KENTUCKY BOARD OF NURSING
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SUMMARY REPORT OF KENTUCKY BOARD OF NURSING ADVISORY OPINIONS ON NURSING PRACTICE ISSUES

July 1, 2009 – June 30, 2010

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Advisory Opinion Statements – New

- AOS #37, Role of the Advanced Registered Nurse Practitioner in the Prescribing of Medications to Self and/or Family – approved 10/2009
- AOS #38, Facilitation of Self-Administration of Medications in a Non-Healthcare Setting – approved 4/2010

New Delegation Decision Tree

- *Decision Tree for Delegation to Unlicensed Assistive Personnel*, approved 12/2009

Advisory Opinion Statements – Revised

- AOS #3, Recommended Course Content Intravenous (IV) Therapy for Registered Nurses and Licensed Practical Nurses – revised 2/2010

Advisory Opinion Statements – Reviewed

- AOS #5, The Performance of Advanced Life Support Procedures by Nurses
- AOS #17, Roles of Nurses in the Administration of "PRN" Medications and Placebos

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The primary mission and purpose of the Board is to enforce public policy related to the safe and effective practice of nursing in the interest of public welfare. As a regulatory agency of state government, the Board of Nursing accomplishes this mission as authorized by Kentucky Revised Statutes (KRS) Chapter 314—The *KENTUCKY NURSING LAWS* and attendant administrative regulations. In accomplishing one aspect of the mission, the Board of Nursing issues advisory opinions on what constitutes the legal scope of nursing practice.

An opinion is not a regulation of the Board; it does not have the force and effect of law. Rather, an opinion is issued as a guidepost to licensees who wish to engage in safe nursing practice.

KRS 314.011(6) defines "registered nursing practice" as:

> ...The performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon the principles of psychological, biological, physical, and social sciences in the application of the nursing process in:
>
> a) The care, counsel, and health teaching of the ill, injured or infirm.
>
> b) The maintenance of health or prevention of illness of others.
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> c) The administration of medication and treatment as prescribed by a physician, physician assistant, dentist, or advanced registered nurse practitioner and as further authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses. Components of medication administration include, but are not limited to:
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> 1. Preparing and giving medication in the prescribed dosage, route, and frequency, including dispensing medications only as defined in subsection (17)(b) of this section;
> 2. Observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy;
> 3. Intervening when emergency care is required as a result of drug therapy;
> 4. Recognizing accepted prescribing limits and reporting deviations to the prescribing individual;
> 5. Recognizing drug incompatibilities and reporting interactions or potential interactions to the prescribing individual; and
> 6. Instructing an individual regarding medications.
>
> d) The supervision, teaching of, and delegation to other personnel in the performance of activities relating to nursing care.
>
> e) The performance of other nursing acts which are authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses.

KRS 314.011(10) defines "licensed practical nursing practice" as:

> ...The performance of acts requiring knowledge and skill such as are taught or acquired in approved schools for practical nursing in:
>
> a) The observing and caring for the ill, injured, or infirm under the direction of a registered nurse, a licensed physician, or dentist.
>
> b) The giving of counsel and applying procedures to safeguard life and health, as defined and authorized by the board.
>
> c) The administration of medication or treatment as authorized by a physician, physician assistant, dentist, or advanced registered nurse practitioner and as further authorized or limited by the board which is consistent with the National Federation of Licensed Practical Nurses or with Standards of Practice established by nationally accepted organizations of licensed practical nurses.
>
> d) Teaching, supervising, and delegating except as limited by the board.
>
> e) The performance of other nursing acts which are authorized or limited by the board and which are consistent with the National Federation of Licensed Practical Nurses' Standards of Practice or with Standards of Practice established by nationally accepted organizations of licensed practical nurses.

KRS 314.021(2) states:

> All individuals licensed under provisions of this chapter shall be responsible and accountable for making decisions that are based upon the individuals' educational preparation and experience in nursing and shall practice nursing with reasonable skill and safety.

KRS 314.021(2) imposes individual responsibility upon a nurse to undertake the performance of acts for which the nurse is educationally prepared and clinically competent to perform in a safe, effective manner. This section holds nurses individually responsible and accountable for rendering safe, effective nursing care to clients and for judgments exercised and actions taken in the course of providing care.

Acts that are within the permissible scope of practice for a given licensure level may be performed only by those licensees who personally possess the education and experience to perform those acts safely and competently. A nurse/licensee who doubts his/her personal competency to perform a requested act has an affirmative obligation to refuse to perform the act, and to inform his/her supervisor and the physician prescribing the act, if applicable, of his/her decision not to perform the act.

If a licensee accepts an assignment that the licensee believes is unsafe or for which the licensee is not educationally prepared, then the licensee also assumes the potential liability, which may occur as a result of the assignment. Others may equally or concurrently be responsible, accountable, and liable for a licensee's actions.

Practice should be consistent with the *Kentucky Nursing Laws*, established standards of practice, and be evidenced based.

The Board has published "Scope of Practice Determination Guidelines" as a decision making model for an individual licensee to use in determining whether the performance of a specific act is within the scope of practice for which the individual is educationally prepared, clinically competent and licensed to perform. Individuals are encouraged to utilize the "Guidelines" in making decisions as to whether he/she should or should not perform a particular act. A copy may be obtained from the Board office, or from the Board's website at http://kbn.ky.gov.

The responsibilities which any nurse can safely accept are determined by the variables in each nursing practice setting. These variables include:

1. The nurse's own qualifications including:
   a. basic prelicensure educational preparation;
   b. knowledge and skills subsequently acquired through continuing education and practice; and
   c. current clinical competence.
2. The "standard of care" which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience.
3. The complexity and frequency of nursing care needed by a given client population.
4. The proximity of clients to personnel.
5. The qualifications and number of staff.
6. The accessible resources.
7. The established policies, procedures, standards of practice, and channels of communication which lend support to the types of nursing services offered.

To date, the Board has published thirty-six (36) advisory opinion statements, as listed on the "Kentucky Board of Nursing Publications" form and on the Board's website at http://kbn.ky.gov.

Advisory opinion statements are developed and published when:

1. Multiple inquiries are received regarding a specific nursing procedure or act;
2. The Practice Committee determines that a specific nursing procedure or act has general applicability to nursing practice and warrants the development of an opinion statement; or
3. The Board directs that an opinion statement be developed.

When studying issues, the Board reviews and considers applicable standards of practice statements published by professional nursing organizations; the educational preparation of both registered and licensed practical nurses as provided in the prelicensure nursing education programs in the Commonwealth; and, when applicable, the organized post-basic educational programs for advanced registered nurse practitioners. The Board also gathers information regarding practice issues from nurses in relevant practice settings (including staff nurses, supervisors, nurse faculty members, etc.) and/or representatives from state nursing associations in the Commonwealth, among others. Further, the Board reviews applicable opinions issued by the Office of the Attorney General.

In addition to the thirty-eight (38) advisory opinion statements published as of June 30, 2010, the Board has issued from July 1, 2009 to June 30, 2010, individual advisory opinions in response to inquiries on specific nursing practice situations, summarized as follows:

1. **Scope of Advanced Registered Nursing Practice – SWAT Medic and Etomidate**

   October 2009 – It was the advisory opinion of the Board that it is within the scope of advanced registered nursing practice for the educationally prepared and clinically competent ARNP, to administer Etomidate in a pre-hospital emergency situation for rapid sequence induction when a physician is not present.

2. **Scope of Advanced Registered Nursing Practice – Prescribing for Self and/or Family**

   October 2009 – It was the advisory opinion of the Board that an ARNP should not self-prescribe nor self-administer controlled substances and that an ARNP should only utilize controlled substances when treating a family member in an emergency situation which should be further documented in the patient's record by their healthcare provider.

3. **Scope of Advanced Registered Nursing Practice in the Performance of Screening Colonoscopies**

   October 2009 – It was the advisory opinion of the Board that ARNPs should refer and utilize the "Scope of Determination Guidelines" whenever the performance of a specific act is not addressed in the Kentucky Nursing laws.

4. **Scope of Registered Nursing Practice in the Administration of Etomidate**

   December 2009 – It was the advisory opinion of the Board that the administration of Etomidate in a medication facilitated intubation is within the scope of registered nursing practice when:

   - The administration of the medication is performed under the direct supervision/presence of the physician, advanced registered nurse practitioner designated nurse anesthetist, or advanced registered nurse practitioner who is educationally prepared and clinically competent to perform the intubation.

   - The nurse is educationally prepared and currently clinically competent to perform the act in a safe, competent manner. Documentation of the nurse's educational preparation and demonstrated clinical competence is maintained.

- The monitoring of the patient is according to accepted standards of practice and is performed according to the facility's established, written policies and procedures.

5. Scope of Licensed Practical Nursing Practice and the Definition of "Readily Available"

February 2010 – It was the advisory opinion of the Board that the definition of "readily available" should be based upon the patient assessment by the registered nurse and the acuity of the patient. Supervision requirements should be adhered to as defined in 201 KAR 20:490, Section 3.

All advisory opinion statements may be obtained from the Board office or from the KBN website http://kbn.ky.gov.

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