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Advisory Opinion Statements – Revised

- AOS #3 entitled, “Roles of Nurses in Intravenous Therapy Practice:
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- AOS #18 entitled, “Employment of Nursing Students as Nursing Personnel Using Either an Academic or a ‘Nurse Extern’ Service Model”

Advisory Opinion Statements - New

- AOS #35 entitled, “Cosmetic and Dermatological Procedures by Nurses”
- AOS #36 entitled, “Role of Nurses in Resuscitation”

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.

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 registered nurse practitioner and as further 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. 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;

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, KBN 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, KBN issues advisory opinions on what constitutes the legal scope of nursing practice.
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.

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, a 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 registered nurse practitioner 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.

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 314.021(2) states: All individuals licensed under provisions of this chapter shall be responsible and accountable for making decisions that are based upon the individuals' educational preparation and experience in nursing and shall practice nursing with reasonable skill and safety.

KRS 314.021(2) imposes individual responsibility upon a nurse to undertake the performance of acts for which the nurse is educationally prepared and clinically competent to perform in a safe, effective manner. This section holds nurses individually responsible and accountable for rendering safe, effective nursing care to clients and for judgments exercised and actions taken in the course of providing care.

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.

The Board has published “Scope of Practice Determination Guidelines” as a decision making model for an individual licensee to use in determining whether the performance of a specific act is within the scope of practice for which the individual is educationally prepared, clinically competent and licensed to perform. Individuals are
encouraged to utilize the “Guidelines” in making decisions as to whether he/she should or should not perform a particular act. A copy may be obtained from the KBN office, or from the KBN website at http://kbn.ky.gov.

The responsibilities which any nurse can safely accept are determined by the variables in each nursing practice setting. These variables include:

1. The nurse’s own qualifications including:
   a. basic prelicensure educational preparation;
   b. knowledge and skills subsequently acquired through continuing education and practice; and
   c. current clinical competence.
2. The "standard of care" which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience.
3. The complexity and frequency of nursing care needed by a given client population.
4. The proximity of clients to personnel.
5. The qualifications and number of staff.
6. The accessible resources.
7. The established policies, procedures, standards of practice, and channels of communication which lend support to the types of nursing services offered.

To date, the Board has published 36 advisory opinion statements, as listed on the “Kentucky Board of Nursing Publications” form and on the KBN 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 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.

In addition to the 36 advisory opinion statements published as of June 30, 2008, KBN has issued from July 1, 2007 to June 30, 2008, individual advisory opinions in response to inquiries on specific nursing practice situations, summarized as follows:

1. **Role of ARNP in the Performance of Infant Circumcisions**
   October 2007 – It was the advisory opinion of the Board that it is within the scope of advanced registered nursing practice of the Certified Nurse Midwife, who is educationally prepared and clinically competent, to perform infant circumcisions.

2. **Administration of Insulin by Nurses in School Setting via Parent Communication**
   February 2008 – It was the advisory opinion of the Board that based upon KRS 314.011(c), the nurse must administer a medication as prescribed by a physician, physician assistant, dentist or advanced registered nurse practitioner. Medication dosages or changes in dosages written by the parent and presented to the school nurse for medication administration by the nurse must be verified by the prescribing practitioner.

3. **Delegation of Disconnection and Reconnecting of Oxygen to Unlicensed Assistive Personnel**
   February 2008 – It was the advisory opinion of the Board that utilizing 201 KAR 20:400 a nurse may delegate to educationally prepared and clinically competent unlicensed assistive personnel, the disconnection and reconnection of oxygen.
4. **Scope of RN Practice “Instillation of Methotrexate into an Ommaya Reservoir”**

February 2008 – It was the advisory opinion of the Board that 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. Acts which 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 skill proficiency to perform those acts in a safe, effective manner. Nursing practice should be consistent with the *Kentucky Nursing Laws*, established standards of practice, and be evidence based.

The instillation of Methotrexate into an Ommaya reservoir would be within the scope of practice for the registered nurse who educationally prepared and clinically competent to perform this act.

5. **Scope of RN Practice “Assist an Anesthesiologist/Physician or the Advanced Registered Nurse Practitioner in the Performance of a Regional Nerve Block”**

April 2008 - It was the advisory opinion of the Board to reaffirm a previous advisory opinion that it is within the scope of registered nursing practice to assist an anesthesiologist/physician or the advanced registered nurse practitioner (ARNP) designated nurse anesthetist in the performance of a regional nerve block. KRS 314.021(2) imposes individual responsibility upon nurses. Acts which 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 skill proficiency to perform those acts in a safe, effective manner. Nursing practice should be consistent with the *Kentucky Nursing Laws*, established standards of practice, and be evidence based.

6. **Scope of Licensed Practical Nursing Practice in the Performance of Urgent PC Neuromodulation**

June 2008 – It was the advisory opinion of the Board that it is within the scope of licensed practical nursing practice for the nurse who is educationally prepared and clinically competent to perform the Urgent PC Neuromodulation.

7. **Scope of Registered Nursing Practice in the Performance and Collection of Endocervical Swab Specimens for the Assessment of Sexually Transmitted Diseases**

June 2008 – It was the advisory opinion of the Board that it is within the scope of registered nursing practice for the nurse who is educationally prepared and clinically competent to perform and collect endocervical swab specimens for the assessment of sexually transmitted diseases.

8. **Scope of Nursing Practice in the Performance of Ear Stapling for the Treatment of Obesity**

June 2008 – It was the advisory opinion of the Board that Auriculotherapy is defined as the practice of acupuncture. The Board of Nursing does not regulate acupuncture.

9. **Scope of Registered Nursing Practice in the Performance of the Department of Transportation (DOT) Commercial Motor Vehicle Driver Physical Examination and Completion of the Medical Examiner’s Certificate**

June 2008 - It was the advisory opinion of the Board to reaffirm a previous advisory opinion that the physical examination and the examiner's medical certificate may be completed by a qualified advanced registered nurse practitioner. Components of the physical examination may be completed by a qualified registered nurse; however, the completion of the medical examiner's certificate is not within the scope of registered nursing practice.

All advisory opinion statements may be obtained from the KBN office or from the KBN website at [http://kbn.ky.gov](http://kbn.ky.gov).

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