SUMMARY REPORT OF KENTUCKY BOARD OF NURSING ADVISORY OPINIONS ON NURSING PRACTICE ISSUES

July 1, 2018 – June 30, 2019

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1. AOS #6 The Performance of Arterial Puncture by Registered Nurses – 10/2018
2. AOS #7 Roles of Nurses in Stapling, Suturing, and the Application of Topical Adhesives - 10/2018
3. AOS #36 Resuscitation Orders, Pronouncement of Death and Death Certificate - 10/2018
4. Scope of Practice of Nurses in the Performance of Bowel and Bladder Program Care – 10/2018
5. AOS #18 Employment of Nursing Students as Nursing Personnel Using Either an Academic or a “Nurse Extern” Service Model – 12/2018
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7. AOS #19 Responsibility and Accountability of Nurses for Patient Care Assignments and Nursing Care Delivery – 12/2018
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Advisory Opinion Statements – New

None

Advisory Opinion Statements – Re-published

None

Advisory Opinion Statements – Revised

- AOS #6 The Performance of Arterial Puncture by Registered Nurses – 10/2018
• AOS #7 Roles of Nurses in Stapling, Suturing, and the Application of Topical Adhesives - 10/2018
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Advisory Opinion Statements – Editorial Revisions

• AOS #25 Insertion of Central Lines by Nurses – 2/2019
• AOS #37 Role of the Advanced Practice Registered Nurse in the Prescribing of Medications to Self and/or Family – 6/2019

Advisory Opinion Statements – Withdrawn

None

Task Forces/Work Groups Established

None

Task Forces/Work Groups

None

Statutes/Regulations – Revised

• 201 KAR 20:057 Scope and Standards of Practice of Advanced Practice Registered Nurses (Effective 12-7-2018)
• 201 KAR 20:065 Professional Standards for Prescribing Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone by APRNs for Medication Assisted Treatment for Opioid Use Disorder (Effective 5-3-2019)
• 201 KAR 20:411 Sexual Assault Nurse Examiner Program Standards and Credential Requirements (Effective 3-13-2019)
• 201 KAR 20:490 Licensed Practical Nurse Infusion Therapy Scope of Practice (Effective 11-2-2018)

Statutes/Regulations – New

None
The Kentucky Board of Nursing is authorized by Kentucky Revised Statutes (KRS) Chapter 314 to regulate nurses, nursing education and practice, promulgate regulations 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, and to facilitate the delivery of safe, effective nursing care to the public.

Mission of the Kentucky Board of Nursing

The primary mission and purpose of the Board is to enforce public policy related to the safe and effective practice of nursing in the interest of public welfare. As a regulatory agency of state government, the Board of Nursing accomplishes this mission as authorized by Kentucky Revised Statutes (KRS) Chapter 314 - The KENTUCKY NURSING LAWS and attendant administrative regulations. In accomplishing one aspect of the mission, the Board of Nursing issues advisory opinions on what constitutes the legal scope of nursing practice.

An opinion is not a regulation of the Board; it does not have the force and effect of law. Rather, an opinion is issued as a guidepost to licensees who wish to engage in safe nursing practice.

To date, the Board has published forty (41) (38 are currently active) advisory opinion statements, as listed on the “Kentucky Board of Nursing Publications” form and on the Board’s website at http://kbn.ky.gov.

Advisory opinion statements are developed and published when:

1. Multiple inquiries are received regarding a specific nursing procedure or act;
2. The Practice Committee or APRN Council determines that a specific nursing procedure or act has general applicability to nursing practice and warrants the development of an opinion statement; or
3. The Board directs that an opinion statement be developed.

When studying issues, the Board reviews and considers applicable standards of practice statements published by professional nursing organizations; the educational preparation of both registered and licensed practical nurses as provided in the prelicensure nursing education programs in the Commonwealth; and, when applicable, the organized post-basic educational programs for advanced registered nurse practitioners. The Board also gathers information regarding practice issues from nurses in relevant practice settings (including staff nurses, supervisors, nurse faculty members, etc.) and/or representatives from state nursing associations in the Commonwealth, among others. Further, the Board reviews applicable opinions issued by the Office of the Attorney General.
**Accountability and Responsibility of Nurses**

In accordance with KRS 314.021(2), nurses are responsible and accountable for making decisions that are based upon the individuals' educational preparation and current clinical competence in nursing, and requires licensees to practice nursing with reasonable skill and safety.

Acts that 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 experience to perform those acts safely and competently. A nurse/licensee who doubts his/her personal competency to perform a requested act has an affirmative obligation to refuse to perform the act, and to inform his/her supervisor and the physician prescribing the act, if applicable, of his/her decision not to perform the act.

If a licensee accepts an assignment that the licensee believes is unsafe or for which the licensee is not educationally prepared, then the licensee also assumes the potential liability, which may occur as a result of the assignment. Others may equally or concurrently be responsible, accountable, and liable for a licensee's actions.

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

**Practice Opinions**

In addition to the 38 active advisory opinions published as of June 30, 2019, the Board has issued from July 1, 2018 to June 30, 2019, individual practice opinions in response to inquiries on specific nursing practice situations, summarized as follows:

1. **Scope of Practice of Nurses in the Performance of Bowel and Bladder Program Care**

   October 2018 – it was the advisory opinion of the Board that:

   IT IS WITHIN THE SCOPE OF PRACTICE FOR THE LPN, RN, OR APRN, WHO IS EDUCATIONALLY PREPARED AND CLINICALLY COMPETENT, TO PERFORM BOWEL AND BLADDER PROGRAM CARE INCLUDING INTERMITTENT URINARY CATHETERIZATION AND DIGITAL RECTAL STIMULATION. THESE ACTS ARE CONSIDERED TO BE NURSING TASKS.
   
   • AN RN OR APRN MAY DELEGATE THESE TASKS TO UNLICENSED PERSONNEL WHO ARE TRAINED AND COMPETENT TO PERFORM THE TASKS UNDER AN ESTABLISHED PLAN OF CARE DEVELOPED AFTER AN ASSESSMENT OF THE PATIENT BY AN RN, APRN, OR PHYSICIAN.
   
   • UNDER KRS 205.900(3), 910 KAR 1:090, AND AOS #15, THESE TASKS ARE NOT CONSIDERED TO BE THE PRACTICE OF NURSING WHEN THE PERFORMANCE IS DIRECTED BY THE CLIENT, THE CLIENT'S FAMILY, THE CLIENT’S LEGAL GUARDIAN, OR THE CLIENT/CLIENT FAMILY/LEGAL GUARDIAN’S DELEGATE.
   
   • AN RN OR APRN, WHO IS EDUCATIONALLY PREPARED AND CLINICALLY COMPETENT IN THE PERFORMANCE OF BOWEL AND BLADDER PROGRAM TASKS, MAY TRAIN UNLICENSED INDIVIDUALS IN
THE PERFORMANCE OF BOWEL AND BLADDER PROGRAM RELATED TASKS.

- IT IS NOT WITHIN THE SCOPE OF PRACTICE FOR AN LPN TO TRAIN UNLICENSED INDIVIDUALS IN THE PERFORMANCE OF BOWEL AND BLADDER PROGRAM RELATED TASKS.

2. Role of Nurses in Paracentesis Procedures

   February 2019 – it was the advisory opinion of the Board that:

   - THE LICENSED PRACTICAL NURSE PROVIDES ASSISTANCE TO THE PHYSICIAN, PHYSICIAN ASSISTANT, OR APRN DURING PARACENTESIS. IT IS NOT WITHIN THE SCOPE OF PRACTICE OF THE LPN TO MONITOR A PATIENT NOR TO ADJUST, OR REMOVE A PARACENTESIS CATHETER.
   - IT IS WITHIN THE SCOPE OF PRACTICE OF A REGISTERED NURSE WHO IS EDUCATIONALLY PREPARED AND CLINICALLY COMPETENT TO ASSIST THE PHYSICIAN, PHYSICIAN ASSISTANT, OR APRN IN THE PERFORMANCE OF A PARACENTESIS PROCEDURE, AND TO MONITOR THE PATIENT ONCE THE CATHETER HAS BEEN INSERTED BY A PHYSICIAN, PHYSICIAN ASSISTANT, OR APRN AND TO REMOVE THE CATHETER.
   - IT IS NOT WITHIN THE SCOPE OF PRACTICE OF A REGISTERED NURSE TO ADJUST THE PARACENTESIS CATHETER.
   - IT IS WITHIN THE SCOPE OF PRACTICE FOR AN ADVANCED PRACTICE REGISTERED NURSE, WHO IS EDUCATIONALLY PREPARED AND CLINICALLY COMPETENT, TO PERFORM ULTRASOUND-GUIDED PARACENTESIS PROCEDURES.

3. Hormone Pellet Insertion by Registered Nurses

   June 2019 – it was the advisory opinion of the Board that:

   - IT IS NOT WITHIN THE SCOPE OF PRACTICE OF A REGISTERED NURSE TO INSERT HORMONE PELLETS INTO THE SUBCUTANEOUS TISSUE UNDER THE SUPERVISION OF A DOCTOR.

   THE BOARD REAFFIRMED ITS OPINION ISSUED IN JUNE 2017:

   - THE PERFORMANCE OF THE SUBCUTANEOUS ADMINISTRATION/INSERTION OF HORMONE REPLACEMENT THERAPY WITH PELLET IMPLANTS IS WITHIN THE SCOPE OF ADVANCED PRACTICE REGISTERED NURSING PRACTICE FOR THE APRN WHO IS EDUCATIONALLY PREPARED AND CLINICALLY COMPETENT IN THE PERFORMANCE OF THE PROCEDURE.

4. Role of Nurses in Thoracentesis Procedures

   June 2019 – it was the advisory opinion of the Board that:

   - IT IS WITHIN THE SCOPE OF PRACTICE OF A REGISTERED NURSE WHO IS EDUCATIONALLY PREPARED AND CLINICALLY COMPETENT TO
REMOVE A THORACENTESIS CATHETER AFTER IT HAS BEEN INSERTED. THE PHYSICIAN, PHYSICIAN ASSISTANT, OR APRN MUST REMAIN ONSITE DURING MONITORING AND REMOVAL OF THE Thoracentesis catheter by the REGISTERED NURSE.

- IT IS WITHIN THE SCOPE OF PRACTICE OF AN APRN WHO IS EDUCATIONALLY PREPARED AND CLINICALLY COMPETENT TO PERFORM THORACENTESIS PROCEDURES.

All advisory opinion statements may be downloaded from the KBN website http://kbn.ky.gov.

Prepared by: Pamela C. Hagan, MSN, RN, Acting Executive Director
Myra Goldman, APRN, APRN Education and Practice Consultant
Michelle Gary, Practice Assistant

Determining 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 issued Advisory Opinion Statement #41 RN/LPN Scope of Practice Determination Guidelines which contains the KBN Decision-Making Model for Determining Scope of Practice for RNs/LPNs and published the APRN Scope of Practice Decision Making Model providing guidance to nurses in determining whether a selected act is within an individual nurse’s scope of practice now or in the future. Copies of Advisory Opinion Statement #41 RN/LPN Scope of Practice Determination Guidelines and the APRN Scope of Practice Decision Making Model may be downloaded from the Board’s website http://kbn.ky.gov.

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:

a) The care, counsel, and health teaching of the ill, injured or infirm;
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 Scope and 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; and
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, advanced practice registered nurse, physician assistant, 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; and
  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 314.011(8) defines "advanced practice registered nursing practice" as:

"Advanced practice registered nursing" means the performance of additional acts by registered nurses who have gained advanced clinical knowledge and skills through an accredited education program that prepares the registered nurse for one (1) of the four (4) APRN roles; who are certified by the American Nurses' Association or other nationally established organizations or agencies recognized by the board to certify registered nurses for advanced practice registered nursing as a certified nurse practitioner, certified registered nurse anesthetist, certified nurse midwife, or clinical nurse specialist; and who certified in at least one (1) population focus. The additional acts shall, subject to approval of the board, include but not be limited to prescribing treatment, drugs, devices, and ordering diagnostic tests. Advanced practice registered nurses who engage in these additional acts shall be authorized to issue prescriptions for and dispense nonscheduled legend drugs as defined in KRS 217.905 and to issue prescriptions for but not to dispense Schedules II through V controlled substances as classified in KRS 218A.020, 218A.060, 218A.080, 218A.100, and 218A.120, and under the conditions set forth in KRS 314.042 and regulations promulgated by the Kentucky Board of Nursing on or before August 15, 2006. ...The performance of these additional acts shall be consistent with the certifying organization or agencies' scopes and standards of practice recognized by the board by administrative regulation.