INDEX to Actions taken by the Board:

1. AOS #14 Implementation of Patient Care Orders -10/2019
2. AOS #15 Roles of Nurses in the Supervision and Delegation of Nursing Tasks to Unlicensed Personnel – 10/2019
3. AOS #17 Administration of “PRN” Medication and Placebos – 10/2019
4. AOS #36 Resuscitation Orders, Pronouncement of Death, and Death Certificates – 10/2019
5. AOS #39 Scope of Registered Nurses in the Deactivation of Implanted Cardioverter Defibrillators (ICDs) and Ventricular Assist Devices (VADs) – 10/2019
7. KBN Policy – Advanced Practice Registered Nurses (APRNs) – Cannabidol or CBD Oil - 10/2019
8. AOS #42 Telehealth and Nursing – 12/2019
11. AOS #1 Role of the RN/LPN in Spinal Screening for Detection of Common Abnormal/Curvatures of the Spine – 2/2020
12. AOS #30 School Nursing Practice – 2/2020
13. AOS #8 Nurses Practicing in the Perioperative Setting – 2/2020

Advisory Opinion Statements – New

- AOS #42 Telehealth and Nursing – 12/2019

Advisory Opinion Statements – Re-published

None

Advisory Opinion Statements – Revised

- AOS #14 Implementation of Patient Care Orders -10-2019
- AOS #15 Roles of Nurses in the Supervision and Delegation of Nursing Tasks to Unlicensed Personnel – 10/2019
- AOS #17 Administration of “PRN” Medication and Placebos – 10/2019
- AOS #36 Resuscitation Orders, Pronouncement of Death, and Death Certificates – 10/2019
- AOS #39 Scope of Registered Nurses in the Deactivation of Implanted Cardioverter Defibrillators (ICDs) and Ventricular Assist Devices (VADs) – 10/2019
- AOS #30 School Nursing Practice – 2/2020
- AOS #8 Nurses Practicing in the Perioperative Setting – 2/2020
Advisory Opinion Statements – Editorial Revisions

None

Advisory Opinion Statements – Withdrawn

- AOS #1 Role of the RN/LPN in Spinal Screening for the Detection of Common Abnormal/Curvatures of the Spine – 2/2020

Task Forces/Work Groups/Advisory Councils


- Certified Professional Midwives Transfer Guidelines Workgroup (KRS 314.414 effective June 27, 2019)

Statutes/Regulations – Revised

None

Statutes/Regulations – New

None

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 (42) (38 are currently active) advisory opinion statements, as listed on the “Kentucky Board of Nursing Publications” form and on the Board’s website at
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, 2020, the Board has issued from July 1, 2019 to June 30, 2020, individual practice opinions in response to inquiries on specific nursing practice situations, summarized as follows:

1. **Scope of Practice of Registered Nurses in the Deactivation of Implanted Cardioverters and Ventricular Assist Devices.**

October 2019 – it was the advisory opinion of the Board that:
It is within the scope of practice of a registered nurse (RN) who is educationally prepared and clinically competent, to deactivate an implanted cardioverter defibrillator (ICD) or a ventricular assist device (VAD), as ordered by a physician for a patient at end of life, hospice, or palliative care or for a patient who has expired.

AOS #39 Scope of Registered Nurses in the Deactivation of Implanted Cardioverter Defibrillators (ICDs) and Ventricular Assist Devices (VADs) was revised.

2. Scope of Practice of the APRN CRNA in the Independent Practice of Cosmetic and Dermatologic Procedures

October 2019 – The Board reaffirmed its April 2018 advisory opinion with editorial changes to provide clarity that:

The independent practice of ordering medications and performing cosmetic and dermatologic procedures is not within the scope of practice of an APRN certified as a Certified Registered Nurse Anesthetist (CRNA).

The performance of cosmetic and dermatologic procedures may be within the scope of practice of the APRN who utilizes the registered nurse license and is educationally prepared and clinically competent to perform cosmetic and dermatologic procedures under the orders of an authorized prescriber.

All APRNs should utilize the KBN guidelines for determination of APRN scope of practice and KBN scope of practice decision-making model for APRNs, when determining if a particular procedure is within the APRN’s individual scope of practice.

3. Scope of Practice of Registered Nurses in the Removal of a Laryngeal Mask Airway (LMA)

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

It is not within the scope of practice of a licensed practical nurse (LPN) to remove a laryngeal mask airway (LMA).

It is within the scope of practice of a registered nurse (RN), who is educationally prepared and clinically competent to remove a laryngeal mask airway (LMA) after general anesthesia has been provided:

1) Written facility policies and procedures are in place that address removal of the LMA by an RN and the availability of appropriate provider assistance;

2) The RN has documented didactic and clinical training as well as demonstrated competency in the performance of LMA removal; and

3) An appropriate provider is readily available to reinsert the LMA and/or reintubate the patient, if necessary.
4. Role of Nurses in the Removal of Chest Tubes

February 2020 – it was the advisory opinion of the Board that:

It is not within the scope of practice of a licensed practical nurse (LPN) to remove a chest tube.

It is within the scope of practice of a registered nurse (RN), who is educationally prepared and clinically competent, to remove chest tubes in accordance with an order of a physician or other qualified provider, who is immediately available, and in accordance with a facility’s policies and procedures.

Policy Statements

The Board adopted the following policy statements between July 1, 2019 and June 30, 2020.

1. The use or recommendation of Cannabidiol or CBD Oil by APRNs

October 2019 – it is the policy of the Board that:

The Board of Nursing gives no guidance regarding the use or recommendation for use of Cannabidiol or CBD oil by APRNs and refers all practitioners to KRS 314.021(2) which states that all licensees are responsible and accountable for making decisions that are based on the individual’s educational preparation and experience in nursing and must practice with reasonable skill and safety. Decisions should rely on evidence-based practice.

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

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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.