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.

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;
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.

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 that 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 that may occur as a result of the assignment. Others may equally or concurrently be responsible, accountable, and liable for a licensee's actions.

In the performance of acts in a health care facility/agency, nurses should follow written approved policies and procedures of the facility/agency, which are consistent with the KENTUCKY NURSING LAWS.

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 Board office.

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 that lend support to the types of nursing services offered.

To date, the Board has published 31 advisory opinion statements, as listed on the “Kentucky Board of Nursing Publications” form and on the Board’s web site at www.kbn.state.ky.us. 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 31 advisory opinion statements published as of June 30, 2001, the Board has issued from July 1, 2000, to June 30, 2001, individual advisory opinions in response to inquiries on specific nursing practice situations, as summarized below:

**APPLICATION OF TOPICAL ADHESIVES FOR SUPERFICIAL WOUND CLOSURE (10/00)**
In October 2000, the Board approved a revision to the Advisory Opinion Statement (AOS) #84-07 advising, in summary, that the application of topical adhesives for superficial wound closure is within the scope of nursing practice for the nurse who is qualified to perform the procedure. Nurses should have valid medical authorization in order to apply topical adhesive agents.
THE PERFORMANCE OF BONE MARROW ASPIRATION AND BIOPSY BY REGISTERED NURSES (10/00)
In October 2000, the Board issued an advisory opinion as to whether it is within the scope of registered nursing practice for a registered nurse to perform bone marrow aspirations and biopsies. Following review of information provided describing the performance of these procedures and the statutes governing nursing practice, it is the advisory opinion that it is not within the scope of registered nursing practice for a registered nurse to perform these acts. This does not preclude the qualified advanced registered nurse practitioner from the performance of the acts.

TEACHING AND DELEGATING CARBOHYDRATE COUNTS AND THE ADMINISTRATION OF INSULIN VIA AN EXTERNAL PUMP IN A SCHOOL SETTING (10/00)
In October 2000, the Board considered whether “…a registered nurse is allowed to teach unlicensed personnel how to count carbohydrates to determine appropriate insulin dosages…and to operate an insulin pump to administer the dosage of insulin in a school or daycare setting.” Following review of the statutes and administrative regulations governing nursing practice, it was the advisory opinion of the Board that the performance of these acts require substantial specialized nursing knowledge and judgement and therefore it would not be appropriate for a nurse to teach or delegate these acts/tasks to an unlicensed person in a school or day care setting.

THE PERFORMANCE OF DERMABRASION AND MICRODERMABRASION BY REGISTERED NURSES (10/00)
In October 2000, the Board issued an advisory opinion as to whether it is within the scope of registered nursing practice for a registered nurse to perform dermabrasion and microdermabrasion. Following review of the statutes governing nursing practice and the information describing dermabrasion and microdermabrasion procedures, it was the advisory opinion of the Board that the performance of these procedures is not within the scope of registered nursing or licensed practical nursing practice.

CERUMEN REMOVAL BY NURSES (10/00)
In October 2000, the Board issued an advisory opinion that the removal of cerumen in a school setting is an act that falls within the scope of nursing practice for the nurse who is educationally prepared and clinically competent to perform the procedure. The policies and procedures of the school/employing facility should among other matters, address the circumstances in which the procedure is to be performed, provision for medical follow-up and provisions for parental consent.

THE ADMINISTRATION OF SUB-ANESTHETIC DOSAGES OF KETAMINE FOR PAIN MANAGEMENT BY REGISTERED NURSES (4/01)
In April 2001, the Board responded to a request for an advisory opinion as follows: The administration of sub-anesthesia dosages/low-dosage Ketamine Hydrochloride for pain management/analgesic purposes (and not anesthetic purposes), as prescribed, is within the scope of registered nursing practice. For additional information, please refer to the AOS #84-04 entitled, “Roles of Registered Nurses and Advanced Registered Nurse Practitioners in the Administration of Medication per Intraspinal Routes.”
THE INSERTION OF AN INTRAVASCULAR HEMOSTASIS DEVICE, SUCH AS AN “ANGIOSEAL” WHICH IS DEPLOYED AS THE FEMORAL SHEATH IS REMOVED AFTER A CARDIAC CATHETERIZATION BY REGISTERED NURSES (6/01)

In June 2001, the Board responded to a request for an advisory opinion as follows: The insertion of an intravascular hemostasis device, (such as an “Angioseal”) which is deployed as the femoral sheath is removed after a cardiac catheterization, is within the scope of registered nursing practice. Nurses who perform this procedure should have a documented order from the physician for the individual patient, and should possess the necessary education and current clinical competence to safely and competently perform the procedure.

THE ROLE OF LICENSED PRACTICAL NURSES IN DIALYSIS CARE (6/01)

In June 2001, the Board issued an opinion on the provision of dialysis care by a qualified licensed practice nurse. This information will be incorporated into a future revision of the Advisory Opinion Statement #21 entitled “Roles of Nurses in Dialysis.”

The performance of the following dialysis care acts are within the scope of licensed practical nursing practice:

In select situations, a registered nurse may delegate/assign the performance of peritoneal and hemodialysis to a licensed practical nurse who has documented educational preparation and clinical competence in the performance of the procedures.

Upon registered nurse delegation and continuous, direct, on-site supervision, the licensed practical nurse may:

- Collect assessment data;
- Cannulate and perform dialysis treatment via an implanted subcutaneous vascular device, and/or peripheral access sites (AV fistulas and AV grafts);
- Administer intravenous therapy/medications according to the AOS #99-03, and may administer other medications that are within the scope of licensed practical nursing practice;
- Obtain/draw blood specimens from dialysis tubing connected to central line dialysis sites;
- Perform dialysis care acts that are also routinely performed by dialysis technicians.

In addition, it is the advisory opinion of the Board that the following acts are within the scope of registered nursing practice and are not within the scope of licensed practical nursing practice. These acts should not be delegated to the LPN or dialysis technician:

- The dialysis of acutely ill unstable patients;
- The connection and disconnection of patients from, and site care of, percutaneously or surgically inserted non-tunneled, non-implanted central venous catheters (i.e., subclavian, jugular or femoral sites);
- The administration of blood and blood products.
THE PERFORMANCE OF MYELOGRAMS BY AN ARNP DESIGNATED NURSE PRACTITIONER (6/01)
In June 2001, the Board issued an advisory opinion that the performance of myelograms is within the scope of practice of a qualified advanced registered nurse practitioner designated nurse practitioner.

PRESCRIBING OF CONTROLLED SUBSTANCES BY ARNPS FOR PATIENTS ADMITTED TO A HEALTH CARE FACILITY (6/01)
In June 2001, the Board advised that ARNP’s may not independently issue an order for a controlled substance for patients who are admitted to a health care facility. After consultation with the physician, the order may be written by the ARNP as a verbal order of the physician, and subsequently co-signed by the physician.

CREDENTIALING OF DIALYSIS TECHNICIANS (6/01)
In response to the 2001 General Assembly action to enact legislation in KRS Chapter 314 to authorize the Board of Nursing to regulate the practice of dialysis technicians, an administrative regulation was promulgated. 201 KAR 20:470 E was promulgated June 21, 2001 and established the parameters for the training, credentialing and practice of dialysis technicians in Kentucky.

DECLARATORY RULINGS (6/01)
In response to the 2000 General Assembly action to enact legislation in KRS Chapter 314 to authorize the Board of Nursing to issue declaratory rulings, an administrative regulation was promulgated. 201 KAR 20:460 Declaratory rulings, became effective on June 8, 2001.

ADVISORY OPINION STATEMENTS – REVISIONS

- AOS #99-03 – Roles of Nurses in Intravenous Therapy Practice
- AOS #84-04 – Roles of RNs and ARNPs in the Administration of Medication via Intraspinal Routes
- AOS #84-07 – Roles of Nurses in Superficial Would Closure
- AOS #87-15 – Roles of Nurses in the Supervision & Delegation of Nursing Acts to Unlicensed Personnel
- AOS #87-16 – Roles of Nurses in the Administration of Medications via Various Routes
- AOS #87-17 – Roles of Nurses in the Administration of “PRN” Medications and Placebos
- AOS #87-18 – Employment of Students in Nursing
- AOS #91-25 – Peripheral Insertion of Central, Midclavicular and Midline Intravenous Catheters by Nurses

All advisory opinion statements may be obtained from the Board office or from the KBN website at www.kbn.state.ky.us.

Prepared by: Bernadette M. Sutherland, MSN, RN
Nursing Practice Consultant