KENTUCKY BOARD OF NURSING
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ADVISORY OPINION STATEMENT

ROLES OF NURSES IN THE DELIVERY OF PREHOSPITAL EMERGENCY MEDICAL CARE VIA AMBULANCE SERVICES

Introduction

Numerous inquiries have been received by the Kentucky Board of Nursing regarding the appropriate utilization, role, and scope of nursing practice for both registered nurses and licensed practical nurses in the delivery of prehospital emergency medical care via "ambulance services".[1] Individuals submitting inquiries included nurses who have been involved in the delivery of emergency medical services via neonatal transport services, aeromedical emergency services, mobile intensive care units, basic and advanced life-support units as well as interhospital transport systems.

The Kentucky Board of Nursing is authorized by *Kentucky Nursing Laws* (Kentucky Revised Statutes 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.

Emergency Medical Services Regulation

Prehospital emergency services are made available to the citizens of the Commonwealth through an established state emergency medical system. Emergency medical services are provided by competent qualified personnel who work collaboratively as a team to provide both basic and advanced life-support in the prehospital emergency environment. Such personnel may include, but are not limited to, emergency medical technicians (EMT), paramedics, nurses, and physicians.

Individuals who provide services within the emergency medical system are governed by various statutes and regulated by specific state agencies including: the Kentucky Board of Emergency Medical Services (KRS Chapter 311A--licensure of paramedics, EMTs, and ambulance providers); and the Kentucky Board of Nursing (KRS Chapter 314--licensure of registered nurses and licensed practical nurses).

Statutes and administrative regulations governing emergency medical services/systems personnel should reflect appropriate utilization of all qualified individuals in the delivery of emergency medical care.

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[1]"Ambulance Services" for the purpose of this statement means ground, air, and mobile intensive care units as well as basic, advanced, and interhospital transport systems. For information regarding the statutes and regulations governing ambulance services, paramedics and emergency medical technicians, contact the Kentucky Board of Emergency Medical Services, 300 North Main St., Versailles, KY 40383. Telephone: (859) 256-3565.

Accountability and Responsibility of Registered Nurses

Kentucky Nursing Laws, KRS 314.021(2), states that:

> 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.

KRS 314.021(2) holds nurses individually responsible and accountable for rendering safe, effective nursing care to patients and for judgments exercised and actions taken in the course of providing care.

KRS 314.021(2) imposes individual responsibility upon nurses to undertake the performance of acts for which they are prepared by virtue of their education and experience in nursing. Acts which are within the permissible scope of practice for a given licensure level may be performed only by those nurses who personally possess the education and skill proficiency to perform those acts in a safe, competent manner.

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

Utilization, Role and Scope of Registered Nurses

The Kentucky Board of Nursing recognizes the participation of qualified registered nurses in both the delivery of prehospital emergency medical care and in the educational preparation of emergency medical technicians and paramedics.

Position statements of both the Emergency Nurses Association (ENA) and the Air and Surface Transport Nurses Association (ASTNA) recognize the role of the registered nurse in pre-hospital/out-of-hospital care. Both recognize the long and effective history registered nurses have in providing education to pre-hospital care providers throughout the United States.

The Kentucky Board of Nursing recognizes the overlap of practice among emergency medical care providers in a prehospital environment and further recognizes the collaborative role of such providers.

Registered nurses who practice in emergency medical services (or who provide emergency medical care) are practicing in a specialty area of nursing practice and, subsequently, should be regulated as any other specialty area of nursing practice. Registered nurses generally do not hold (may or may not hold) certification as emergency medical technicians or paramedics, but are otherwise qualified through educational and experiential preparation and clinical competence to practice in these arenas. Such nurses have acquired training and skill in such areas as caring for unstable neonates, high-risk obstetrical patients, seriously ill and injured adults and children having potential life and/or limb threatening conditions. Such practice is within the scope of "registered nursing practice" as defined in KRS 314.011(6).

In accordance with the definition of "registered nursing practice," it is an appropriate role and within the scope of registered nursing practice for qualified registered nurses to initiate care under local medical control by implementing established medical guidelines setting forth the delivery of prehospital emergency medical care.

The registered nurse (in accordance with guidelines) is expected to initiate the nursing process when practicing in the prehospital emergency care environment and to formulate a diagnosis (potential problem list and medical diagnosis), prescribe treatment, initiate intervention and continue to assess, diagnose, treat and evaluate.

The Kentucky Board of Nursing has endorsed the ENA and ASTNA positions describing the role of the registered nurse to deliver prehospital care by initiating the nursing process, which include the following:

- Utilization of independent judgment, analytical thinking, decision making and prioritization.
- Conducting a physical assessment appropriate to the situation including pertinent history of present illness and injury;
- Formulating nursing diagnosis, expected outcomes and plan of care, which reflects synthesis, and application of knowledge, assessment data, and available resources;
- Implementing prehospital and inter-hospital interventions based upon the nursing diagnoses and patient priorities commensurate with national standards for prehospital practice, emergency/flight nursing, and local standards of medical control;
- Evaluating the efficacy and outcome of nursing and medical interventions throughout the treatment and transfer process with continued reassessment of the patient plan of care based on patient responses and medical direction;
- Collaborating and coordinating with other personnel in the prehospital, inter-hospital and intra-hospital settings to facilitate optimum patient care;
- Communicating relevant data via radio or telephone to the designated facility; and
- Delivering accurate and thorough report(s), both written and verbal, of patient information to the receiving health care team upon delivery of the patient.

Qualifications of Registered Nurses Who Provide Prehospital Emergency Care Services

The practice of nursing in a prehospital emergency medical service setting represents a specialty area of nursing practice requiring the application of: 1) knowledge and skills as taught in prelicensure registered nurse educational programs, and 2) specialized knowledge and skill applicable to the prehospital emergency care environment as acquired via additional educational and experiential preparation.

The curricula taught in approved prelicensure registered nurse educational programs provide a substantial knowledge base for the registered nurse to provide direct patient care outside the traditional health care institution. Before assuming a nursing role in the prehospital emergency care environment, the registered nurse must have acquired appropriate knowledge and demonstrated skill proficiency unique to the delivery of prehospital care. The additional knowledge and skill may be acquired through substantial clinical practice in emergency, critical care and/or applicable specialty arenas.

The type of facility and patient population for which the nurse has had experience will dictate the actual experience gained and; therefore, it is difficult to set a standard which is appropriate to all registered nurses, as to the length of time that a nurse must have been employed/gained experience prior to employment with an emergency medical service.

Registered nurses may acquire additional knowledge and skill in the delivery of prehospital emergency care beyond that acquired in prelicensure programs through completion of specialized courses such as the "Trauma Nurse Specialist Program" (state of Illinois); and the "Advanced Provider Course" sponsored by the Air and Surface Transport Nurses Association. Further, registered nurses should have successfully completed and maintained competence in Advanced Cardiac Life Support (American Heart Association).

In addition, nurses should complete an orientation program to the emergency medical system/service prior to serving in a primary attendant role in an ambulance. This should include, but is not limited to, components essential to role, such as communication and transport systems, scene management, extrication techniques, crisis intervention, initiation of guidelines for care, collaborative practice with other members of the emergency health care team, and advanced trauma life-and-limb support procedures.

Nurses should maintain documentation of educational preparation and demonstrated skill proficiency in the delivery of prehospital care.

Registered nurses employed in a prehospital emergency medical service (EMS) system would be expected to implement guidelines of the medical director as established by the emergency medical services system. Nurses would be expected to perform acts according to appropriately established approved policies, procedures, and medical directives of the employing emergency medical service.

When a registered nurse is employed by an EMS service under the clinical direction of a medical director and the medical director's responsibilities include assuring clinical competency of staff, then the registered nurse would provide evidence of educational and experiential preparation and current clinical competency as required.

A registered nurse who has obtained the appropriate knowledge and skill unique to the delivery of prehospital emergency care would not be required to be certified as an emergency medical technician or paramedic. However, a nurse would not be precluded from achieving certification as an EMT or paramedic should the individual choose this option.

A nurse who holds certification as an EMT or paramedic is not limited to the performance of acts as an EMT or paramedic. A registered nurse who is certified as an EMT or paramedic is held accountable and responsible for actions as a nurse.

Utilization, Role, and Scope of Licensed Practical Nurses

The Kentucky Board of Nursing recognizes the participation of licensed practical nurses in the emergency medical service system. It is the opinion of the Board that the curricula of prelicensure practical nurse education programs do not prepare the licensed practical nurse for practice outside a traditional healthcare facility; therefore, a licensed practical nurse who provides care in the prehospital emergency care environment should hold certification as an EMT or paramedic and, subsequently, provide care as authorized for the EMT or paramedic. Kentucky Administrative Regulations governing staffing of basic and advanced life support

ambulance services do not include licensed practical nurses as prehospital ambulance service personnel.

Summary

The Kentucky Board of Nursing advises that registered nurses who provide prehospital emergency medical care should:

(1) Possess:

a) In-depth, specialized knowledge and competent technical skill in the performance of a basic and advanced life-support procedure, and in the implementation of medical guidelines/protocol for emergency medical services;
b) Appropriate knowledge and technical skill to provide care to seriously ill and injured adults and children with potential life and/or limb threatening conditions; and
c) Appropriate knowledge and skill including, but not limited to, extrication techniques, patient stabilization and scene control.

(2) Possess knowledge of the role and skills of emergency medical technicians, paramedics, and other personnel who provide services in the prehospital emergency care environment.

(3) Perform acts, which are in accordance with:

a) Established written agency/ambulance provider policy and procedure;
b) The definition of registered nursing practice as stated in KRS 314.011(6); and
c) Statutes and administrative regulation pertaining to the emergency medical services delivery system;

(4) Maintain documentation of educational preparation and demonstrated competence in the performance of prehospital care.

When a registered nurse is employed by an EMS service under the clinical direction of a medical director and the medical director's responsibilities include assuring clinical competency of staff, then the registered nurse would provide evidence of educational and experiential preparation and current clinical competency as required.

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.

Applicable Statutes From the *Kentucky Nursing Laws*[2]

KRS 314.021(2) states that:

> 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.

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.
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> 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:
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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.
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> 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.

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[2]A copy of the *Kentucky Nursing Laws* and Kentucky Administrative Regulations may be obtained at the KBN website, http://www.kbn.ky.gov.

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 314.091(1)(d) and (e) states:

> The board shall have power to deny, limit, revoke, probate or suspend any license to practice nursing issued by the board or applied for in accordance with this chapter, or to otherwise discipline a licensee, or to deny admission to the licensure examination, or to require evidence of evaluation and therapy upon proof that the person: ... Has negligently or willfully acted in a manner inconsistent with the practice of nursing; Is unfit or incompetent to practice nursing by reason of negligence or other causes including but not limited to being unable to practice nursing with reasonable skill or safety.

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.

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