	8,385.3	31.7	8,250.3	27.5	13,250.0	30.6	26,117.5	31.6
Assisted living facility	1,369.5	6.0	1,484.2	5.6	1,679.5	5.6	2,835.5	6.6	5,222.1	6.3
Home health	3,451.0	15.0	3,710.5	14.0	3,733.3	12.4	5,025.9	11.6	8,541.2	10.3
Hospice	-	-	426.6	1.6	639.8	2.1	698.7	1.6	1,675.4	2.0
Correctional facility	670.2	2.9	738.6	2.8	729.3	2.4	961.6	2.2	1,880.5	2.3
School of nursing	142.0	0.6	78.4	0.3	173.7	0.6	141.4	0.3	468.7	0.6
Public health	399.8	1.7	498.3	1.9	623.1	2.1	972.6	2.3	1,262.3	1.5
Dialysis center	-	-	165.8	0.6	266.1	0.9	310.4	0.7	572.9	0.7
Community health	922.6	4.0	888.1	3.4	1,073.8	3.6	1,487.7	3.4	3,054.9	3.7
School health service	683.9	3.0	697.4	2.6	977.2	3.3	1,410.7	3.3	2,365.5	2.9
Occupational health	174.9	0.8	166.6	0.6	187.3	0.6	278.4	0.6	712.6	0.9
Ambulatory care setting	2,061.2	9.0	1,797.3	6.8	2,588.2	8.6	3,702.9	8.6	7,553.0	9.1
Insurance claims/benefits	259.7	1.1	241.3	0.9	331.8	1.1	518.5	1.2	897.4	1.1
Policy/planning/regulatory/licensing agency	32.3	0.1	24.4	0.1	36.7	0.1	16.0	0.0	74.2	0.1
Other	3,431.2	14.9	4,616.7	17.4	4,933.9	16.4	6,611.2	15.3	12,477.1	15.1
U.S. LPN/LVN Population										
Hospital	74,544	10.8	58,079	9.6	91,034	12.8	84,639	11.7	65,894	11.9
Nursing home/extended care	207,854	30.1	191,715	31.7	196,026	27.5	220,559	30.6	174,251	31.6
Assisted living facility	41,183	6.0	33,933	5.6	39,905	5.6	47,200	6.6	34,841	6.3
Home health	103,779	15.0	84,834	14.0	88,703	12.4	83,661	11.6	56,985	10.3
Hospice	-	-	9,753	1.6	15,202	2.1	11,631	1.6	11,178	2.0
Correctional facility	20,154	2.9	16,887	2.8	17,328	2.4	16,007	2.2	12,546	2.3
School of nursing	4,270	0.6	1,792	0.3	4,127	0.6	2,354	0.3	3,127	0.6
Public health	12,022	1.7	11,394	1.9	14,805	2.1	16,190	2.3	8,422	1.5
Dialysis center	-	-	3,790	0.6	6,323	0.9	5,167	0.7	3,822	0.7
Community health	27,745	4.0	20,305	3.4	25,513	3.6	24,764	3.4	20,382	3.7
School health service	20,565	3.0	15,945	2.6	23,218	3.3	23,482	3.3	15,782	2.9
Occupational health	5,260	0.8	3,810	0.6	4,450	0.6	4,634	0.6	4,755	0.9
Ambulatory care setting	61,984	9.0	41,091	6.8	61,495	8.6	61,637	8.6	50,392	9.1
Insurance claims/benefits	7,810	1.1	5,517	0.9	7,884	1.1	8,632	1.2	5,987	1.1
Policy/planning/regulatory/licensing agency	973	0.1	557	0.1	872	0.1	266	0.0	495	0.1
Other	103,182	14.9	105,553	17.4	117,229	16.4	110,049	15.3	83,245	15.1

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

FIGURE 25

Most-Reported Primary Nurse Practice Setting of LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Primary Nursing Position Title

Overall, the LPNs/LVNs who reported their primary nursing position title reflected a similar distribution to those who responded in 2020, with levels of staff nurse titles being nearly identical (2020: 72.8%; 2024: 72.9%). This reflects a reversion from 2022, where only 66.5% reported a staff nurse title. The number of case managers returned to 2020 levels as well (both 2.8%) from the 2022 high of 8.4% (Table 78 and Figure 26).

TABLE 78

Primary Nursing Position Title of LPNs/LVNs, 2015–2024

Primary Title	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	***N* = 23,567.8**		***N* = 26,776.9**		***N* = 30,512.5**		***N* = 44,122.7**		***N* = 83,507.6**	
Consultant	140.6	0.6	152.7	0.6	148.4	0.5	257.4	0.6	376.5	0.5
Nurse researcher	65.0	0.3	51.2	0.2	66.3	0.2	79.8	0.2	145.5	0.2
Nurse executive	137.6	0.6	70.9	0.3	120.6	0.4	157.5	0.4	534.8	0.6
Nurse manager	1,365.4	5.8	1,661.5	6.2	1,680.2	5.5	2,955.9	6.7	5,008.2	6.0
Nurse faculty/educator	967.9	4.1	257.5	1.0	310.5	1.0	481.0	1.1	758.1	0.9
APRN	401.7	1.7	9.0	0.0	149.4	0.5	110.6	0.3	125.0	0.2
Staff nurse	16,214.1	68.8	19,564.6	73.1	22,209.9	72.8	29,324.4	66.5	60,862.2	72.9
Case manager	595.3	2.5	561.4	2.1	842.8	2.8	3,708.4	8.4	2,331.0	2.8
Other—health related	3,444.2	14.6	4,275.5	16.0	4,768.8	15.6	6,049.8	13.7	12,663.9	15.2
Other—not health related	236.0	1.0	172.7	0.7	215.5	0.7	997.9	2.3	702.6	0.8
U.S. LPN/LVN Population										
Consultant	4,227	0.6	3,490	0.6	3,526	0.5	4,285	0.6	2,512	0.5
Nurse researcher	1,955	0.3	1,170	0.2	1,575	0.2	1,329	0.2	971	0.2
Nurse executive	4,138	0.6	1,621	0.3	2,865	0.4	2,621	0.4	3,568	0.6
Nurse manager	41,060	5.8	37,986	6.2	39,921	5.5	49,203	6.7	33,414	6.0
Nurse faculty/educator	29,107	4.1	5,887	1.0	7,377	1.0	8,007	1.1	5,058	0.9
APRN	12,079	1.7	206	0.0	3,550	0.5	1,841	0.3	834	0.2

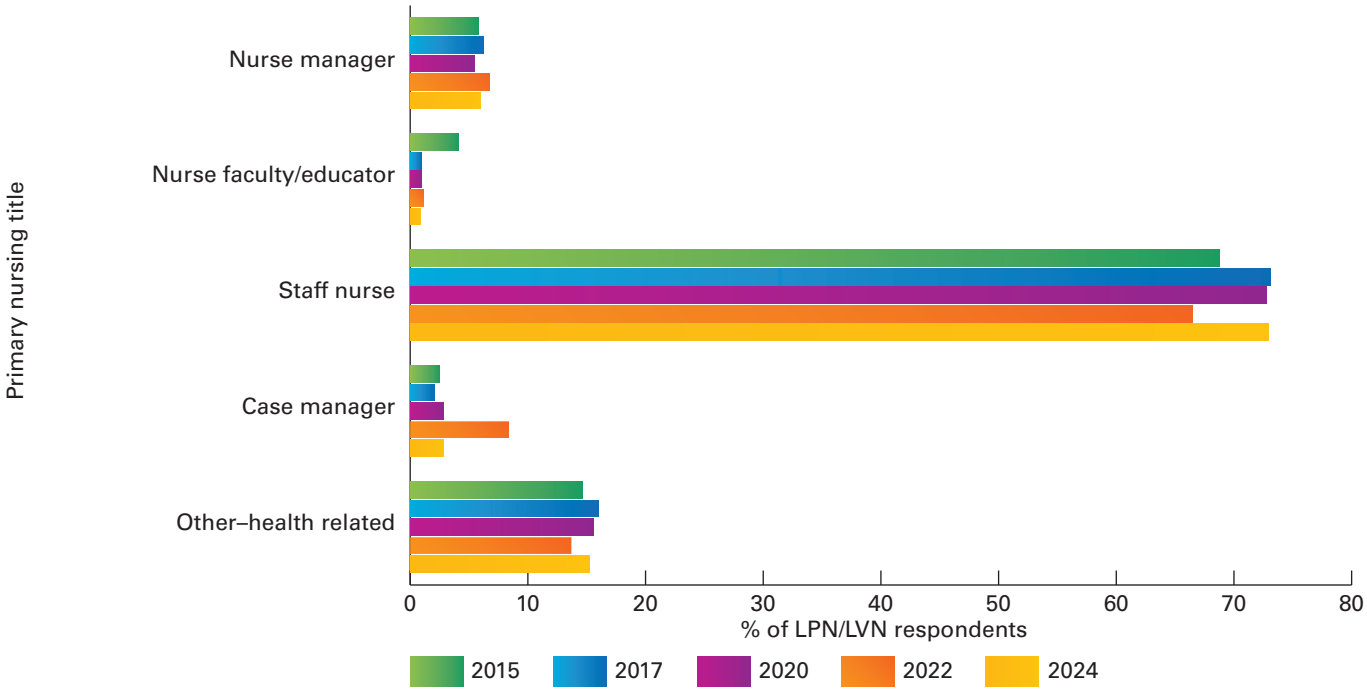
Primary Nursing Position Title of LPNs/LVNs, 2015–2024 *(continued)*

Primary Title	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Staff nurse	487,589	68.8	447,308	73.1	527,705	72.8	488,131	66.5	406,060	72.9
Case manager	17,902	2.5	12,835	2.1	20,025	2.8	61,730	8.4	15,552	2.8
Other—health related	103,572	14.6	97,751	16.0	113,306	15.6	100,704	13.7	84,491	15.2
Other—not health related	7,097	1.0	3,949	0.7	5,120	0.7	16,611	2.3	4,688	0.8

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

FIGURE 26

Most-Reported Primary Nursing Position Title of LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Travel Nurse Status

The proportion of LPN/LVN respondents who identified as a travel nurse increased from 4.7% in 2022 to 7.1% in 2024 (Table 79).

TABLE 79

Travel Nurse Status of LPNs/LVNs, 2022 and 2024

Travel Nurse	2022 (*N* = 42,737.4)		2024 (*N* = 86,800.3)	
	n	%	*n*	%
Yes	1,989.0	4.7	6,178.3	7.1
No	40,748.4	95.4	80,622.0	92.9

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Delaware, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

(continued)

Primary Nursing Position Specialty

In 2024, 28.1% of LPNs/LVNs reported their primary practice specialty as geriatric/gerontology. This decreased from the 31.3% reported in 2022 but seemed to follow the general trend between 2015 through 2020. The second most common specialty area in 2024 was home health at 8.1%. Adult health was the third most-reported practice specialty at 6.9% (Table 80 and Figure 27).

TABLE 80

Primary Nursing Position Specialty for LPNs/LVNs, 2015–2024

Primary Specialty	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents	***N* = 21,932.4**		***N* = 25,214.9**		***N* = 28,417.9**		***N* = 36,204.7**		***N* = 97,606.9**	
Acute care/critical care	458.5	2.1	670.0	2.7	1,157.6	4.1	1,227.7	3.4	3552.7	3.6
Adult health	960.6	4.4	1,968.0	7.8	2,354.2	8.3	2,541.7	7.0	6708.6	6.9
Anesthesia	18.0	0.1	17.6	0.1	22.5	0.1	36.9	0.1	68.1	0.1
Cardiology	-	-	250.4	1.0	312.5	1.1	338.4	0.9	971.6	1.0
Community	262.6	1.2	216.8	0.9	323.6	1.1	381.0	1.1	1366.5	1.4
Emergency/trauma	157.2	0.7	127.5	0.5	261.6	0.9	531.4	1.5	1414.3	1.5
Family health	-	-	1,712.4	6.8	1,840.3	6.5	1,832.6	5.1	4516.4	4.6
Genetics	182.2	0.8	-	-	-	-	537.7	1.5	1100.6	1.1
Geriatric/gerontology	6,064.1	27.7	7,685.8	30.5	7,545.9	26.6	11,348.1	31.3	27396	28.1
Home health	2,109.3	9.6	2,228.2	8.8	2,372.5	8.4	3,055.9	8.4	78986	8.1
Informatics	41.4	0.2	-	-	-	-	36.6	0.1	119.5	0.1
Information technology	-	-	-	-	-	-	28.4	0.1	94.5	0.1
Maternal-child health/ obstetrics	120.5	0.6	225.1	0.9	266.5	0.9	308.1	0.9	791.8	0.8
Medical-surgical	777.3	3.5	728.6	2.9	1,008.2	3.6	1,412.8	3.9	4853.9	5.0
Neonatal	28.2	0.1	28.8	0.1	40.8	0.1	23.9	0.1	65.6	0.1
Nephrology	133.7	0.6	201.0	0.8	258.2	0.9	402.2	1.1	786.7	0.8
Neurology/neurosurgical	90.6	0.4	-	-	-	-	177.1	0.5	370.3	0.4
Occupational health	154.5	0.7	160.8	0.6	183.4	0.7	242.0	0.7	889.4	0.9
Oncology	137.1	0.6	152.9	0.6	252.5	0.9	290.0	0.8	764.3	0.8
Orthopedic	185.5	0.9	-	-	-	-	256.3	0.7	640.6	0.7
Palliative care/hospice	348.2	1.6	354.7	1.4	490.7	1.7	653.5	1.8	1930.2	2.0
Pediatrics	1,326.0	6.1	1,880.2	7.5	1,819.5	6.4	2,660.3	7.4	6012.6	6.2
Perioperative	93.1	0.4	76.4	0.3	135.3	0.5	189.0	0.5	488.8	0.5
Primary care	1,695.5	7.7	-	-	-	-	1,725.2	4.8	3784.6	3.9
Public health	173.1	0.8	257.6	1.0	332.4	1.2	456.4	1.3	4064.1	4.2
Psychiatric/mental health/sub-stance abuse	1,084.8	5.0	1,205.0	4.8	1,405.0	4.9	1,064.2	2.9	1084.8	1.1
Radiology	24.2	0.1	-	-	-	-	14.1	0.0	22.2	0.0
Rehabilitation	847.7	3.9	1,081.5	4.3	990.8	3.5	1,023.1	2.8	3918.1	4.0
School health	612.9	2.8	646.2	2.6	870.1	3.1	660.9	1.8	1837.9	1.9
Urology	102.1	0.5	-	-	-	-	53.8	0.2	216.6	0.2
Women's health	342.8	1.6	291.0	1.2	426.2	1.5	240.4	0.7	756.4	0.8
Other—clinical specialties	-	-	2,724.1	10.8	3,264.9	11.5	1,986.9	5.5	3221.1	3.3
Other—nonclinical specialties	-	-	324.1	1.3	482.9	1.7	468.0	1.3	5899.8	6.0
U.S. LPN/LVN Population										
Acute care/critical care	13,787	2.1	15,319	2.7	27,504	4.1	20,437	3.4	23,703	3.6
Adult health	28,888	4.4	44,995	7.8	55,936	8.3	42,309	7.0	44,758	6.9
Anesthesia	542	0.1	401	0.1	535	0.1	614	0.1	6,482	0.1
Cardiology	-	-	5,725	1.0	7,425	1.1	5,633	0.9	9,117	1.0
Community	7,896	1.2	4,956	0.9	7,689	1.1	6,342	1.1	9,117	1.4
Emergency/trauma	4,729	0.7	2,915	0.5	6,216	0.9	8,846	1.5	9,436	1.5
Family health	-	-	39,151	6.8	43,725	6.5	30,505	5.1	30,132	4.6
Genetics	5,480	0.8	-	-	-	-	8,950	1.5	7,343	1.1
Geriatric/gerontology	182,359	27.7	175,722	30.5	179,290	26.6	188,899	31.3	182,780	28.1

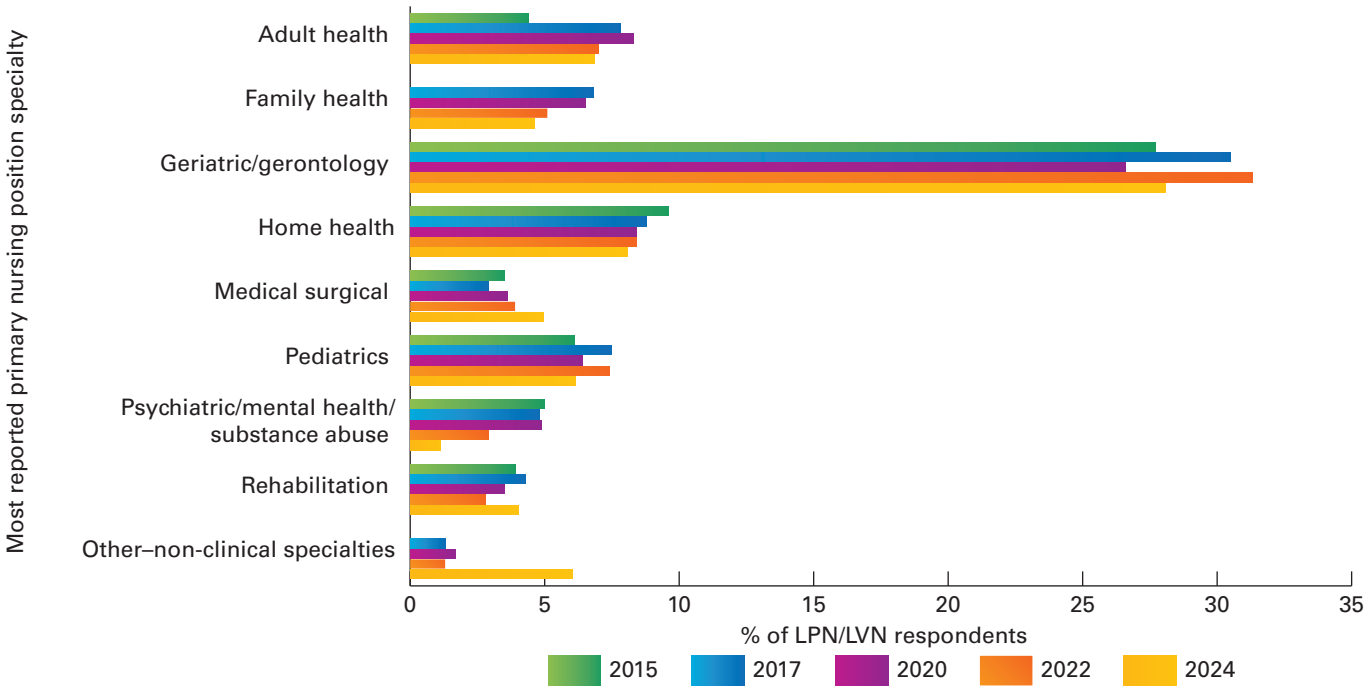
Primary Nursing Position Specialty for LPNs/LVNs, 2015–2024 *(continued)*

Primary Specialty	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Home health	63,430	9.6	50,944	8.8	56,370	8.4	50,869	8.4	52,698	8.1
Informatics	1,244	0.2	-	-	-	-	610	0.1	797	0.1
Information technology	-	-	-	-	-	-	473	0.1	630	0.1
Maternal-child health/ obstetrics	3,623	0.6	5,148	0.9	6,332	0.9	5,128	0.9	5,283	0.8
Medical-surgical	23,375	3.5	16,659	2.9	23,955	3.6	23,518	3.9	32,384	5.0
Neonatal	848	0.1	659	0.1	969	0.1	398	0.1	437	0.1
Nephrology	4,022	0.6	4,595	0.8	6,135	0.9	6,696	1.1	5,249	0.8
Neurology/neurosurgical	2,723	0.4	-	-	-	-	2,948	0.5	2,470	0.4
Occupational health	4,647	0.7	3,677	0.6	4,358	0.7	4,028	0.7	5,934	0.9
Oncology	4,124	0.6	3,497	0.6	5,999	0.9	4,828	0.8	5,099	0.8
Orthopedic	5,577	0.9	-	-	-	-	4,267	0.7	4,274	0.7
Palliative care/hospice	10,471	1.6	8,109	1.4	11,659	1.7	10,878	1.8	12,878	2.0
Pediatrics	39,875	6.1	42,988	7.5	43,231	6.4	44,282	7.4	40,115	6.2
Perioperative	2,798	0.4	1,747	0.3	3,215	0.5	3,147	0.5	3,261	0.5
Primary care	50,986	7.7	-	-	-	-	28,717	4.8	25,250	3.9
Public health	5,207	0.8	5,889	1.0	7,898	1.2	7,597	1.3	27,115	4.2
Psychiatric/mental health/sub-stance abuse	32,622	5.0	27,550	4.8	33,383	4.9	17,714	2.9	7,237	1.1
Radiology	727	0.1	-	-	-	-	235	0.0	148	0.0
Rehabilitation	25,493	3.9	24,727	4.3	23,541	3.5	17,031	2.8	26,141	4.0
School health	18,432	2.8	14,774	2.6	20,674	3.1	11,001	1.8	12,262	1.9
Urology	3,071	0.5	-	-	-	-	896	0.2	1,445	0.2
Women's health	10,308	1.6	6,653	1.2	10,126	1.5	4,002	0.7	5,047	0.8
Other—clinical specialties	-	-	62,282	10.8	77,574	11.5	33,074	5.5	21,490	3.3
Other—nonclinical specialties	-	-	7,411	1.3	11,474	1.7	7,791	1.3	39,362	6.0

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

FIGURE 27

Most-Reported Primary Nursing Position Specialty of LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Providing Direct Patient Care – Primary Nursing Position

In 2024, 75.1% of LPN/LVN survey respondents reported providing direct patient care in their primary nursing position. In 2022, the second year this question was asked, 78.6% of LPNs/LVNs said they provided direct patient care in their primary nursing position (Table 81).

TABLE 81

LPNs/LVNs Providing Direct Patient Care – Primary Nursing Position, 2020–2024

Provide Direct Patient Care	2020 (*N* = 31,443.7)		2022 (*N* = 42,529.1)		2024 (*N* = 91,795.77)	
	n	%	*n*	%	*n*	%
Yes	24,460.3	77.8	33,422.2	78.6	68,921.7	75.1
No	6,983.5	22.2	9,106.9	21.4	22,874.0	24.9

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Secondary Nursing Position Setting

Approximately one-third (33.4%) of LPNs/LVNs who reported a secondary setting reported practicing in a nursing home/extended care setting, 19.5% in home health, and 9.3% in assisted living facility settings (Table 82 and Figure 28).

TABLE 82

Secondary Nursing Position Setting Among LPNs/LVNs, 2015–2024

Secondary Position Setting	2015 (*N* = 3,018.7)		2017 (*N* = 4,376.2)		2020 (*N* = 5,067.9)		2022 (*N* = 8,416.1)		2024 (*N* = 20413.16)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Hospital	180.4	6.0	261.2	6.0	461.1	9.1	756.7	9.0	1688.368	8.3
Nursing home/extended care	813.3	26.9	1,422.0	32.5	1,608.2	31.7	2,516.4	29.9	6819.23	33.4

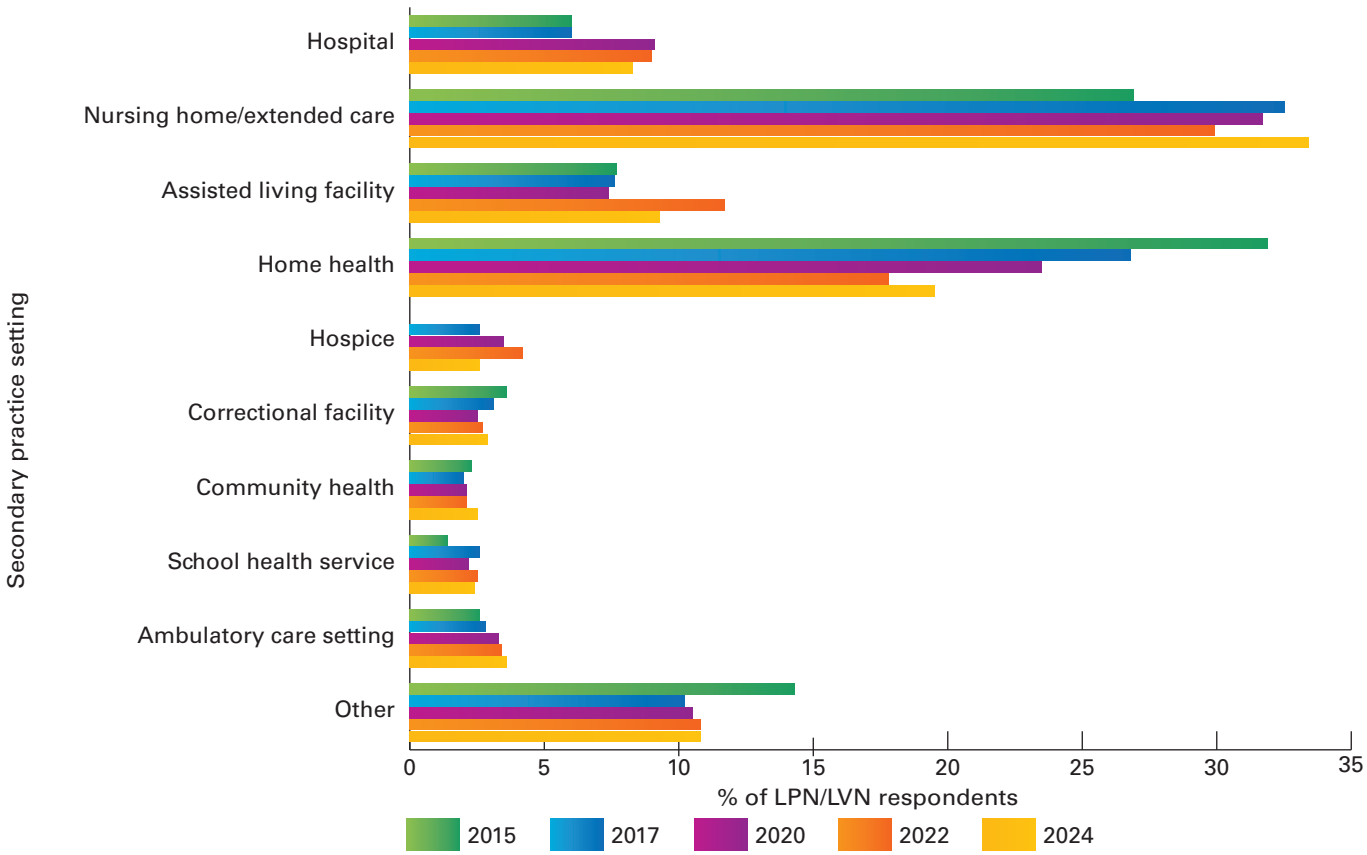
Secondary Nursing Position Setting Among LPNs/LVNs, 2015–2024 *(continued)*

Secondary Position Setting	2015 (*N* = 3,018.7)		2017 (*N* = 4,376.2)		2020 (*N* = 5,067.9)		2022 (*N* = 8,416.1)		2024 (*N* = 20413.16)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Assisted living facility	232.5	7.7	332.3	7.6	374.8	7.4	983.4	11.7	1,900.0	9.3
Home health	961.3	31.9	1,173.1	26.8	1,189.7	23.5	1,498.7	17.8	3,979.8	19.5
Hospice	-	-	115.7	2.6	177.8	3.5	349.7	4.2	528.3	2.6
Correctional facility	108.7	3.6	136.6	3.1	125.1	2.5	228.6	2.7	594.6	2.9
School of nursing	32.7	1.1	10.4	0.2	54.8	1.1	97.0	1.2	281.7	1.4
Public health	30.3	1.0	55.8	1.3	54.1	1.1	179.7	2.1	261.4	1.3
Dialysis center	-	-	35.0	0.8	30.4	0.6	41.5	0.5	177.3	0.9
Community health	69.1	2.3	85.2	2.0	108.0	2.1	176.7	2.1	501.9	2.5
School health service	42.1	1.4	111.9	2.6	109.9	2.2	211.9	2.5	487.0836	2.4
Occupational health	16.9	0.6	31.1	0.7	44.3	0.9	101.9	1.2	112.8464	0.6
Ambulatory care setting	78.4	2.6	121.7	2.8	165.7	3.3	285.7	3.4	732.528	3.6
Insurance claims/benefits	6.5	0.2	22.8	0.5	25.8	0.5	45.8	0.5	86.98396	0.4
Policy/planning/regulatory/licensing agency	15.9	0.5	16.6	0.4	6.2	0.1	36.5	0.4	54.10684	0.3
Other	430.5	14.3	444.8	10.2	532.0	10.5	905.9	10.8	2,207.1	10.8

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

FIGURE 28

Most-Reported Secondary Nursing Practice Position Setting Among LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Secondary Nursing Position Title

Of those LPNs/LVNs holding more than one nursing position, 75.5% were staff nurses in their secondary positions. This represents an increase from 2022, when 66.4% of LPNs/LVNs were staff nurses in their secondary nursing position (Table 83 and Figure 29).

TABLE 83

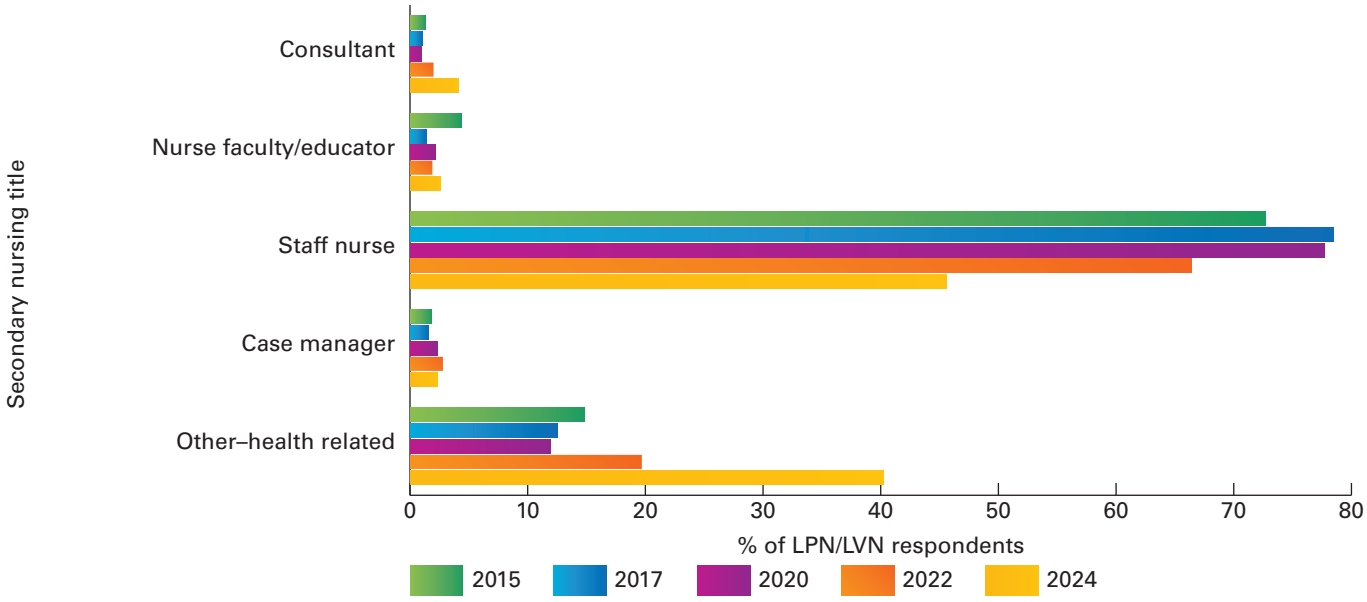
Secondary Nursing Position Title of LPNs/LVNs, 2015–2022

Secondary Position Title	2015 (*N* = 2,980.3)		2017 (*N* = 4,217.2)		2020 (*N* = 4,942.1)		2022 (*N* = 8,533.0)		2024 (*N* = 21,034.6)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Consultant	37.5	1.3	45.2	1.1	47.0	1.0	170.3	2.0	942.9	4.5
Nurse researcher	7.0	0.2	1.3	0.0	7.3	0.2	18.6	0.2	12.2	0.1
Nurse executive	10.4	0.4	10.0	0.2	8.6	0.2	45.7	0.5	55.1	0.3
Nurse manager	59.9	2.0	141.4	3.4	153.2	3.1	350.0	4.1	668.5	3.2
Nurse faculty/educator	132.0	4.4	58.4	1.4	107.9	2.2	165.4	1.9	354.1	1.7
APRN	34.1	1.1	2.6	0.1	36.1	0.7	24.7	0.3	18.2	0.1
Staff nurse	2,167.2	72.7	3,309.2	78.5	3,842.2	77.7	5,666.0	66.4	15,872.3	75.5
Case manager	53.8	1.8	66.6	1.6	111.6	2.3	240.4	2.8	508.0	2.4
Other—health related	440.3	14.8	528.9	12.5	586.2	11.9	1,682.9	19.7	2,317.7	11.0
Other—not health related	38.3	1.3	53.5	1.3	42.1	0.9	169.1	2.0	285.7	1.4

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

FIGURE 29

Most-Reported Secondary Nursing Position Title of LPNs/LVNs, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. This question was not administered in Hawaii.

Providing Direct Patient Care – Secondary Nursing Practice Position

In 2024, 83.9% of LPN/LVN respondents reported providing direct patient care in their secondary nursing position. In 2022, 81.7% of LPNs/LVNs said they provided direct patient care in their secondary nursing position (Table 84).

TABLE 84

LPNs/LVNs Providing Direct Patient Care—Secondary Nursing Practice Position , 2020–2024

Provide Direct Patient Care	2020 (*N* = 5,140.8)		2022 (*N* = 8,035.0)		2024 (*N* = 17294.23)	
	n	%	*n*	%	*n*	%
Yes	4,393.8	85.5	6,565.3	81.7	14,515.9	83.9
No	747.0	14.5	1,469.7	18.3	2,778.3	16.1

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing.

Salary and Earnings

Pretax Annual Earnings From Primary Nursing Position

The median pretax annual earnings for LPNs/LVNs grew to $58,000 in 2024. Pretax wages grew by about 16% since 2022 when the median pretax annual wage was $50,000. The distribution of LPN/LVN salaries has shifted since 2015, with the percentage of LPNs/LVNs earning more than $60,000 shifting from approximately 11% in 2015, to nearly half (49%) in 2024. The most common income bracket reported was between $40,000 and $60,000, but this group has fallen since 2022, from 42.4% to 34.1%; by contrast, the proportion making between $60,000 and $80,000 increased from 22.0% to 30.5% and the proportion making between $80,000 and $100,000 nearly doubled from 6.8% to 12.5% (Table 85 and Figure 30).

TABLE 85

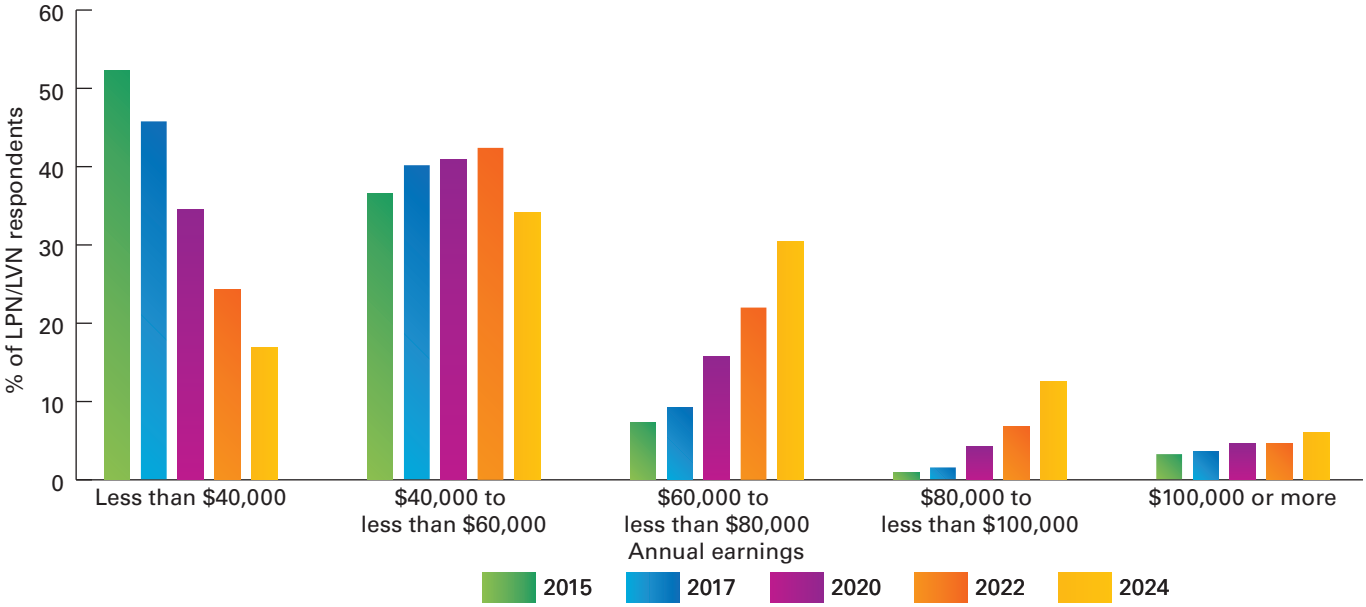
Median Annual Earnings of LPNs/LVNs From Primary Nursing Position, 2015–2024

Median Annual Earnings	2015		2017		2020		2022		2024	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
LPN/LVN Survey Respondents										
	***N* = 19,436.4**		***N* = 24,473.1**		***N* = 26,035.6**		***N* = 34,311.9**		***N* = 72,502.4**	
<$40,000	10,138.3	52.2	11,190.3	45.7	8,988.0	34.5	8,321.6	24.3	12,235.1	16.9
$40,000 to <$60,000	7,088.3	36.5	9,819.4	40.1	10,653.6	40.9	14,546.7	42.4	24,732.7	34.1
$60,000 to <$80,000	1,418.5	7.3	2,243.9	9.2	4,073.6	15.7	7,559.4	22.0	22,119.9	30.5
$80,000 to <$100,000	174.6	0.9	361.1	1.5	1,118.1	4.3	2,318.4	6.8	9,085.3	12.5
≥$100,000	616.8	3.2	858.4	3.5	1,202.3	4.6	1,565.8	4.6	4,329.4	6.0
U.S. LPN/LVN Population										
<$40,000	304,877	52.2	255,845	45.7	213,554	34.5	138,521	24.3	81,630	16.9
$40,000 to <$60,000	213,157	36.5	224,501	40.1	253,129	40.9	242,143	42.4	165,011	34.1
$60,000 to <$80,000	42,657	7.3	51,303	9.2	96,788	15.7	125,833	22.0	147,579	30.5
$80,000 to <$100,000	5,250	0.9	8,256	1.5	26,566	4.3	38,592	6.8	60,615	12.5
≥$100,000	18,548	3.2	19,626	3.5	28,567	4.6	26,064	4.6	28,885	6.0

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

FIGURE 30

Median Annual Earnings of LPNs/LVNs for Primary Nursing Position, 2015–2024



Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Earnings by Specialty and Gender

As was seen in the analysis of RNs, the annual median wage was greater for male LPNs/LVNs across most specialties in 2024. Female LPNs/LVNs reported higher earnings in anesthesia, cardiology, community health, information technology, orthopedics, perioperative care, primary care, school health, urology, women's health, and other clinical specialties. LPNs/LVNs in information technology, radiology, rehabilitation, and palliative care/hospice reported the highest median wages, while those in school health, women's health, pediatric, urology, and family health reported the lowest median wages (Table 86).

TABLE 86

Median Annual Earnings of LPNs/LVNs for Primary Nursing Position by Specialty and Gender, 2024

Median Annual Earnings by Specialty and Gender	Male		Female		Nonbinary		Total	
	n	*Mdn*	*n*	*Mdn*	*n*	*Mdn*	*n*	*Mdn*
Acute care/critical care	136	$67,000	703	$57,000	-	-	839	$60,000
Adult health	163	$68,000	1,342	$60,000	-	-	1,505	$60,000
Anesthesia	3	$66,000	11	$80,000	-	-	14	$80,000
Cardiology	28	$24,000	259	$55,000	-	-	287	$54,000
Community	27	$60,000	358	$62,000	1	$91,077	386	$63,000
Emergency/trauma	56	$65,000	297	$55,000	-	-	353	$56,000
Family health	55	$55,000	1,137	$50,000	1	$47,888	1,193	$50,000
Genetics	10	$70,000	151	$58,000	-	-	161	$59,000
Geriatric/gerontology	521	$67,479	6,354	$60,000	6	$60,000	6,881	$60,000
Home health	189	$60,000	1,755	$56,000	10	$54,000	1,954	$57,000
Informatics	5	$89,000	21	$60,000	-	-	26	$65,000
Information technology	1	$75,000	12	$92,000	-	-	13	$92,000
Maternal-child health/obstetrics	3	$67,000	200	$50,000	-	-	203	$51,376
Medical-surgical	153	$62,000	1,032	$52,000	2	$34,000	1,187	$52,482
Neonatal	-	-	22	$72,800	-	-	22	$72,800

Median Annual Earnings of LPNs/LVNs for Primary Nursing Position by Specialty and Gender, 2024 *(continued)*

Median Annual Earnings by Specialty and Gender	Male		Female		Nonbinary		Total	
	n	*Mdn*	*n*	*Mdn*	*n*	*Mdn*	*n*	*Mdn*
Nephrology	25	$70,000	150	$56,000	-	-	175	$60,000
Neurology/neurosurgical	7	$60,000	75	$56,000	-	-	82	$56,000
Occupational health	12	$70,000	164	$64,000	-	-	176	$64,000
Oncology	9	$65,000	180	$55,000	-	-	189	$55,000
Orthopedic	4	$40,000	111	$55,000	-	-	115	$55,000
Palliative care/hospice	34	$72,000	426	$62,000	1	$52,000	461	$64,000
Pediatrics	86	$61,500	1,396	$50,000	-	-	1,482	$50,000
Perioperative	10	$40,000	106	$68,000	-	-	116	$60,000
Primary care	52	$52,000	686	$55,000	-	-	738	$55,000
Public health	22	$71,000	282	$60,000	1	$75,000	305	$60,000
Psychiatric/mental health/substance abuse	151	$69,000	1,015	$60,000	2	$46,000	1,168	$60,000
Radiology	-	-	2	$80,000	-	-	2	$80,000
Rehabilitation	133	$74,000	810	$62,000	2	$80,000	945	$64,000
School health	6	$35,000	482	$38,000	1	$65,000	489	$38,000
Urology	1	$38,000	24	$50,000	-	-	25	$50,000
Women's health	3	$40,000	179	$50,000	-	-	182	$50,000
Other—clinical specialties	86	$52,000	948	$56,000	1	$47,590	1,035	$55,000
Other—non-clinical specialties	78	$65,000	968	$59,000	2	$73,000	1,048	$60,000
Total	2,069	$65,000	21,658	$58,000	30	$65,000		

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer the salary question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Earnings by Highest Education

As was found in previous surveys, LPNs/LVNs possessing a baccalaureate degree reported the highest median annual wages ($80,000). LPNs/LVNs with an ADN ($60,000) earned similar wages to those with a vocational/practical certificate ($58,000) and a diploma ($57,000) (Table 87).

TABLE 87

Median Annual Earnings of LPNs/LVNs for Primary Nursing Position by Highest Nursing Education, 2017–2024

Highest Nursing Education	2017		2020		2022		2024	
	n	*Mdn*	*n*	*Mdn*	*n*	*Mdn*	*n*	*Mdn*
Vocational/practical certificate-nursing	16,750	$42,000	17,947	$43,000	10,238	$50,000	20,268	$58,000
Diploma	3,709	$41,600	3,589	$43,000	2,174	$48,000	2,319	$57,000
Associate degree	2,199	$40,000	3,565	$45,000	2,119	$50,000	2,963	$60,000
Baccalaureate degree	227	$51,619	566	$60,000	262	$60,000	531	$80,000

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer the salary question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. The salary question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Earnings by State

Wages grew in all but three states and territories in 2024. Respondents reported the highest median earnings for LPNs/LVNs in California ($70,000), Massachusetts ($69,120), and the District of Columbia ($66,500). The lowest median earnings for LPNs/LVNs were for those practicing in Arkansas, Minnesota, Mississippi, North Dakota, Tennessee, and Wisconsin, with reported earnings of $50,000. Wages for 2024 did not change in Oregon, Rhode Island, and Wisconsin (Table 88).

TABLE 88

Median Annual Earnings in Primary Nursing Position by Jurisdiction Where LPNs/LVNs are Currently Practicing, 2015–2024

Median Annual Earnings by Jurisdiction	2015	2017	2020	2022	2024
Alabama	$33,000	$35,000	$39,000	$44,000	$56,160
Alaska	$50,000	$52,000	$56,559	$58,972	$60,000
Arizona	$48,000	$48,000	$52,000	$55,000	$65,000
Arkansas	$33,500	$37,000	$40,000	$45,000	$50,000
California	$45,000	$48,000	$55,836	$64,000	$70,000
Colorado	$42,000	$45,000	$50,000	$55,000	$63,000
Connecticut	$49,000	$50,000	$52,360	$58,000	$62,000
Delaware	$45,000	$47,000	$50,000	$52,000	-
District of Columbia	$53,000	$50,000	$55,000	$55,000	$66,500
Florida	$37,000	$40,000	$43,210	$50,000	$57,000
Georgia	$36,000	$39,800	$42,000	$50,000	$56,000
Hawaii	$45,000	$46,000	$50,000	$58,000	-
Idaho	$32,560	$38,000	$42,000	$47,212	$54,163
Illinois	$40,000	$40,000	$45,000	$50,000	$58,000
Indiana	$36,000	$40,000	$45,000	$50,000	$55,000
Iowa	$34,640	$36,000	$41,000	$45,000	$52,870
Kansas	$35,000	$39,000	$41,500	$48,000	$52,157
Kentucky	$35,000	$40,000	$42,000	$45,000	$54,000
Louisiana	$35,000	$38,000	$40,000	$45,000	-
Maine	$36,000	$40,000	$43,500	$50,000	$54,163
Maryland	$45,000	$50,000	$53,012	$56,486	$65,000
Massachusetts	$48,000	$50,000	$54,000	$58,000	$69,120
Michigan	$35,000	$40,000	$45,000	$50,000	$55,000
Minnesota	$33,000	$36,750	$40,000	$45,000	$50,000
Mississippi	$35,000	$35,000	$37,000	$45,000	$50,000
Missouri	-	-	$40,000	$50,000	-
Montana	$36,260	$37,440	$43,000	$47,000	$56,000
Nebraska	$33,000	$38,000	$40,000	$45,000	$52,704
Nevada	$48,000	$49,000	$55,000	$60,000	-
New Hampshire	$42,000	$45,500	$50,000	$50,000	$65,000
New Jersey	$45,000	$48,000	$54,000	$58,000	$65,000
New Mexico	$45,000	$45,000	$50,000	$50,000	-
New York	$40,000	$45,000	$60,000	$50,000	$60,000
North Carolina	$38,000	$41,000	$44,000	$50,000	-
North Dakota	$35,000	$37,000	$40,000	$45,000	$50,000
Ohio	$34,000	$36,000	$40,000	$47,000	$55,000
Oklahoma	$35,000	$37,000	$40,000	$45,000	$55,000
Oregon	$42,240	$47,000	$53,000	$60,000	$60,000
Pennsylvania	$39,000	$40,320	$44,000	$50,000	$54,327
Rhode Island	$45,000	$50,000	$50,000	$60,000	$60,000
South Carolina	$37,124	$40,000	$42,000	$48,000	$55,000
South Dakota	$30,000	$34,865	$38,000	$45,500	$51,000
Tennessee	$34,000	$36,000	$40,000	$45,000	$50,000
Texas	$40,082	$43,000	$49,383	$49,000	-
Utah	$36,000	$41,000	$41,000	$47,646	$60,000

Median Annual Earnings in Primary Nursing Position by Jurisdiction Where LPNs/LVNs are Currently Practicing, 2015–2024 *(continued)*

Median Annual Earnings by Jurisdiction	2015	2017	2020	2022	2024
Vermont	$37,128	$42,000	$45,000	$50,381	$55,000
Virginia	$36,000	$40,000	$44,000	$50,000	$56,000
Washington	$44,000	$48,000	$54,000	$55,000	-
West Virginia	$32,000	$35,000	$36,000	$40,020	-
Wisconsin	$35,000	$38,000	$40,000	$50,000	$50,000
Wyoming	$40,000	$40,500	$44,000	$50,000	-
Northern Mariana Islands	$55,000	$28,500	$32,959	$45,000	$60,000
Guam	-	-	-	-	$54,000

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer the salary question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming. Missouri did not participate in the 2015 and 2017 surveys. Guam did not participate in the 2015-2022 surveys.

Earnings by Age and Years Licensed

As was previously documented among RNs, wages for LPNs/LVNs saw steady increases by years of experience. Median earnings in the 30–34 age group were $5,000 higher relative to the 16–29 age group and steadily grew until the 40–44 age group ($60,000, then dropping to $50,000 in the 65 and older age bracket) (Table 89).

TABLE 89

Median Annual Earnings of LPNs/LVNs for Primary Nursing Position by Nurses' Age and Years Licensed, 2024

Age, y	0–1 year		2–5 years		6–10 years		≥11 years		Total	
	n	*Mdn*	*n*	*Mdn*	*N*	*Mdn*	*n*	*Mdn*	*n*	*Mdn*
16–29	729	$45,000	1,068	$50,000	210	$54,080	2	$50,000	2,009	$50,000
30–34	388	$50,000	753	$55,000	862	$60,000	262	$53,760	2,265	$55,000
35–39	309	$50,000	589	$53,000	747	$55,000	1,096	$60,000	2,741	$55,411
40–44	237	$50,000	498	$60,000	639	$57,241	1,883	$60,000	3,257	$60,000
45–49	131	$52,000	322	$60,000	450	$65,000	2,298	$60,000	3,201	$60,000
50–54	96	$60,000	203	$58,000	358	$63,000	2,751	$60,000	3,408	$60,000
55–59	42	$52,000	118	$65,000	217	$62,300	2,495	$60,000	2,872	$60,000
60–64	17	$48,000	47	$68,000	146	$63,000	2,611	$60,000	2,821	$60,000
≥65	6	$70,000	19	$52,000	65	$52,100	2,383	$50,000	2,473	$50,000
Total	1,955	$50,000	3,617	$55,000	3,694	$60,000	15,781	$60,000	-	-

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer the salary question only if they were actively employed in nursing. Salary includes overtime and bonuses but does not include sign-on bonuses. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Telehealth Utilization

Percentage of LPNs/LVNs Providing Telehealth

In 2024, 20.6% of responding LPNs/LVNs provided services via telehealth. Of this group, 17.8% provided nursing services within state borders, while 5.3% communicated across state borders (Table 90).

TABLE 90

LPNs/LVNs Providing Telehealth, 2015–2024

Providing Telehealth	2015 (*N* = 23,619.9)		2017 (*N* = 27,760.6)		2020 (*N* = 31,095.7)		2022 (*N* = 39,650.3)		2024 (*N* = 85,413)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
No	12,723.1	53.9	12,715.8	45.8	15,504.3	49.9	17,650.4	44.5	67812.8	79.4
Yes, to clients or patients within state borders	-	-	-	-	-	-	-	-	15,214.7	17.8
Yes, to clients or patients across state borders	-	-	-	-	-	-	-	-	4,494.8	5.3
Yes, to clients or patients across national borders	-	-	-	-	-	-	-	-	542.0	0.6

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. In 2024, respondents were asked to select all that applied. Previously, participants were asked to estimate the percentage of their work time spent providing telehealth. This question was not administered in Delaware, Hawaii, Louisiana, Missouri, North Carolina, New Mexico, Nevada, Texas, Washington, West Virginia, and Wyoming.

Modes of Communications Used for Telehealth

As in previous survey cycles, telephone is the most common mode (86.9%) of communication for the provision of telehealth by LPNs/LVNs. Nonetheless, telephone usage has decreased since 2015. The use of electronic messaging was the second most common mode of communication (39.0%), increasing markedly in use since 2015. Email was the third most common mode at 33.9% (Table 91).

TABLE 91

Modes of Communication Used by LPNs/LVNs for Telehealth, 2015–2024

Modes of Communication Used for Telehealth	2015 (*N* = 8,881.7)		2017 (*N* = 11,164.0)		2020 (*N* = 12,154.9)		2022 (*N* = 16,948.4)		2024 (*N* = 24908.51)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Electronic messaging	1,947.7	21.9	2,510.8	22.5	3,280.4	27.0	6,036.3	35.6	9,711.7	39.0
Virtual intensive care unit	84.9	1.0	125.2	1.1	287.5	2.4	830.2	4.9	1,231.4	4.9
Telephone	8,498.5	95.7	10,405.0	93.2	11,274.7	92.8	14,924.3	88.1	21,633.8	86.9
Email	2,622.2	29.5	3,226.2	28.9	3,706.7	30.5	5,565.4	32.8	8,444.5	33.9
Video call	207.4	2.3	260.7	2.3	1,371.8	11.3	5,236.4	30.9	6,080.2	24.4
Other	883.0	9.9	1,027.2	9.2	998.1	8.2	1,631.8	9.6	2,486.9	10.0

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Survey participants were asked to answer this question only if they were actively employed in nursing. Respondents were asked to select all that applied. This question was not administered in Hawaii.

Nurse Well-Being

Employment Changes Over the Prior 2 years

The proportion of LPNs/LVNs who reported an increased workload in the past 2 years (40.6%) was significantly lower than the proportion who reported an increased workload during the COVID-19 pandemic in 2022 (62.9%). About a third (31.3%) reported no change to their employment in 2024 (Tables 92 and 93).

TABLE 92

Impact of the COVID-19 Pandemic on PN Employment, 2022

Employment Changes	2022	
	n	%
LPN/LVN Survey Respondents	**(*N* = 50,667.2)**	**%**
My workload increased	31,884.1	62.9
I became a travel nurse	1,882.1	3.7
I changed my practice setting	5,773.1	11.4
I started doing telehealth	2,426.9	4.8
I left nursing	2,031.2	4.0
I retired	2,961.6	5.9
No impact	7,318.5	14.4
Other	8,704.9	17.2
U.S. LPN/LVN Population		
My workload increased	530,739	62.9
I became a travel nurse	31,330	3.7
I changed my practice setting	96,098	11.4
I started doing telehealth	40,397	4.8
I left nursing	33,811	4.0
I retired	49,298	5.9
No impact	121,823	14.4
Other	144,901	17.2

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Respondents were asked to select all that applied. This question was not administered in Missouri, North Carolina, New Mexico, Washington, and Wyoming.

TABLE 93

Employment Changes Over the Previous 2 Years, 2024

Employment Changes	2024	
	n	%
LPN/LVN Survey Respondents	***N* = 111,045.9**	**%**
My workload increased	45,026.9	40.6
I became a travel nurse	6,834.6	6.2
I changed my practice setting	18,463.3	16.6
I started doing telehealth	1,691.6	1.5
I left nursing	3,760.3	3.4
I retired	9,311.9	8.4
No impact	34,772.5	31.3
Other	14,474.6	13.0
U.S. LPN.LVN Population		
My workload increased	300,410	40.6
I became a travel nurse	45,599	6.2
I changed my practice setting	123,183	16.6
I started doing telehealth	11,286	1.5
I left nursing	25,088	3.4
I retired	62,127	8.4
No impact	231,995	31.3

Employment Changes Over the Previous 2 Years, 2024 *(continued)*

Employment Changes	2024	
	n	%
Other	96,572	13.0

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. Respondents were asked to select all that applied. This question was not administered in Hawaii.

Emotionally Drained

One-fifth of LPNs/LVNs (20.7%) reported that they were emotionally drained from work every day, and another quarter (25.1%) reported they were emotionally drained a few times per week. About 10% reported never feeling emotionally drained from work (Table 94).

TABLE 94

Prevalence of LPNs/LVNs Feeling Emotionally Drained, 2022–2024

Feeling Emotionally Drained	2022 (*N* = 48,786.9)		2024 (*N* = 107218.6)	
	n	%	*n*	%
Never	3,385.1	6.9	10,580.5	9.9
A few times a year	5,032.3	10.3	12,927.2	12.1
Once a month or less	3,535.8	7.3	8,292.7	7.7
A few times a month	7,823.6	16.0	17,817.0	16.6
Once a week	4,365.8	9.0	8,557.2	8.0
A few times a week	12,580.4	25.8	26,864.4	25.1
Every day	12,064.0	24.7	22,179.7	20.7

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. This question was not administered in Hawaii.

Used Up

26.9% of LPNs/LVNs reported feeling used up at the end of every workday, a decrease from 29.5% reported in 2022. Almost 12.0% reported never feeling used up at the end of their workday, an increase from 8.8% reported in 2022 (Table 95).

TABLE 95

Prevalence of LPNs/LVNs Feeling Used Up, 2022–2024

Feeling Used Up	2022 (*N* = 48,421.6)		2024 (*N* = 107,212)	
	n	%	*n*	%
Never	4,259.8	8.8	12,786.8	11.9
A few times a year	3,783.9	7.8	10,177.0	9.5
Once a month or less	3,465.1	7.2	7,923.7	7.4
A few times a month	5,943.5	12.3	14,357.9	13.4
Once a week	4,288.8	8.9	8,500.4	7.9
A few times a week	12,397.3	25.6	24,649.9	23.0
Every day	14,283.4	29.5	28,816.4	26.9

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. This question was not administered in Hawaii.

Fatigued

Nearly a quarter of LPNs/LVNs (22.5%) reported feeling fatigued every day and another 21.6% reported feeling fatigued when they get up a few times a week. About 14.7% reported never feeling fatigued on the job (Table 96).

TABLE 96

Prevalence of LPNs/LVNs Feeling Fatigued, 2022–2024

Feeling Fatigued	2022 (*N* = 48,501.1)		2024 (*N* = 107194.4)	
	n	%	*n*	%
Never	5,104.7	10.5	15,775.9	14.7
A few times a year	4,594.4	9.5	12,003.2	11.2
Once a month or less	3,855.6	8.0	8,603.9	8.0
A few times a month	6,175.4	12.7	14,687.2	13.7
Once a week	4,340.0	9.0	8,839.4	8.3
A few times a week	11,716.8	24.2	23,132.3	21.6
Every day	12,714.2	26.2	24,152.5	22.5

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. This question was not administered in Hawaii.

Burnout

Regarding the prevalence of burnout, 21.0% of LPNs/LVNs reported that they felt burned out from work every day, which is a decrease from 25.3% in 2022. About 17% reported never feeling burned out from work, which is an increase from 12.8% reported in 2022 (Table 97).

TABLE 97

Prevalence of LPNs/LVNs Feeling Burned Out, 2022–2024

Feeling Burned Out	2022 (*N* = 48,541.6)		2024 (*N* = 106,701.3)	
	n	%	*n*	%
Never	6,211.2	12.8	18,396.8	17.2
A few times a year	6,315.6	13.0	16,064.2	15.1
Once a month or less	4,158.7	8.6	9,600.2	9.0
A few times a month	6,193.9	12.8	14,543.9	13.6
Once a week	3,881.5	8.0	7,454.1	7.0
A few times a week	9,482.2	19.5	18,203.8	17.1
Every day	12,298.6	25.3	22,438.3	21.0

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. This question was not administered in Hawaii.

End of Your Rope

More than 60% of LPNs/LVNs reported that they felt they were at the end of their rope, with nearly 30% feeling at the end of their rope at least once per week. Generally, respondents were less likely to report feeling at the end of their rope compared to 2022 (Table 98).

TABLE 98

Prevalence of LPNs/LVNs Feeling at the End of Their Rope, 2022–2024

Feeling at End of Rope	2022 (*N* = 48,323.7)		2024 (*N* = 105,336.6)	
	n	%	*n*	%
Never	15,773.1	32.6	41,468.0	39.4
A few times a year	5,867.5	12.1	14,466.9	13.7
Once a month or less	3,840.2	8.0	7,932.4	7.5
A few times a month	4,924.3	10.2	10,237.3	9.7
Once a week	3,789.2	7.8	5,459.4	5.2
A few times a week	6,839.5	14.2	13,195.5	12.5
Every day	7,289.9	15.1	12,577.2	11.9

Note. LPN/LVN = licensed practical nurse/licensed vocational nurse. This question was not administered in Hawaii.

Discussion and Implications

Demographics

While there is evidence of progress, the demographic distribution of the nation's nursing workforce has largely remained steady since 2015. In 2024, women continued to account for a majority of RNs (89%) and LPNs/LVNs (91%). Men, in contrast, accounted for 10% of RNs and 9% of LPNs/LVNs—representing an increase of approximately 2% since 2015. The proportion of male nurses had been steadily increasing up to 2022 but saw a decline in 2024.

The proportion of nurses from historically marginalized communities has increased slowly over time. White/Caucasians accounted for 77% of RNs and 65% of LPNs/LVNs in 2024, compared to 81% of RNs and 71% of LPNs/LVNs in 2015. Among these historically marginalized communities, Hispanic/Latino-origin, Black/African American, and Asian nurses accounted for the largest increases in both the RN and LPN/LVN workforces.

Although representation among men and people of color in both the RN and LPN/LVN workforces has improved, these groups still remain underrepresented in nursing relative to the nation's population (U.S. Census Bureau, 2021, 2024).

The age distribution of both the RN and LPN/LVN workforces changed in ways that suggest some recovery from the pandemic. Prior to 2022, both the RN and LPN/LVN workforces were slowly becoming slightly older; specifically, nurses younger than 35 years comprised a smaller and shrinking proportion of the workforce, while the share of nurses aged 50 years or older increased, accounting for slightly more than half the profession. However, in 2022, the age distributions for RNs and LPNs/LVNs deviated from their historical pattern, shifting abruptly younger. Nurses younger than 35 years accounted for 24% of RNs and 21% of LPNs/LVNs, while the proportion of nurses aged 50 years or older dropped to 43% among RNs and 45% among LPNs/LVNs. The shift toward a younger workforce may be partially explained by the departure of older nurses from the workforce who may have hastened their retirements or left the bedside during the COVID-19 pandemic. The median age was 46 years and 47 years for RNs and LPNs/LVNs, respectively, in 2022.

In 2024, however, the age distribution shifted back in alignment with pre-pandemic patterns. Nurses younger than 35 years accounted for 18% of RNs and 16% of LPNs/LVNs while nurses aged 50 years or older account for slightly more than 50% of each workforce. The median age of RNs and LPNs/LVNs was 50 years in 2024. The shift back toward a pre-pandemic age distribution suggests that some older nurses who departed the workforce during the pandemic have likely returned. Furthermore, these results may indicate a healthier and more stable workforce, though apparent declines among younger nurses warrant further investigation.

Employment

Since the onset of the COVID-19 pandemic, nursing employment has jumped. In 2024, an estimated 88% of RNs who maintain licensure are employed in nursing; among licensed RNs, 69% work full-time, 11% work part-time, and about 8% work per diem shifts. This represents no change from the 89% who reported working in nursing-related positions in 2022. From 2015 to 2020, nursing employment among RNs held steady at approximately 84%. Likewise, the 88% of LPNs/LVNs who reported being employed in nursing in 2024 was the same as the 88% of LPNs/LVNs who did so in 2022. From 2015 to 2020, nursing employment among LPNs/LVNs ranged from 80% to 83%.

Over the past reporting periods, there has been a consistent number of licensed RNs and LPNs/LVNs who reported working in fields other than nursing. Using weighted sample values, this translates to approximately 200,000 licensees. In 2024, a larger share of LPNs/LVNs than RNs worked in a field other than nursing (5% vs 3%, respectively). Despite recent concerns about nurses leaving the profession, a larger proportion is now practicing in nursing roles than in previous years.

While it appears nurse employment levels may be stabilizing, the COVID-19 pandemic may still have an impact on future employment. Survey data reported herein indicate that approximately 40% of all nurse respondents plan to retire or leave nursing in the next 5 years. Of these, 19%–22% of respondents indicated they plan to retire, while 18%–23% said they planned to leave nursing. This finding suggests that 60% plan to keep working in nursing for the foreseeable future, which is a decrease from the 71% of respondents who said they plan to keep working in nursing in the 2022 survey. The main reasons cited for leaving the workforce are retirement (52%–61%), stress and burnout (41%–42%), and workload (33%).

For nurses who reported being unemployed, about 40% of RNs and roughly 35% of LPNs/LVNs cited taking care of home and family as their reason for not working. In past reports, about 11% of RNs and 17% of LPNs/LVNs indicated disability as their main reason for being unemployed, but these rates declined in 2022. The 2024 survey findings are very similar in that approximately 7% of RNs and 12% of LPNs/LVNs reported disability as their primary reason for being unemployed.

Most nurses (82% of RNs and 80% of LPNs/LVNs) work in only one nursing position. Eighteen percent of RNs and 20% of LPNs/LVNs reported that they work in two or more nursing positions. Approximately 57% of RNs and 55% of LPNs/LVNs reported working 32–40 hours per week, while about 26% of RNs and 31% of LPNs/LVNs reported working more than 40 hours per week.

Hospitals continue to be the primary practice setting for RNs (53%), followed by ambulatory care (12%), nursing homes (5%), and home health (4%). The primary practice setting for LPNs/LVNs is nursing homes/extended care facilities (32%), followed by hospitals (12%) and home health (10%).

In comparison to 2022, the proportions of RNs and LPNs/LVNs who reported providing direct patient care in their jobs declined by a few percentage points in 2024 (RNs 73% to 68%; LPNs/LVNs 79% to 75%).

Education

The educational attainment of the nation's RN workforce has increased over time. In terms of their initial qualifying education, the share of RNs who reported having a baccalaureate level degree or higher increased from 42% in 2015 to 52% in 2024. There has been a commensurate decrease in the proportion of nurses who were initially prepared for practice in RN diploma programs, from 14% in 2015 to 9% in 2024. The share of RNs who were initially prepared in ADN programs has also decreased, from 39% to 34% between 2015 and 2024. The 2024 data also indicated that more nurses are pursuing educational advancement after entering the profession than they were a decade ago. In 2015, 30% of RNs reported that their highest degree was an ADN. In 2024, that proportion is down to 23%. Concurrently, the share of RNs whose highest nursing education is a BSN or graduate degree increased from 61% in 2015 to 73% in 2024.

There is some variation by race in terms of nursing educational attainment. For example, RNs who are American Indian or Alaska Native are proportionally more likely than RNs as a whole to report that their highest nursing degree is an associate degree. In contrast, RNs who identify as Asian are proportionally more likely than RNs as a whole to have completed a BSN. The data do not, however, seem to exhibit strong evidence of systematic race-related disparities in overall educational attainment or access to nursing education.

A vocational/practical nursing certificate is the only educational requirement for licensure as an LPN/LVN. As such, 82% of LPNs/LVNs reported a vocational/practical nursing certificate as the first nursing degree or credential that qualified them as a nurse. Additionally, 75% of LPNs/LVNs reported the same as their highest level of nursing education.

Licensure

Since NCSBN's workforce tracking began, the proportion of RNs licensed for more than 41 years was at its highest level in 2024 (13%), and the percentage of RNs licensed for 10 or fewer years was at the second-lowest level in 2024 (32%). The LPN/LVN workforce reported similar trends, with the lowest level (36%) licensed for 10 or fewer years in 2024 when compared to the previous four surveys.

APRN credentials and multistate licenses are now more prevalent. The proportion of RNs holding an APRN credential was at its highest level (13%) in 2024. The reported prevalence of APRN credentials was 2% higher than in 2022. Meanwhile, the proportion of RNs holding a multistate license rose from 30% in 2022 to 36% in 2024, while the proportion of LPNs/LVNs holding a multistate license rose from 29% in 2022 to 33% in 2024. Of those who reported using their multistate license, most indicated it facilitated the delivery of telehealth services.

Annual Earnings

Inflation, increased demand for nursing services, and lingering pandemic effects are likely key contributors to the increase in nurses' earnings. The median RN annual earnings increased from $80,000 in 2022 to $88,000 in 2024. Similarly, the median LPN/LVN annual earnings rose from $50,000 in 2022 to $58,000 in 2024. RN earnings grew in every state for which we received reported estimates. Earnings for LPNs/LVNs grew in every state with earning data except for Oregon, Rhode Island, and Wisconsin, where no changes were documented.

Although the prevalence of highly paid travel nurses was previously speculated as another explanation, this potential driver cannot solely explain the increase in earnings for RNs, who experienced a decline in the proportion of travel nurses leading up to the 2024 reporting cycle. However, this could still be part of the explanation due to a 2% increase in LPNs/LVNs who identified as travel nurses in 2024.

Telehealth

Overall, 26% of RNs and 21% of LPN/LVNs reported using some form of remote communication to provide patient care or communicate with a patient in 2024. For those nurses who utilized telehealth, there was a slight decrease in the use of the telephone, although this is still the most common method. Thirty-five percent of RNs and 24% of LPNs/LVNs utilized video calls to provide patient care or communicate with a remote patient in 2024. Electronic messaging was utilized by 38% of RNs and 39% of LPNs/LVNs in 2024. The continued use of electronic messaging and video calls to communicate or provide patient care reflects increasing patient adoption. As of 2022, more than half of patients accessed their health information through a patient portal or application (Richwine et al., 2023).

Nurse Well-Being

Fewer nurses indicated that their workload had increased in 2024 (36% of RNs and 41% of LPNs/LVNs) in comparison to 2022 (62% of RNs and 63% of LPNs/LVNs). A larger proportion of nurses in 2024 (31% of RNs and 31% of LPNs/LVNs) also indicated that their employment had not changed in the prior 2 years than did in 2022 (12% of RNs and 14% of LPNs/LVNs). There were small declines in the proportion of nurses who reported burnout symptoms a few times per week or every day. The greatest decline was among nurses who reported that they felt like they were at the end of their rope a few times per week or every day. This decreased from 29% in 2022 to 22% in 2024 for RNs and 29% in 2022 to 24% in 2024 for LPNs/LVNs.

Conclusion

Amid the emergency phase of the COVID-19 pandemic, the nursing workforce underwent a dramatic shift characterized by heightened workplace burnout, increased workloads, and the loss of hundreds of thousands of experienced RNs and LPNs/LVNs. In the past 2 years, the workforce has exhibited greater stability, marked by a return to a more typical age distribution. Trends further confirm continued progress in diversifying and increasing the educational attainment of the nursing workforce. Inflation and increased demand for nursing services have likely also contributed to notable increases in RN and LPN/LVN salaries.

Despite moderate reductions in the levels of emotional distress and burnout nurses reported during the pandemic, large proportions of the RN (40%) and LPN/LVN (41%) workforces still reported plans to leave the profession in the next 5 years. These parallel findings may be indicative of two factors that could influence the composition of the nursing workforce in the years to come. First, while hospitals continue to prioritize investments in mental health and other support services for nurses since the pandemic (AON, 2024), structural issues such as short staffing and the accompanying high workloads that pre-dated the pandemic remain (Berlin et al., 2023). These external forces could pose a potential long-term threat to the stability of nurses not eligible for retirement. Second, the re-entry of more experienced nurses to the workforce, while unquestionably an immediate and short-term net benefit, may represent a more temporary phenomenon depending on their revised retirement timelines.

Regardless, elevated intent to leave, while more informative than predictive, remains a primary concern moving forward as retirements coupled with experiences of stress and burnout were consistently reported as core reasons for nurses who left the workforce in the prior 4 years. Continued efforts to retain more experienced nurses and otherwise address longstanding factors associated with nurses' premature intent to leave, such as burnout, insufficient staffing, and high workloads, are necessary to ensure sustainable workforce planning moving forward.

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Conflicts of Interest: None

APPENDIX A

2024 National Workforce Study Questionnaire

NATIONAL NURSING WORKFORCE SURVEY

NCSBN Leading Regulatory Excellence

NATIONAL FORUM OF STATE NURSING WORKFORCE CENTERS

2024 NATIONAL NURSING WORKFORCE SURVEY

Marking Instructions

Use a No. 2 pencil or blue or black ink pen only.
Do not use pens with ink that soaks through the paper.
Make solid marks that fill the oval completely.

Correct Mark ✓ ✗ Incorrect Marks

Unless indicated, select one answer per question.

Tell Us About Your Employment

1. **How has your employment changed in the last two years?** ***(Select all that apply)***
   - My workload increased
   - I became a travel/agency nurse
   - I changed my practice setting
   - I started doing telehealth
   - I left nursing
   - I retired
   - My employment has not changed
   - Other (Please specify) _____

2. **Please mark the response that best describes how frequently you have each feeling in relation to your role at your job.**

	Never	A few times a year	Once a month or less	A few times a month	Once a week	A few times a week	Every day	Prefer not to answer
Emotionally drained	①	②	③	④	⑤	⑥	⑦	⑧
Used up	①	②	③	④	⑤	⑥	⑦	⑧
Fatigued in the morning	①	②	③	④	⑤	⑥	⑦	⑧
Burned out	①	②	③	④	⑤	⑥	⑦	⑧
End of rope	①	②	③	④	⑤	⑥	⑦	⑧

Tell Us About Your License

3. **What type of license do you currently hold?** ***(Select all that apply)***
   - RN
   - LPN
   - APRN

4. **Year of Initial U.S. Licensure:** YEAR ____

5. **In what country did you receive your entry-level nursing education?**
   - United States
   - India
   - Canada
   - Other (Please specify) _____
   - Philippines

6. **In what country were you initially licensed as an RN, LPN or APRN?**
   - United States
   - India
   - Canada
   - Other (Please specify) _____
   - Philippines

7. **What is the status of the license currently held?**
   - Active
   - Inactive

8. **Indicate whether you are credentialed in your state to practice as any of the following:** ***(Select all that apply)***
   - Certified Nurse Practitioner
   - Clinical Nurse Specialist
   - Certified Registered Nurse Anesthetist
   - Certified Nurse Midwife
   - Not credentialed as any of the above

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9. Please indicate the states in which you hold an active license to practice as an RN, LPN or APRN: ***(Select all that apply)***

○ AK	○ HI	○ MI	○ NV	○ UT
○ AL	○ IA	○ MN	○ NY	○ VA
○ AR	○ ID	○ MO	○ OH	○ VT
○ AZ	○ IL	○ MS	○ OK	○ WA
○ CA	○ IN	○ MT	○ OR	○ WI
○ CO	○ KS	○ NC	○ PA	○ WV
○ CT	○ KY	○ ND	○ RI	○ WY
○ DC	○ LA	○ NE	○ SC	○ **AS**
○ DE	○ MA	○ NH	○ SD	○ **GU**
○ FL	○ MD	○ NJ	○ TN	○ **MP**
○ GA	○ ME	○ NM	○ TX	○ **VI**

10. Please indicate the states in which you are currently practicing as an RN, LPN or APRN: ***(Select all that apply)***

○ AK	○ HI	○ MI	○ NV	○ UT
○ AL	○ IA	○ MN	○ NY	○ VA
○ AR	○ ID	○ MO	○ OH	○ VT
○ AZ	○ IL	○ MS	○ OK	○ WA
○ CA	○ IN	○ MT	○ OR	○ WI
○ CO	○ KS	○ NC	○ PA	○ WV
○ CT	○ KY	○ ND	○ RI	○ WY
○ DC	○ LA	○ NE	○ SC	○ **AS**
○ DE	○ MA	○ NH	○ SD	○ **GU**
○ FL	○ MD	○ NJ	○ TN	○ **MP**
○ GA	○ ME	○ NM	○ TX	○ **VI**

Tell Us About Your Work

11. What is your employment status? ***(Select all that apply)***

- ○ Actively employed in nursing or in a position that requires a nurse license full-time
- ○ Actively employed in nursing or in a position that requires a nurse license part-time
- ○ Actively employed in nursing or in a position that requires a nurse license on a per-diem basis
- ○ Actively employed in a field other than nursing full-time
- ○ Actively employed in a field other than nursing part-time
- ○ Actively employed in a field other than nursing on a per-diem basis
- ○ Working in nursing only as a volunteer
- ○ Unemployed, seeking work as a nurse
- ○ Unemployed, not seeking work as a nurse
- ○ Retired

12. If unemployed or retired, please indicate the reasons. ***(Select all that apply)***

- ○ Taking care of home and family
- ○ Disabled
- ○ Inadequate salary
- ○ Other (Please specify)
- ○ School
- ○ Difficulty in finding a nursing position

If you are not actively employed in nursing, please skip to Question 31.

13. Do you plan to retire or leave nursing in the next five years?

- ○ Yes, I plan to retire
- ○ Yes, I plan to leave nursing
- ○ No

14. If you plan to leave nursing in the next five years, please indicate the reasons. ***(Select all that apply)***

- ○ Retirement
- ○ Taking care of home and family
- ○ School
- ○ Inadequate salary
- ○ Understaffing
- ○ Workplace violence or bullying
- ○ Workload
- ○ Disability
- ○ Stress and burn-out
- ○ Other (please specify)

15. In how many positions are you currently employed as a nurse?

○ 1 ○ 2 ○ 3 or more

16. How many hours do you work during a typical week in all your nursing positions?

HOURS

17. Are you currently a travel nurse?

○ Yes ○ No

18. Please indicate the zip code of your primary employer.

ZIP CODE

19. Please estimate your 2023 pre-tax annual earnings from your primary nursing position. Include overtime and bonuses but exclude sign-on bonuses.

$ EARNINGS .00 per year

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20. Please identify the type of setting that most closely corresponds to your primary nursing practice position.

- ○ Hospital
- ○ Nursing Home/ Extended Care
- ○ Assisted Living Facility
- ○ Home Health
- ○ Hospice
- ○ Correctional Facility
- ○ School of Nursing
- ○ Public Health
- ○ Dialysis Center
- ○ Community Health
- ○ School Health Service
- ○ Occupational Health
- ○ Ambulatory Care Setting
- ○ Insurance Claims/Benefits
- ○ Policy/Planning/ Regulatory/Licensing Agency
- ○ Other (Please specify)

_____

21. Please identify the position title that most closely corresponds to your primary nursing practice position.

- ○ Consultant
- ○ Nurse Researcher
- ○ Nurse Executive
- ○ Nurse Manager
- ○ Nurse Faculty/Educator
- ○ Other–Health Related (Please specify)
- ○ Advanced Practice Registered Nurse
- ○ Staff Nurse
- ○ Case Manager

_____

- ○ Other–Not Health Related (Please specify)

_____

22. Please identify the employment specialty that most closely corresponds to your primary nursing practice position.

- ○ Acute Care/Critical Care
- ○ Adult Health
- ○ Anesthesia
- ○ Cardiology
- ○ Community
- ○ Emergency/ Trauma
- ○ Family Health
- ○ Genetics
- ○ Geriatric/Gerontology
- ○ Home Health
- ○ Informatics
- ○ Information Technology
- ○ Maternal-Child Health/ Obstetrics
- ○ Medical Surgical
- ○ Neonatal
- ○ Nephrology
- ○ Other–Clinical specialties (Please specify)
- ○ Neurology/ Neurosurgical
- ○ Occupational Health
- ○ Oncology
- ○ Orthopedic
- ○ Palliative Care/ Hospice
- ○ Pediatrics
- ○ Perioperative
- ○ Primary Care
- ○ Public Health
- ○ Psychiatric/Mental Health/ Substance Abuse
- ○ Radiology
- ○ Rehabilitation
- ○ School Health
- ○ Urologic
- ○ Women's Health

_____

- ○ Other–Non-clinical specialties (Please specify)

_____

23. In your primary nursing practice position, do you spend the majority of your time providing direct patient care?

- ○ Yes
- ○ No

24. Please identify the type of setting that most closely corresponds to your secondary nursing practice position.

- ○ No Secondary Practice Position
- ○ Hospital
- ○ Nursing Home/ Extended Care
- ○ Assisted Living Facility
- ○ Home Health
- ○ Hospice
- ○ Correctional Facility
- ○ School of Nursing
- ○ Public Health
- ○ Dialysis Center
- ○ Community Health
- ○ School Health Service
- ○ Occupational Health
- ○ Ambulatory Care Setting
- ○ Insurance Claims/ Benefits
- ○ Policy/Planning/ Regulatory/ Licensing Agency
- ○ Other (Please specify)

_____

25. Please identify the position title that most closely corresponds to your secondary nursing practice position.

- ○ No Secondary Practice Position
- ○ Consultant
- ○ Nurse Researcher
- ○ Nurse Executive
- ○ Nurse Manager
- ○ Nurse Faculty/Educator
- ○ Advanced Practice Registered Nurse
- ○ Staff Nurse
- ○ Case Manager
- ○ Other–Health Related (Please specify)

_____

- ○ Other–Not Health Related (Please specify)

_____

26. In your secondary nursing practice position, do you spend the majority of your time providing direct patient care?

- ○ No Secondary Practice Position
- ○ Yes
- ○ No

PageTHREE

Tell Us About Your Experience with Telehealth

27. Do you provide nursing services or communicate with a patient or client located somewhere different from where you are located, via phone or electronically? *(Select all that apply)*

- ○ No
- ○ Yes, to patients or clients within state borders
- ○ Yes, to patients or clients across state borders
- ○ Yes, to patients or clients across national borders

28. Please select the mode(s) of communication you use to provide nursing services, or communicate with, a remote patient or client. *(Select all that apply)*

- ○ Not applicable; I do not provide nursing services or communicate with remote patients or clients
- ○ Electronic messaging (ex: text message, instant message)
- ○ Virtual ICU (also known as: tele-ICU, remote ICU, eICU)
- ○ Telephone
- ○ Email
- ○ Video call (Zoom, Skype, FaceTime, MSTeams, etc.)
- ○ Other (Please specify)

Tell Us About Your Experience with the Nurse Licensure Compact

29. Do you hold a multi-state license?

○ Yes ○ No

30. How have you used your multi-state license?

- ○ I do not hold a multi-state license
- ○ Have Not Used
- ○ Disaster support
- ○ Distance education
- ○ Telehealth/communicating across state borders
- ○ Other (Please specify)

Tell Us About Yourself

31. What is your gender?

○ Male ○ Female ○ Non-Binary

32. Are you of Hispanic or Latino origin?

○ Yes ○ No

33. What is your race? *(Select all that apply)*

- ○ American Indian or Alaska Native
- ○ Asian
- ○ Black/African American
- ○ Native Hawaiian or Other Pacific Islander
- ○ White/Caucasian
- ○ Other

34. In what year were you born?

YEAR

35. What type of nursing degree/credential qualified you for your first U.S. nursing license?

- ○ Vocational/Practical certificate–nursing
- ○ Diploma–nursing
- ○ Associate degree–nursing
- ○ Baccalaureate degree–nursing
- ○ Master's degree–nursing
- ○ Doctoral degree–nursing (PhD)
- ○ Doctoral degree–nursing (DNP)

36. What is your highest level of nursing education?

- ○ Vocational/Practical certificate–nursing
- ○ Diploma–nursing
- ○ Associate degree–nursing
- ○ Baccalaureate degree–nursing
- ○ Master's degree–nursing
- ○ Doctoral degree–nursing (PhD)
- ○ Doctoral degree–nursing practice (DNP)
- ○ Doctoral degree–nursing other

37. What is your highest level of non-nursing education?

- ○ Associate degree–non-nursing
- ○ Baccalaureate degree–non-nursing
- ○ Master's degree–non-nursing
- ○ Doctoral degree–non-nursing
- ○ Not applicable

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APPENDIX B

Registered Nurse Nonresponse Analyses and Sample Weighting

A formal nonresponse bias analysis was conducted following the close of the survey. Although response rates are a valuable indicator of survey quality, they are not a good measure of response bias. An analysis of basic demographic data (gender and age) for all RN licensees sampled from the Nursys database was used to compare the survey respondents and nonrespondents to determine the representativeness of the survey participants. The analysis was restricted to the states in the mailout portion of the survey who allowed the data to be shared from the Nursys database.

Variables in the data file came from both the Nursys database (i.e., the frame data) and responses to the survey (i.e., survey data). The variables used in the nonresponse analysis were from the frame and included state, date of birth, gender, and ethnicity. The dependent variable in the analysis was whether or not the sampled RN population completed the questionnaire.

Weights

In the 2015, 2017, 2020, and 2022 National Nursing Workforce Survey reports, nonresponse adjustments were made for gender and age. For the 2024 Survey, nonresponse adjustments were applied for gender and age in the jurisdictions for which data were obtained through the Nursys database. In order to create the combined age and gender (AgeGender) nonresponse weights (i.e., AgeGenderWgtC), the survey response rates for the age variable were compared at the 5-year age group level, and neighboring cells with similar response rates were collapsed. Upon completion of this process, five age groups were created (18 to 34, 35 to 54, 55 to 59, 60 or older, and missing). These five age groups were combined with the gender variable response categories (male, female, missing) to produce 15 AgeGender categories. The survey response rate for each AgeGender category (# responding/# in sample frame) was calculated and used to create each category's weight as follows:

$$\text{AgeGender Category Weight} = \frac{\text{Overall Survey Response Rate}}{\text{AgeGender Category Survey Response Rate}}$$

Table 1 displays the weights for the 15 AgeGender categories in jurisdictions for which data were obtained through the Nursys database.

TABLE B1

Response Bias RNs: AgeGender Weights

Age Group, y	Gender: Missing	Gender: Female	Gender: Male
18–34	1.088	1.054	1.254
35–54	1.040	0.979	1.056
55–59	0.974	0.937	1.028
≥60	0.981	0.976	0.981
Age missing	1.038	0.978	1.044

Post-stratification weights (i.e., JurisdictionWgtC) were constructed at the state level to adjust for differing sampling rates across states. These adjustments were made by comparing the number of responses to the number of licensees in that state. Analysis of the raw data, without accounting for the sample design, would lead to the overall results being too heavily influenced by states with fewer licensees.

Overall weights (pct_wgtC), which combined the AgeGender and poststratification weights, were created by multiplying the AgeGender and poststratification weights for each individual to create an initial set of weights, adding the initial weights together, and slightly adjusting the weights so that they sum to the total number of responses in the mailout, email, and e-Notify portions of the survey.

The overall weights adjusted the distribution across states, age, and gender but sum to the actual number of RNs in the subset of completed responses. They can be applied when analyzing relationships between variables without the effect of artificially altering the degrees of freedom and thereby affecting significance tests.

Licensed Practical/Licensed Vocational Nurse Nonresponse Analyses and Sample Weighting

As with the RNs, a formal nonresponse bias analysis was conducted on the LPN/LVN data following the close of the survey. Variables in the data file came from both the Nursys database (i.e., the frame data) and responses to the survey (i.e., survey data). The variables used in the nonresponse analysis were from the frame and included date of birth and gender. The dependent variable in the analysis was whether or not the sampled LPN/LVN population completed the questionnaire. The analysis was restricted to the states in the mailout portion of the survey who allowed the data to be shared from the Nursys database.

Weights

In the 2015, 2017, 2020, and 2022 National Nursing Workforce Survey reports, nonresponse adjustments were made for gender and age. For the 2024 Survey, nonresponse adjustments were applied for gender and age in the jurisdictions for which data were obtained through the Nursys database. In order to create the combined age and gender (AgeGender) nonresponse weights (i.e., AgeGenderWgtC), the survey response rates for the age variable were compared at the 5-year age group level and neighboring cells with similar response rates were collapsed. Upon completion of this process, five age groups were created (18 to 34, 35 to 54, 55 to 59, 60 or older, and missing). These five age groups were combined with the gender variable response categories (male, female, missing) to produce 15 AgeGender categories. The survey response rate for

each AgeGender category (# responding/# in sample frame) was calculated and used to create each category's weight as follows:

$$\text{AgeGender Category Weight} = \frac{\text{Overall Survey Response Rate}}{\text{AgeGender Category Survey Response Rate}}$$

Table 2 displays the weights for the 15 AgeGender categories in jurisdictions for which data was obtained through the Nursys® database.

TABLE B2

Response Bias LPNs/LVNs: AgeGender Weights

Age Group, y	Gender: Missing	Gender: Female	Gender: Male
18–34	1.163	1.135	1.293
35–54	1.078	0.977	1.123
55–59	0.995	0.932	1.048
≥60	0.937	0.956	1.034
Age missing	1.051	1.017	1.058

Poststratification weights (i.e., JurisdictionWgtC) were constructed at the state level to adjust for differing sampling rates across states. However, these adjustments were made not by comparing the number of responses in a state to its sample frame count, but rather by comparing the number of responses to the number of licensees in that state. An example of how these weights were calculated can be found in the RN nonresponse sample weighting section.

Overall weights (pct_wgtC), which combined the AgeGender and poststratification weights were created by multiplying the AgeGender and poststratification weights for each individual to create an initial set of weights, adding the initial weights together, and slightly adjusting the weights so that they sum up to the total number of responses in the mailout, email, and e-Notify portions of the survey.

The overall weights simply adjust the distribution across states, age, and gender, but sum to the actual number of LPNs/LVNs in the subset of completed responses. They can be applied when analyzing relationships between variables without the effect of artificially altering the degrees of freedom and thereby affecting significance tests.