

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

Per Kentucky Revised Statute - [KRS 314.011](#), the scopes of practice for the registered nurse (RN) and the license practical nurse (LPN) differ. The RN functions at an independent level while the LPN functions at a dependent level. This chart provides a snapshot comparison with web links to Kentucky statutes, regulations and advisory opinion statements (AOS).

| Nursing Practice Components | RN Scope of Practice <i>Independent Role</i> | LPN Scope of Practice <i>Dependent Role</i> | Examples and Additional Guidance | Related Statutes, Regulations and AOS |
|------------------------------|---|--|--|---|
| Accepting Assignments | Accepts assignment based on individual educational preparedness and experience and practices with skill and safety. | Accepts assignment dependent on practice setting variables including availability of RN supervision & individual competency. | LPNs function under direction as direct care providers in a variety of structured practice settings, such as nursing units, specialty units, and in respiratory, physical, and occupational therapy areas. LPNs may also function under direction in other areas, including, but not limited to administrative and management areas, and quality assurance and peer review programs. | AOS #19 Responsibility and Accountability of Nurses for Patient Care Assignments and Nursing Care Delivery |
| Assessment | <p>Responsible for incorporating in the initial, comprehensive, and ongoing assessment to determine nursing care needs:</p> <ul style="list-style-type: none"> ▪ Collects, verifies, analyzes, and interprets data in relation to health status <p>The RN has broad accountability for patient assessment for both actual and potential health problems.</p> | <p>Contributes to the initial, comprehensive, and ongoing assessment:</p> <ul style="list-style-type: none"> ▪ Collects data ▪ Recognizes relationship to health status and treatment ▪ Determines immediate need for intervention | <p>Q: Can a LPN perform a wound assessment and staging?</p> <p>A: Yes, wound staging criteria are well established in the literature. Wound assessment may be appropriately performed both by LPNs and RNs who have been trained to do so.</p> <p>Q: Can a LPN perform an assessment on a patient who has returned to the unit after a procedure?</p> <p>A: Yes, the LPN is able to collect data, observe appearance and behavior, and make observations of a patient's subjective and objective signs and symptoms.</p> <p>The distinction between LPN and RN assessment is that practice and documentation clearly indicates information gathered by the LPN is interpreted and validated by the RN and then is used to formulate a nursing diagnosis and develop a plan of care for the patient. The LPN is not solely responsible for assessment, independent of the RN.</p> | <p>KRS 314.011(10)</p> <p>AOS #27 Components of Licensed Practical Nursing Practice</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|---------------------------------|---|--|---|--|
| | | | <p>The LPN would rely on knowledge, training, and specific criteria to recognize and communicate status or changes in the condition that may require immediate attention by the RN or licensed independent practitioner (LIP).</p> <p>The collection of data should include:</p> <ul style="list-style-type: none"> • Observations of appearance and behavior • Measurements of physical structure and physiologic function; and • Observations of a patient’s subjective and objective signs and symptoms. <p>The interpretation of data should include:</p> <ul style="list-style-type: none"> • Recognizing existing relationships between data gathered and a patient’s health status, established plan of care, and medical treatment regimen; • Determining a patient’s need for nursing intervention based upon data gathered regarding the patient’s health status, ability to care for self, and established plan of care and treatment regimen; and • Appropriate consultation. | |
| <p>Nursing Diagnosis</p> | <p>Formulates nursing diagnoses</p> <p>Determines extent and frequency of assessment needed</p> | <p>Is not in the scope of the LPN practice to formulate a nursing diagnosis.</p> | <p>After completing an assessment, reviewing and interpreting data and information collected by other healthcare team members such as an LPN or unlicensed assistive personnel (UAP) the RN is able to formulate a nursing diagnosis.</p> <p>Example of the patient who returned from a procedure: Vital signs obtained by the UAP note BP 180/102, HR 98, O2 92% on RA, Temp 98.1. The LPN notes the patient is diaphoretic, in apparent discomfort and rates pain 8 on 10 scale, and auscultates bilateral crackles. The RN reviews the data, performs an independent assessment, and formulates a nursing diagnosis of decreased cardiac output. The RN is then able to determine if further assessment is needed and either the RN or LPN is able to</p> | <p>KRS 314.011(10)</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|-----------------------|---|---|--|---|
| | | | notify the LIP for further evaluation of the patient. | |
| Planning | <p>Establishes and maintains patient nursing plan of care:</p> <ul style="list-style-type: none"> ▪ Identifies patient's needs ▪ Prioritizes nursing diagnoses ▪ Determines nursing care goals and outcomes ▪ Determines interventions appropriate to patient | <p>Contributes to planning process:</p> <ul style="list-style-type: none"> ▪ Suggests goals and interventions to RN | <p>The LPN participates in planning by suggesting goals and interventions for the plan of care to the RN. The RN formulates a nursing diagnosis on the basis of assessment activities. The RN establishes and maintains the plan of care. The LPN participates in the ongoing development and modification of the plan of care.</p> <p>Example: The RN and LPN discuss and identify priority nursing interventions for the post-procedure patient and notify the LIP using SBAR report. Interventions and goals may include:</p> <ul style="list-style-type: none"> • Administer O2 therapy via nasal cannula to maintain O2 saturation >95%. • Administer morphine 4mg IVP x1 dose now to achieve a pain level <5 on 10 scale. • Administer nitroglycerin 0.4mg SL q5minutes, max 3 doses within 15 minutes. • Obtain an EKG to rule out STEMI or other cardiac events. • Obtain labs to identify and treat any electrolyte abnormalities or cardiac problems. | <p>KRS 314.011(10)</p> <p>AOS #14 Implementation of Patient Care Orders</p> |
| Implementation | <p>Implements nursing plan of care:</p> <ul style="list-style-type: none"> ▪ Directs LPN practice ▪ Procures resources ▪ Performs or assigns, and supervises other licensed nurses and UAP ▪ Delegates noncomplex nursing interventions to | <p>Contributes to the implementation of established nursing care plan with following limitations:</p> <ul style="list-style-type: none"> ▪ RN supervision required ▪ Directs, assigns, and supervises other LPNs and UAP ▪ <i>Supervision by LPN limited to assuring that tasks have been completed according to agency</i> | <p>LPNs have licensure authority to implement appropriate aspects of the nursing plan of care that has been developed by the RN. The LPN is responsible for ensuring that tasks are completed according to policy and procedure. A RN or APRN cannot delegate to a LPN that which is outside the LPN's scope of practice. A RN or a LPN may delegate a task to an unlicensed person.</p> <p>The degree of direction and/or supervision required for licensed practical nurse performance of any nursing activity is determined by variables which include, but are not limited to:</p> | <p>KRS 314.011(10)</p> <p>201 KAR 20:400 Delegation of nursing tasks</p> <p>201 KAR 20:490 Licensed practical nurse infusion therapy scope of practice</p> <p>AOS #14 Implementation of Patient Care Orders</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|--------------------------|---|---|--|--|
| | <p>other licensed nurses and UAP</p> <ul style="list-style-type: none"> ▪ Responsible for making sure delegated or assigned task are completed according to policy and procedure, whether these tasks are directly or indirectly assigned. | <p><i>policies and procedures</i></p> | <ul style="list-style-type: none"> • Educational preparation and clinical competence of the LPN • Stability of the patient’s clinical condition, which involves both the predictability and rate of change. • Complexity of the nursing task is determined by the task’s potential impairment to the patient’s well-being, and the degree to which a scientific body of knowledge is used to make clinical judgments when performing the task. • There may also be functions that a LPN may not be performed, including specific components of infusion therapy. <p>The LPN and RN both determine the patient has become unstable and the RN assumes primary care of the patient and delegates the following tasks to the LPN:</p> <ul style="list-style-type: none"> • Administer medications as ordered • Obtain labs via venipuncture • Titrate oxygen therapy via nasal cannula to maintain O2 saturation > 95%. | <p>AOS #27 Components of Licensed Practical Nursing Practice</p> <p>AOS #41 RN/LPN Scope of Practice</p> |
| <p>Evaluation</p> | <p>Evaluates and determines effectiveness of nursing interventions and achievement of expected outcomes</p> <ul style="list-style-type: none"> ▪ Modifies plan of care as needed | <p>Contributes in evaluation by:</p> <ul style="list-style-type: none"> ▪ Identifies patient’s response to nursing intervention and suggests to RN revision to plan of care | <p>Evaluation consists of participation with the RN in determining the extent to which desired outcomes of nursing care are being met, and then subsequently planning for continued care. Components of evaluation by the LPN should include:</p> <ul style="list-style-type: none"> • Collecting evaluative data from relevant sources according to written guidelines, policies and forms; • Recognizing the effectiveness of nursing actions; and • Proposing modifications to be a plan/strategy of care for review by the RN or other person(s) authorized by law to prescribe such a plan. <p>Example: The LPN assesses vital signs and pain scale and notes the patient’s O2 is 92% on 3L via nasal</p> | <p>AOS #27 Components of Licensed Practical Nursing Practice</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|---------------------------------------|----------------------------|----------------------------|--|--|
| | | | <p>cannula and increases to 5L. The patient continues to rate pain 8 on 10 scale, but no longer is diaphoretic. Both the LPN, RN, and APRN have reviewed the EKG and ruled out a STEMI or acute cardiac concerns. The LPN assists the RN with ongoing evaluation and revision to plan of care.</p> | |
| <p>Reporting and Recording</p> | <p>Reports and Records</p> | <p>Reports and Records</p> | <p>The communications required to document on essential records all aspects of nursing care for which the nurse is responsible.</p> <ul style="list-style-type: none"> • Reporting and recording of significant information should include: • Directing communication to the appropriate person(s) consistent with established policies, procedures, practices, and channels of communication; • Communicating within a timely manner which is consistent with the patient’s need for care; • Evaluating responses to information reported; and • Determining whether further communication is indicated. <p>Documentation on the appropriate patient record, plan of care, or other essential records should:</p> <ul style="list-style-type: none"> • Be pertinent to the patient’s health care including patient’s response to care provided; • Accurately describe all aspects of nursing care provided; • Be completed within a timely manner consistent with the patient’s need for care; • Reflect the communication of significant information to other persons; and • Verify proper administration and security of medications. <p>Example: The LPN documents patient pain assessment and re-evaluation, medication administered, and increase of O2 therapy. The</p> | <p>AOS #27 Components of Licensed Practical Nursing Practice</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|--------------------------------|---|--|--|--|
| | | | <p>LPN discusses the patient status with the RN The LPN notifies the APRN using SBAR report to update them on the patient status and repeats and verifies any new orders.</p> | |
| Collaborating | <p>Communicates & works with those whose services may affect patient's health care</p> <p>Initiates collaboration through coordinating, planning, and implementing nursing care of patient within the multidisciplinary team</p> <p>Participates in multidisciplinary decision-making</p> <p>Seeks & utilizes appropriate resources</p> | <p>Contributes through collaboration with the healthcare team as assigned</p> <ul style="list-style-type: none"> • Identifies patient response to interventions and suggests revisions in plan of care | <p>The LPN participates in collaborative activities. Collaboration is defined as coordinating, planning, and implementing nursing care; participation in the interdisciplinary decision-making, and seeking and utilizing appropriate resources.</p> <p>The LPN's scope of practice in collaborating in patient care should include:</p> <ul style="list-style-type: none"> • Participating in planning and implementing nursing or multidisciplinary approaches for the patient's care; • Seeking and utilizing appropriate resources in the referral process; and • Safeguarding confidentiality of patient information and records. <p>Example: The LPN discusses the conversation with the APRN with the RN and they collaborate to revise the plan of care, incorporating the new order. The LPN inputs a NPO diet order and notifies dietary of the change. The LPN discusses vital sign assessment with the UAP and orders for bedrest with x1 assist to the bathroom.</p> | <p>KRS 314.011(10)</p> <p>201 KAR 20:400 Delegation of nursing tasks</p> <p>AOS #14 Implementation of Patient Care Orders</p> <p>AOS #27 Components of Licensed Practical Nursing Practice</p> |
| Teaching and Counseling | <p>Responsibilities include to teach and counsel patients, families, groups and nursing care providers:</p> <ul style="list-style-type: none"> ▪ Identifies learning needs and possible learning barriers ▪ Develops and evaluates teaching plans <p>Makes referrals to appropriate resources</p> | <p>Contributes in teaching and counseling of patients and families as assigned through the implementation of an established teaching plan or protocol</p> | <p>Involves those educational activities for patients based upon established written guidelines as delineated in a plan of care, and should include:</p> <p>Providing accurate and consistent information, demonstrations and guidance to patients, their families or significant others, regarding the patient's health status and health care according to a structured written teaching plan or guidelines for the purpose of:</p> <ul style="list-style-type: none"> • Increasing patient's knowledge; | <p>KRS 314.011(10)</p> <p>AOS #27 Components of Licensed Practical Nursing Practice</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|------------------------------|--|--|--|---|
| | | | <ul style="list-style-type: none"> Assisting the patient to reach an optimum level of health functioning and participation in self-care; Promoting the patient's ability to make informed decisions; and Reinforcing the educational activities of other members of the health care team. <p>The LPN may participate in teaching and counseling through implementation of an established teaching plan or protocol. With appropriate training and competency assessment, an LPN may be assigned to complete patient education and training for easily scripted education components of a larger, comprehensive plan of care developed by the RN or LIP for a patient or group of patients. The LPN is not responsible for developing a teaching plan, rather, assists in reinforcing the education.</p> <p>Example: The LPN may provide patient education regarding medications, labs obtained, oxygen therapy, and reinforces plan of care and education as necessary. The RN may provide education regarding nursing and medical diagnoses, overall plan of care.</p> | |
| Managing Nursing Care | <p>Maintains continuous availability</p> <p>Assesses capabilities of personnel</p> <p>Delegates and assigns personnel</p> <p>Accountable for delegated and assigned nursing care</p> | <p>May delegate nursing tasks to a UAP.</p> <p>NOTE: See limited supervisory role for LPN in the Administering Nursing Administration Services Section below.</p> <p>Roles and assignments are dependent upon the availability of a RN and/or licensed independent practitioner (LIP) for direction and supervision</p> | <p>Licensed practical nurses may function under direction as direct care providers in a variety of structured practice settings, such as nursing units, specialty units, and respiratory, physical, and occupational therapy areas.</p> <p>"Supervision" means the provision of guidance by a registered nurse, advanced practice registered nurse, physician assistant, licensed physician, or dentist for the accomplishment of a nursing task with periodic observation and evaluation of the performance of the task including validation that the nursing task has been performed in a safe manner</p> <p>Supervision is provided in accordance with established policies, procedures, practices, and</p> | <p>KRS 314.011(10)</p> <p>201 KAR 20:400 Delegation of nursing tasks</p> <p>AOS #27 Components of Licensed Practical Nursing Practice</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|---|--|---|---|--|
| | | | <p>channels of communication which are consistent with the laws governing nursing practice. "Supervision" for the purpose of this statement means the provision of guidance by a qualified nurse for the accomplishment of a nursing task with periodic observation and evaluation of the performance of the task including validation that the task has been performed according to the established standards of practice.</p> <p>A RN or a LPN may delegate a task to an unlicensed person. The nurse shall provide supervision of a delegated nursing task. The degree of supervision required shall be determined by the delegator after an evaluation of appropriate factors involved including the following:</p> <ul style="list-style-type: none"> • The stability and acuity of the patient's condition; • The training and competency of the delegatee; • The complexity of the nursing task being delegated; and • The proximity and availability of the delegator to the delegatee when the nursing task is performed. <p>Example: The LPN delegates assisting a stable patient to the bathroom after determining the individual to whom they are delegating is competent to perform the task and identifies parameters for task completion, reporting, timeline for completing the task.</p> | |
| <p>Administering Nursing Administration Services</p> | <p>Administers nursing services</p> <p>May function in an administrative role.</p> | <p>May function in an administrative role but CANNOT administer nursing services.</p> | <p>Licensed practical nurses may function under direction in other areas, including but not limited to administrative and management areas, and quality assurance and peer review programs.</p> <p>It is not within a LPN's scope of practice for a LPN to supervise the practice of a RN. However, a LPN may serve in an administrative supervisory role over a RN as long as that role does not require the supervision or direction</p> | <p>KRS 314.011(10)</p> <p>AOS #27</p> <p>Components of Licensed Practical Nursing Practice</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|--|--|--|--|--|
| | | | <p>of patient care by the RN and deals solely with employment conditions. Employment conditions may include, but are not limited to, time and attendance issues, disciplinary issues, and termination.</p> <p>If the role requires the LPN to make clinical judgments and directions based on patient status, acuity, and care to the RN then this is not within the scope of practice for the LPN to be in an administrative supervisory role over a RN. Although this role does not include direct patient care, this can affect patient outcomes, and it is not within the LPN's scope of practice in Kentucky.</p> <p>Example: The LPN works in a role as an Assistant Director of Nursing, with responsibilities of time and attendance, data collection, and quality measures. The Director of Nursing is a RN and oversees nursing and UAP staff to evaluate clinical practice and competency.</p> | |
| <p>Accepting Responsibility</p> | <p>Accepts responsibility for self</p> | <p>Accepts responsibility for self</p> | <p>Nurses are individually responsible and accountable for individual 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.</p> <p>Each nurse is required to obtain the educational preparation and current clinical competency to perform acts within a safe and effective manner. The nurse should have documented educational preparation, supervised clinical practice experience, and ongoing competency validation appropriate to responsibilities, treatment provided, and the patient/population served. The Kentucky Board of Nursing does not specify how that training is acquired or how much training is required; that determination is at the sole discretion of the employer.</p> | <p>KRS 314.011(10)</p> <p>KRS 314.021 Policy</p> <p>201 KAR 20:490 Licensed practical nurse infusion therapy scope of practice</p> <p>AOS #14 Implementation of Patient Care Orders</p> <p>AOS #27 Components of Licensed Practical Nursing Practice</p> <p>AOS #41 RN/LPN Scope of Practice</p> |

Kentucky Board of Nursing RN/LPN Scope of Practice Comparison Chart

| | | | | |
|--|--|--|---|--|
| | | | <p>After determining if a task is within a nurse's scope of practice, if there are any statutory or facility restrictions on practice, or if the performance of the act is within the accepted "standard of care" a nurse must be prepared to accept accountability for the activity or intervention and for the outcome. It is the responsibility of the nurse to review and understand state Nurse Practice Acts - including statutes, regulations, and advisory opinions, in addition to organization/facility policies and procedures.</p> <p>Example: An LPN who has not reviewed the Kentucky Nurse Practice Act and advisory opinions believes that all states have a similar scope of practice for LPNs and believe they can administer a new investigational medication via an intrathecal line. This is not within the scope of practice for a LPN in Kentucky, and the LPN who does practices outside their scope is held accountable for their decisions and actions.</p> | |
|--|--|--|---|--|

References:

KRS 314.011 Definitions for chapter.

KRS 314.021 Policy.

201 KAR 20:400. Delegation of nursing tasks.

AOS #15 Supervision and Delegation of Nursing Acts to Unlicensed Personnel

AOS #19 Responsibility and Accountability of Nurses for Patient Care Assignments and Nursing Care Delivery

AOS #27 Components of Licensed Practical Nursing Practice

AOS #41 RN/LPN Scope of Practice Determination Guidelines