Identify or describe the activity or intervention being performed.

Do the Kentucky Nurse Practice Act, Kentucky Administrative Regulations, Kentucky Board of Nursing Advisory Opinion Statements, or any other applicable Kentucky laws support the activity or intervention? NO STOP

Is performing the activity or intervention consistent with evidence-based nursing and health care literature? NO STOP

Are there facility/organization policies that support the activity or intervention? NO STOP

Do you have the necessary education and clinical competence to perform the activity or intervention? NO STOP

Do you have documented evidence of your current education and clinical competence (knowledge, skills, abilities, and judgments) to perform the activity or intervention? NO STOP

Is the performance of the act within the accepted “standard of care” which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience? NO STOP

Are you prepared to accept accountability for the activity or intervention and for the related outcome? NO STOP

The nurse may perform the activity or intervention to acceptable and prevailing standards of safe nursing care. (KRS 314.021 Policy) YES