

The Authority for Certain Clinical Tasks Performed by Unlicensed Patient Care Technicians and LPNs/LVNs in the Hemodialysis Setting: A Review

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The State Boards of Nursing are responsible for the regulation of nursing practice. The scope of duties for patient care technicians (PCTs) and licensed practical nurses (LPNs) or licensed vocational nurses (LVNs) in the hemodialysis setting may be determined by state statutes, regulations, Nurse Practice Acts (NPAs), and Board of Nursing advisory opinions or position statements. States vary greatly in the extent to which PCTs and LPNs/LVNs may function in the hemodialysis setting. Certain states list specific duties that are expressly permitted or prohibited for unlicensed individuals in a hemodialysis facility, or in any clinical setting (see Table 1). In the absence of specifically defined scope of duties for unlicensed assistive personnel or PCTs, registered nurses (RNs) must rely on their authority under the Board of Nursing delegation regulations for the state in which they are practicing to determine whether a specific duty may be delegated to an unlicensed person.

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The growing incidence of end stage renal disease (ESRD) has resulted in an ever-increasing demand for hemodialysis services throughout the country. Unlicensed assistive personnel (UAP), including dialysis technicians or patient care technicians (PCTs), and licensed practical nurses (LPNs) or licensed vocational nurses (LVNs) perform a vital role in the care of patients undergoing hemodialysis and are a critical staff component in hemodialysis facilities. This analysis provides a broad overview of the positions of states with respect to the administration of heparin and saline via peripheral and central lines by PCTs and LPNs/LVNs in the hemodialysis setting.

Key Words: Unlicensed patient care technicians, licensed practical nurses (LPNs), licensed vocational nurses (LVNs), unlicensed assistive personnel (UAP), hemodialysis, dialysis technicians, patient care technicians (PCTs).

Goal

To provide a broad overview of the positions of states with respect to the administration of heparin and saline via peripheral and central lines by PCTs and LPNs/LVNs in the hemodialysis setting.

Objectives

1. Discuss the Conditions for Coverage (CfC) as they apply to dialysis technicians' oversight by the registered nurse.
2. Define how practice is regulated for patient care technicians (PCTs) and licensed practical nurses (LPNs) in the hemodialysis setting.
3. Determine how practice is regulated in your state for the scope of duties for both patient care technicians (PCTs) and licensed practical nurses/licensed vocational nurses (LPNs/LVNs) in the hemodialysis setting.

The administration of heparin and saline via an extracorporeal circuit in hemodialysis is a routine clinical practice that is integral to the hemodialysis treatment procedure. As a medication, heparin administration is performed pursuant to physician

orders and established, approved hemodialysis facility protocols. RNs are required to be available in the hemodialysis facility to oversee all aspects of care by dialysis technicians according to §494.180(b)(2) of the Conditions for Coverage (Centers for

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Medicare and Medicaid Services [CMS] 2008). Dialysis technicians do not exercise independent nursing judgment or complex nursing skills in the performance of these duties. Dialysis technicians must receive extensive training in accordance with requirements set forth in the Conditions for Coverage, §494.140(e)(3) (CMS 2008). The Conditions for Coverage also require dialysis technicians to be certified under a State or a national certification program (CMS 2008).

Board of Nursing rules in some states may limit the administration of heparin or anticoagulant by a PCT to connecting a pre-filled syringe to the hemodialysis system as opposed to administering the drug intravenously (IV) directly to the patient. Board of Nursing rules in other states limit the PCT to administering heparin through established fistulae or grafts at initiation of the hemodialysis process.

In some hemodialysis facilities, LVNs/LPNs may also be a critical staff component. Most states permit these licensed nurses to administer IV medications, although certain states require completion of an IV therapy course. LPNs/LVNs practice under the state's Nurse Practice Act similar to that of RNs, but their scope of duties is generally more limited. In fact, the scope of practice for LPNs/LVNs in the hemodialysis setting may be more limited than that of the PCT as permitted by state law. In several states, nursing regulations prohibit LPNs/LVNs from administering IV medications under any circumstance. Some states also include further instruction for duties, which are beyond the scope of practice of LPNs/LVNs, and may not be delegated to unlicensed assistive personnel. In the absence of such specific guidance, the RN must consider the advisability of delegating to a PCT the performance of a duty that cannot be delegated to a licensed nurse.

The administration of IV medications by unlicensed personnel in the hospital setting is generally prohibited. However, the routine nature of heparin and saline administration by

PCTs in the hemodialysis setting compels a detailed analysis of this practice as nursing practice regulations are developed or revised. As Boards of Nursing contemplate the development of or revisions to scope of practice regulations in the hemodialysis setting, it would be instructive for Board of Nursing members to familiarize themselves with existing federal requirements for training and certification of dialysis technicians. Additionally, state and local ANNA chapters should provide State Boards of Nursing with specific clinical details of the role of PCTs and LPNs/LVNs in hemodialysis so Boards have a better understanding of their importance in this clinical setting.

Unlicensed Assistive Personnel: Administration of Heparin

Expressly Permitted

At the present time, 22 states expressly permit dialysis technicians or unlicensed assistive personnel to administer heparin as ordered to initiate or terminate a hemodialysis treatment. In most cases, the express authority for this practice lies in dialysis technician laws or Board of Nursing position statements. With several exceptions, most of these states also permit unlicensed assistive personnel to administer saline to correct a hypotensive episode during the hemodialysis treatment. Some states require that the technician performing such duties be under the direct, onsite supervision of an RN or a physician. Other states require that administration of heparin or saline by a dialysis technician shall be pursuant to established facility protocol. Most of these states specify "heparin administration." One state, Arizona, permits unlicensed assistive personnel to administer anticoagulants. Another state, Nevada, permits a dialysis technician to administer a drug under the direction or supervision of a physician or registered nurse only if the drug or medicine is used for the process of hemodialysis.

Delegation

In the absence of nursing rules that either clearly permit or prohibit the administration of IV medications by unlicensed assistive personnel, the RN may look to their delegation authority under the state NPA. Twelve states do not clearly define the scope of permissible duties for the unlicensed assistive personnel in the hemodialysis setting. Most states have adopted delegation decision-making process and related criteria as outlined by the National Council of State Boards of Nursing (NCSBN) (1997). These criteria instruct the nurse (delegator) to consider the circumstances and setting, the task to be delegated, the potential for harm, and the qualifications, competency, and skill level of the delegatee. The delegation rules of most states include instructions that the RN may not delegate a duty that requires independent nursing judgment, and that the licensed nurse maintains accountability and responsibility for the management and provision of nursing care.

Expressly Prohibited

Currently, 15 states do not permit unlicensed assistive personnel to administer heparin in the hemodialysis setting. In most cases, this prohibition lies in nursing regulations that do not permit unlicensed personnel to administer *any* medications. Certain states permit unlicensed assistive personnel to administer oral or topical medications, but specify a prohibition on the administration of intravenous medications.

Unlicensed Assistive Personnel: Administering Heparin or Saline Via Central Line Catheters

Expressly Permitted

While the hemodialysis process is the same regardless of the access site, there are greater risks associated with accessing a large major blood vessel through a central venous catheter. Such risks include infection, bleeding, and air embolism. As a result, few states expressly permit dialysis techni-



cians to administer heparin via a central line catheter. Only five states currently have specific legal language that permits dialysis technicians to initiate hemodialysis via central line catheters.

Delegation

Eighteen states have broad delegation language that may permit the RN to assess the competency of the unlicensed assistive personnel and delegate the administration of heparin or saline via a central line catheter.

Expressly Prohibited

Twenty-four states prohibit unlicensed assistive personnel from administering heparin via a central line catheter. These states include those that prohibit unlicensed assistive personnel from administering *any* IV medications and those that permit the

unlicensed assistive personnel to administer heparin via a peripheral or “established” access, but prohibit delivery of medications via a central line catheter.

LPN/LVN: Administration of IV Medications via Central Line Catheter

Expressly Permitted

The nursing regulations of 34 states permit LPNs/LVNs to access central line catheters, including the administration of IV medications.

Delegation

In 10 states, the nursing delegation language may permit the RN to delegate IV medication administration through a central line access.

Expressly Prohibited

Five states do not permit an LPN to administer IV medications through a central line catheter.

References

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State Boards of Nursing – Practice Authority

State	Can PCT Administer Heparin?	Can PCT Access Central Line Catheter?	Can LPN/LVN Access Central Line Catheter?	Authority/Prohibitor
Alabama	No	No	No	<ul style="list-style-type: none"> Nursing regulation prohibits dialysis technicians from cannulating, performing invasive or sterile procedures, administering medications. Nursing regulation permits LPNs to administer IV meds in peripheral lines only.
Alaska	No	No	No	<ul style="list-style-type: none"> Nursing regulation prohibits delegation of IV therapy or injectable medications. Board of Nursing Advisory Opinion; administration of IV medications cannot be delegated by RN to LPN.
Arkansas	No	No	No	<ul style="list-style-type: none"> Nursing regulation prohibits the delegation of medication administration or IV therapy.
Arizona	Yes	Yes	Yes	<ul style="list-style-type: none"> Dialysis technician law expressly permits PCTs to access central line catheters; “anti-coagulant” is specified. Nursing Advisory Opinion permits, with training, LPNs may access central line catheters.
California	Yes	No	No	<ul style="list-style-type: none"> Dialysis technician regulation specifies heparin administration. Board of Registered Nursing Position Statement: LVNs may not administer IV medications through peripheral or central lines.
Colorado	Delegation	Delegation	Delegation	<ul style="list-style-type: none"> Broad nursing delegation regulations.
Connecticut	Yes	Delegation	Delegation	<ul style="list-style-type: none"> Dialysis technician law specifies heparin administration; silent on central line catheters. Broad nursing delegation regulations may apply to catheters for PCTs and LPNs.

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State Boards of Nursing – Delegation Actions (continued)

State	Can PCT Administer Heparin?	Can PCT Access Central Line Catheter?	Can LPN/LVN Access Central Line Catheter?	Authority/Prohibitor
Delaware	No	No	Yes	<ul style="list-style-type: none"> Nursing regulations prohibit delegation of medication administration by unlicensed assistive personnel. Nursing regulations permit LPNs to administer IV meds via peripheral and central lines.
District Of Columbia	Delegation	No	Yes	<ul style="list-style-type: none"> Proposed regulations. Nursing regulations permit LPNs to administer IV meds via central lines.
Florida	No	No	Yes	<ul style="list-style-type: none"> Board of Nursing regulations permit LPNs a limited scope of IV medication duties.
Georgia	No	No	Yes	<ul style="list-style-type: none"> Dialysis technicians may administer saline but not heparin; Board of Pharmacy regulation lists heparin as a dangerous drug. Only licensed nurses may initiate and discontinue hemodialysis via central line.
Hawaii	No	No	Yes	<ul style="list-style-type: none"> Nursing delegation rules prohibit IV administration of medications by unlicensed assistive personnel. Broad delegation applies to LPNs accessing central line catheters.
Idaho	No	No	Yes	<ul style="list-style-type: none"> Board of Nursing rules prohibit delegating IV therapy medication administration or sterile procedures to unlicensed assistive personnel. Central line access is within the scope of duties of LPNs.
Illinois	No	Delegation	Delegation	<ul style="list-style-type: none"> Nursing delegation applies to unlicensed assistive personnel and LPNs regarding central line catheters. LPNs prohibited from administering IV heparin.
Indiana	Delegation	Delegation	Delegation	<ul style="list-style-type: none"> Board of Nursing is silent on delegation of specific duties.
Iowa	Delegation	No	Yes	<ul style="list-style-type: none"> Activities and functions which are beyond the scope of practice of LPNs may not be delegated to unlicensed assistive personnel.
Kansas	No	No	Yes	<ul style="list-style-type: none"> LPN IV therapy certification requirement permits LPNs to maintain the patency of central and peripheral IV lines with heparin or normal saline.
Kentucky	Yes	No	Yes	<ul style="list-style-type: none"> Dialysis technician regulation specifies heparin administration; prohibits central line access. LPN nursing regulation permits LPNs to access central line catheters.
Louisiana	Yes	No	Yes	<ul style="list-style-type: none"> Board of Nursing Declaratory Statement on delegating heparin administration to dialysis technicians; accessing central lines may not be delegated to unlicensed assistive personnel. RN may delegate dialysis via central lines to LPNs.
Maine	Delegation	Delegation	Yes	<ul style="list-style-type: none"> Board of Nursing position statement appears to permit broad delegation to unlicensed assistive personnel in dialysis setting. LPNs may flush peripheral or central intravenous catheter and intermittent device with premixed heparin solution or saline.
Maryland	Yes	Delegation	Yes	<ul style="list-style-type: none"> Dialysis technician law and regulation does not list specific duties; refers to delegation. Specific nursing regulation permits LPNs to access central lines.
Massachusetts	Yes	Delegation	Yes	<ul style="list-style-type: none"> ESRD facility licensing rules permit LPNs and technicians trained in chronic dialysis to initiate and terminate dialysis and administer anticoagulant agents; central lines are not mentioned.

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State Boards of Nursing – Delegation Actions (continued)

State	Can PCT Administer Heparin?	Can PCT Access Central Line Catheter?	Can LPN/LVN Access Central Line Catheter?	Authority/Prohibitor
Michigan	Delegation	Delegation	Delegation	<ul style="list-style-type: none"> No Nurse Practice Act. Delegation rules apply.
Minnesota	Delegation	Delegation	Delegation	<ul style="list-style-type: none"> Nursing delegation applies to unlicensed assistive personnel and LPNs.
Mississippi	Yes	No	Yes	<ul style="list-style-type: none"> Dialysis nursing regulations permit dialysis technicians to administer heparin; not permitted to access central line catheters. Nursing regulations permit LPNs to access central line catheters in hemodialysis.
Missouri	Delegation	No	Yes	<ul style="list-style-type: none"> Broad nursing delegation rules apply. LPN IV certification requirement.
Montana	Yes	No	Yes	<ul style="list-style-type: none"> Board of Nursing Hemodialysis Rules for unlicensed assistive personnel and LPNs permit heparin administration. LPNs and central lines; "Under direct supervision a competent practical nurse may access, draw blood, flush with a normal saline solution or a specific heparin flush solution, and change dressings of hemodialysis central venous catheters."
Nebraska	Yes	Yes	Yes	<ul style="list-style-type: none"> Board of Nursing dialysis technician rules permit heparin administration and permit dialysis technicians to dialyze via central line catheters. Nebraska adopts ANNA statement on use of unlicensed assistive personnel in dialysis.
Nevada	Yes	Delegation	Yes	<ul style="list-style-type: none"> PCTs may administer IV medications under the direction or supervision of a physician or RN only if the drug or medicine is used for the process of renal dialysis.
New Hampshire	Delegation	Delegation	Yes	<ul style="list-style-type: none"> Broad nursing delegation rules apply. LPN required IV therapy course.
New Jersey	Delegation	Delegation	Delegation	<ul style="list-style-type: none"> A registered professional nurse may delegate selected nursing tasks to LPNs and ancillary nursing personnel (including aids, assistants, attendants, and technicians).
New Mexico	Yes	Yes	Yes	<ul style="list-style-type: none"> Board of Nursing rules permit heparin administration; CHT; II may dialyze via central line catheters.
New York	No	No	Yes	<ul style="list-style-type: none"> Board of Nursing Position Statement on unlicensed assistive personnel and LPNs in dialysis facilities.
North Carolina	Delegation	Yes	Yes	<ul style="list-style-type: none"> Board of Nursing dialysis rules for unlicensed assistive personnel permit heparin administration.
North Dakota	Yes	No	Yes	<ul style="list-style-type: none"> Board of Nursing dialysis technician rules permit heparin administration; prohibit PCTs from accessing central line catheters.
Ohio	Yes	Delegation	Yes	<ul style="list-style-type: none"> Dialysis technician statute permits heparin administration and is silent on central line catheters. LPN IV therapy certification rules permit LPNs to access central line catheters.
Oklahoma	No	No	Delegation	<ul style="list-style-type: none"> Nursing delegation rules prohibit the delegation of medication administration to unlicensed assistive personnel. Nursing delegation rules apply to LPNs.
Oregon	Yes	Yes	Yes	<ul style="list-style-type: none"> Dialysis technician regulations permit heparin administration and permit accessing central line catheters. LPNs may access central line catheters if properly trained.

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State Boards of Nursing – Delegation Actions (continued)

State	Can PCT Administer Heparin?	Can PCT Access Central Line Catheter?	Can LPN/LVN Access Central Line Catheter?	Authority/Prohibitor
Pennsylvania	No	Delegation	Yes	<ul style="list-style-type: none"> Board of Nursing regulations permit an RN to delegate medication administration only to a nursing student and does not specify or include unlicensed assistive personnel.
Rhode Island	Delegation	Delegation	Yes	<ul style="list-style-type: none"> Broad nursing delegation rules. No prohibitions on LPNs administering IV medications or accessing central line catheters.
South Carolina	No	No	Yes	<ul style="list-style-type: none"> Nurse Practice Act prohibits delegation of medication administration to unlicensed assistive personnel. Board of Nursing Position Statement: LPNs may access central lines.
South Dakota	Yes	No	Yes	<ul style="list-style-type: none"> Dialysis technician regulations permit heparin administration; prohibit PCTs from accessing central line catheters.
Tennessee	No	No	Yes	<ul style="list-style-type: none"> Nurse Practice Act prohibits unlicensed persons from administering medications. Nursing Advisory Opinion defines LPN scope of practice in dialysis setting.
Texas	Yes	No	Yes	<ul style="list-style-type: none"> Dialysis technician regulations permit heparin administration. LVN IV therapy course required to administer IV meds via peripheral and central lines.
Utah	Delegation	Delegation	Yes	<ul style="list-style-type: none"> Broad nursing delegation language applies.
Vermont	Yes	No	No	<ul style="list-style-type: none"> Board of Nursing position statement permitting dialysis technicians to administer heparin; no specific mention of central lines. The Vermont Board of Nursing supports the position of ANNA as a framework the nurse can use in the delegation of medications to dialysis technicians. Board of Nursing position statement: may not delegate to an LPN the administration of medications via central line catheters.
Virginia	Yes	Yes	Yes	<ul style="list-style-type: none"> Dialysis technician statute permits heparin administration. IV therapy not addressed in Board of Nursing rules; appears to be within the scope of duties of LPN.
Washington	Yes	Yes	Yes	<ul style="list-style-type: none"> Dialysis technician statute permits heparin administration and permits accessing central line catheters. Board of Nursing Interpretive Statement permitting LPNs to administer meds via central lines.
West Virginia	Yes	Delegation	Delegation	<ul style="list-style-type: none"> Dialysis technician statute permits heparin administration and is not specific on central line access – “preparation and initiation of dialysis access sites.” LPNs are not prohibited from accessing central lines; this duty may be delegated by RN.
Wisconsin	Delegation	Delegation	Delegation	<ul style="list-style-type: none"> Position statement on delegation applies to unlicensed assistive personnel and LPNs.
Wyoming	No	No	Yes	<ul style="list-style-type: none"> Board of Nursing rules do not permit the delegation of medication administration. Board of Nursing Advisory opinion permits LPNs only to perform hemodialysis and administer medications via peripheral and central lines; requires IV therapy course; specific to LPN, no mention of unlicensed assistive personnel.

ANNA

American Nephrology Nurses' Association (ANNA) Position Statement: Delegation of Nursing Care Activities

The American Nephrology Nurses' Association (ANNA) believes every patient has the right to professional nursing care that encompasses all aspects of the nursing process and meets or exceeds the ANNA Nephrology Nursing Scope and Standards of Practice and Centers for Medicare and Medicaid Services (CMS) Conditions for Coverage. The practice of each nurse must comply with the scope of practice, regulations/laws, and licensure requirements of the state in which they are employed. The care of each patient includes, but is not limited to, assessment of patient needs, the development of a comprehensive interdisciplinary patient specific plan of care, implementation of nursing interventions, and the monitoring and evaluation of patient outcomes. The ultimate goal of the nursing process is to effect positive patient outcomes in the most cost effective way. ANNA recognizes that achievement of favorable patient outcomes is a collaborative effort between all members of the interdisciplinary team.

It is the position of ANNA that:

- The RN uses critical thinking and professional judgment when following the Five Rights of Delegation, to be sure that the delegation or assignment is:
 1. The right task.
 2. Under the right circumstances.
 3. To the right person.
 4. With the right directions and communications.
 5. Under the right supervision and evaluation.(Joint Statement on Delegation American Nurses Association (ANA) and the National Council of State Boards of Nursing (NCSBN))
- The registered nurse must never delegate a nursing care activity that requires:
 - a. The knowledge and expertise derived from completion of a nursing education program and the specialized skill, judgment and decision-making of a registered nurse
 - b. Complex observation, critical decision-making, exercise of nursing judgment, or repeated nursing assessments.
 - c. An understanding of the core nephrology nursing principles necessary to recognize and manage real or potential complications that may result in an adverse outcome to the health and safety of the patient.
- The registered nurse is accountable for the:
 - a. Safety of the patient.
 - b. Nursing process.
 - c. Patient assessment.
 - d. Delegation of nursing tasks appropriate to the delegates' documented knowledge, skills, cultural competence, experience, and abilities, within the scope of practice, and the licensure requirements in effect in the state in which the nurse is employed.
- Delegation of nursing care activities to licensed practical/vocational nurses (LPNs/LVNs) and/or certified dialysis patient care technicians (PCT) shall comply with the following criteria:
 - a. The registered nurse must complete an assessment of the patient's nursing care needs prior to delegating any nursing intervention.
 - b. The registered nurse shall be accountable and responsible for all delegated nursing care activities or interventions, and she/he must remain present in the patient care area for ongoing monitoring and evaluation of the patient's response to the therapy.
 - c. The patient care activities must be within the licensure and/or certification requirements for the LPN/LVN or PCT, practice setting, scope of practice, and the licensure requirements in effect in the state in which the nurse is employed. Additional specific facility/agency policies and procedures related to delegation may also apply.
 - d. The registered nurse shall have either instructed the LPN/LVN or PCT in the delegated nursing care activity or verified the individual's competency to perform the activity. Persons to whom tasks are delegated should have the opportunity to ask questions and/or request clarification of expectations.
 - e. Clinical competency of these individual's will be documented and available, and verified at least annually.
 - f. Administration of medication is a nursing responsibility requiring knowledge of the indications, pharmacokinetic action, potential adverse reactions, correct dosage and contraindications, and, in general, is beyond the scope of practice of PCT. Administration of medications by PCTs shall be limited to those medications considered part of the routine hemodialysis treatment, that is, normal saline and heparin via the extracorporeal circuit, intradermal lidocaine, and oxygen by nasal cannula, as allowed by the scope of practice, and licensure requirements in effect in the state in which the nurse or PCT is employed.



American Nephrology Nurses' Association (ANNA) Position Statement: Delegation of Nursing Care Activities (continued)

- g. Administration of any blood products and/or intravenous medications by infusion is a nursing responsibility and beyond the scope of practice of the PCT.
- The registered nurse is legally accountable and clinically responsible for the complete documentation of the entire nursing process. When certain aspects of the nursing care activities or interventions are delegated to other personnel, the registered nurse retains the legal accountability and clinical responsibility for these activities.

Background and Rationale

The relationship between the registered nurse and the patient constitutes a legal and binding contract. The existence of this contract has been established through case law.

ANNA recognizes potential contributions to the care of nephrology patients by LPNs/LVNs and PCTs. The scope of practice of the registered nurse in the state where the nurse is employed may limit delegation of nursing care activities or interventions to these licensed and certified personnel.

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