

## FAQ: Patient Abandonment by Nurses

KBN Advisory Opinion Statement #24 Patient Abandonment by Nurses  
<https://kbn.ky.gov/practice/Documents/aos24.pdf>

A nurse who does not feel they are adequately prepared to care for patients with suspected or diagnosed COVID-19 or identifies they are considered in the “at-risk” group, the Advisory Opinion Statement #24 Patient Abandonment by Nurses provides clarification on what is a nurse’s professional and ethical obligation is to provide for patient safety.

- **Nurses have a professional and ethical obligation to provide for patient safety, avoid patient abandonment, and to withdrawal only when assured that, nursing care is available to the patient**
- While the terms “abandonment” and “patient abandonment” are not used in the Kentucky Nursing Laws (Kentucky Revised Statutes Chapter 314), the Board has authority to take disciplinary action in specific cases based on its interpretation of what constitutes professional misconduct.
- In Kentucky, a nurse whose behaviors are inconsistent with the safe practice of nursing may be charged with being in violation of KRS 314.091(1)(d) “...negligently or willfully acting in a manner inconsistent with the practice of nursing...” All complaints received by the Board alleging patient abandonment are evaluated on a case-by-case basis.
- **In general, abandonment occurs when a nurse voluntarily removes himself / herself from the care delivery setting without giving notice, and without making an effort to arrange for another qualified person to assume responsibility for patient care.** Patient abandonment endangers the health, safety, and welfare of patients entrusted to the nurses’ care. As a guide to nurses and employers, the Board advises that, in general, a nurse who has accepted responsibility for a patient assignment may leave the patient assignment only after:
  - Communicating the need to do so with the nurse’s supervisor; and
  - Exhausting all reasonable and prudent efforts to place the care of the patients in another nurse’s care.
  - These efforts should be documented contemporaneously to avoid ambiguity.
- **While it is difficult to specifically state when abandonment occurs, it is clear that abandonment does not occur when a nurse who cannot practice with reasonable skill and safety leaves an assignment after fulfilling the two obligations stated above.**
- As always, 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



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In regards to employers with staff who state they do not feel they are adequately prepared to care for patients with suspected or diagnosed COVID-19 or identify themselves as part of the “at-risk” group, the Advisory Opinion Statement #24 Patient Abandonment by Nurses notes:

- **There are employment issues that do not rise to the level of patient abandonment, and thus, are not within the jurisdiction of the Board to address. Examples of employer issues include, an employee “no call, no show” situation, an employee refusal to work “mandatory overtime” beyond the regularly scheduled number of hours, and employer resignation policies.**

Advisory opinion statements issued by the Kentucky Board of Nursing are guidelines to licensees who wish to engage in safe nursing practice. As such, an opinion statement is not a regulation of the board and does not have the force and effect of law.