KENTUCKY BOARD OF NURSING
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ADVISORY OPINION STATEMENT

ROLES OF NURSES IN THE INSERTION AND REMOVAL OF A NASOGASTRIC TUBE AND IN THE REINSERTION OF A GASTROSTOMY TUBE

Introduction

The Kentucky Board of Nursing is authorized by Kentucky Revised Statutes (KRS) Chapter 314 to regulate nurses, nursing education and practice, and to issue advisory opinions on nursing practice, in order to assure that safe and effective nursing care is provided by nurses to the citizens of the Commonwealth.

The Kentucky Board of Nursing issues advisory opinions as to what constitutes safe nursing practice. As such, an opinion is not a regulation of the Board and does not have the force and effect of law. It is issued as a guideline to licensees who wish to engage in safe nursing practice.

Accountability and Responsibility of Nurses

KRS 314.021(2) 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.

KRS 314.021(2) imposes individual responsibility upon nurses. Acts which 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 skill proficiency to perform those acts in a safe, effective manner.

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

Statutes

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:
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> a) The care, counsel, and health teaching of the ill, injured or infirm.
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> b) The maintenance of health or prevention of illness of others.

c) The administration of medication and treatment as prescribed by a physician, physician assistant, dentist, or advanced practice registered nurse 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:

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 practice registered nurse 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.

Advisory Opinion

The Kentucky Board of Nursing has received numerous inquiries regarding the role of nurses, primarily licensed practical nurses, in the insertion and removal of nasogastric tubes. Following study, the Board issued this advisory opinion statement.

1. Nasogastric Intubation -- LPN

"Nasogastric intubation" means the placement of a tube into the stomach. The specific type of tube to be inserted should be determined after evaluation of multiple factors, including but not limited to the following: a) order of a qualified provider, b) individual patient need,

c) manufacturer product information, d) precautions and potential complications associated with the specific tube, e) available research data, and f) availability of x-ray equipment to evaluate the placement of the tube. Written approved facility policy, and nursing policy and procedure should be established delineating the specific type of nasogastric tubes that may be utilized in the health care setting.

It is within the scope of licensed practical nursing practice, for the nurse who is educationally prepared and clinically competent in the performance of the procedure, to insert a nasogastric tube into the stomach of a patient who has normal anatomy and physiology of the respiratory and gastrointestinal tracts, when the nasogastric tube is placed into the stomach for such purposes as gavage, lavage for toxic substances, collection of nasogastric samples or administration of medications. If there is any question as to the safe performance of the procedure, the licensed practical nurse should consult with the registered nurse, physician, dentist, or the patient's provider.

A. The licensed practical nurse should perform this procedure under the "direction"[1] of a registered nurse, physician, or dentist.

B. The licensed practical nurse who performs this procedure is responsible for having documented evidence of adequate educational preparation and experience to perform this act as required by KRS 314.021(2). Such educational preparation should be acquired in an approved prelicensure education program for practical nurses or through successful completion of a Board approved continuing education course for the performance of the procedure.

C. The licensed practical nurse should perform this procedure according to a written nursing policy and procedure that is consistent with the definition of "licensed practical nursing practice."

2. Nasogastric Intubation -- RN

It is within the scope of registered nursing practice, to insert a nasogastric tube into a patient who has a condition that alters the normal anatomy and physiology of the respiratory or gastrointestinal tract. If there is any question as to the safe performance of the procedure, the registered nurse should consult the patient's medical provider.

3. Removal of a Nasogastric Tube

It is within the scope of nursing practice, for the nurse who is educationally prepared and clinically competent in the performance of the procedure, to remove a nasogastric tube.

4. Reinsertion of a Gastrostomy Tube

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[1] "Direction" means communication of a plan of care, which is based upon an assessment and analysis of the patient by the registered nurse, physician or dentist, which establishes the parameters for the provision of care or for the performance of an act. The registered nurse, physician, or dentist is available to assess and evaluate patient response(s) and to assess, direct and evaluate nurse performance.

A. It is within the scope of nursing practice, for the nurse who is educationally prepared and clinically competent in the performance of the procedure, to change a previously inserted gastrostomy tube into a mature stoma site upon an order of a qualified provider. If there is question as to the safe performance of the procedure, the nurse should consult with the patient's medical provider prior to the reinsertion of the gastrostomy tube.

B. The licensed practical nurse should perform this procedure under the "direction" of a registered nurse, physician, or dentist.

C. The nurse who performs this procedure is responsible for having documented evidence of adequate educational preparation and experience to perform this act as required by KRS 314.021(2). Such educational preparation should be acquired in an approved prelicensure education program or through successful completion of a Board approved continuing education course. The performance of the procedure should be in accordance with written nursing policy and procedure.

Magnet Nasal Tube Retaining Device

The placement and removal of a nasal tube retaining device/system used to prevent nasal tube pullouts are within the scope of registered nursing practice. The registered nurse would place the device after a physician/APRN has completed an individual assessment of the patient and issued medical authorization for its placement. Following placement, the patient should be reassessed by a physician/APRN to assure its correct placement and that no complications have occurred. The registered nurse who places and /or removes a nasal tube retaining device must possess the requisite educational preparation and current clinical competence to perform the procedure in a safe, competent manner

Determining the Scope of Practice

KRS 314.021(2) holds all nurses individually responsible and accountable for the individual's acts based upon the nurse's education and experience. Each nurse must exercise professional and prudent judgment in determining whether the performance of a given act is within the scope of practice for which the nurse is both licensed and clinically competent to perform. In addition to this advisory opinion statement, the Kentucky Board of Nursing has published "Scope of Practice Determination Guidelines" which contains a decision tree chart providing guidance to nurses in determining whether a selected act is within an individual nurse's scope of practice now or in the future. A copy of the guidelines may be downloaded from the KBN website at http://kbn.ky.gov

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