



Addendum to American Nephrology Nurses Association Position Statement on Delegation of Nursing Care Activities

As a nephrology registered nurse (RN), you may be delegating to both licensed and unlicensed assistive personnel. Delegation to licensed practical nurses/licensed vocational nurses (LPNs/LVNs) is supported by the scope of practice for these nurses in the individual state's nurse practice act (NPA), which varies considerably from state to state. Delegation to unlicensed assistive personnel (UAP) may not be as clear. Obtaining weights, vital signs, scheduling appointments, managing inventory and equipment, and phlebotomy if the staff member is trained generally can be delegated. The tables below will assist the nephrology RN in determining tasks that can and cannot be delegated (Cahill, et al, 2025).

Can be Delegated*	Cannot be Delegated
Weight	Assessment
Vital signs (blood pressure, temperature, respiratory rate, and pulse), pain	Diagnosis
Scheduling appointments/reminder calls	Outcomes identification
Paperwork: chart set ups, filing, etc.	Planning
Managing inventory and equipment	Implementation
Phlebotomy	Evaluation of outcomes
Capillary blood glucose	Coordination of care
Non-sterile dressing	Health teaching and health promotion
Reinforcement of education	Education
LPN: medications	

*Dependent upon each state NPA and the Five Rights of Delegation.

The use of UAP, such as medical assistants (MAs), patient care technicians (PCTs), and certified clinical hemodialysis technicians (CCHTs), has increased in home therapies. An example of tasks that may be considered for delegation is included below using a home dialysis workflow.

Home Dialysis Workflow	RN Required	Task May Be Delegated
Recruitment/Referrals		
Identify candidates	Education for potential candidates and families to learn about home therapies (example: Lobby Days, transitional care units [TCUs])	Assistance with Lobby Days and patient care in the TCU
Evaluation of the candidate	Completion of the home visit, assessment of the candidate/care partner to identify special needs – learning style, dexterity, treatment adherence, home environment, and education	Assistance with home visit(s) to determine necessary home modifications, completion of the tool Methods to Assess Choices for Home Dialysis (Match D)

Home Dialysis Workflow	RN Required	Task May Be Delegated
Recruitment/Referrals (cont'd)		
Acceptance of the candidate	Final determination with input from the interdisciplinary team	
Access placement and management	<p>Peritoneal dialysis (PD): site markings for PD access/catheter placement, maintenance of sterile dressings, PD catheter flushes</p> <p>Home hemodialysis (HHD): assessment of vascular access site, evaluation to ensure adequate function with referral to a dialysis access surgeon if needed</p> <p>Both: education on the care of access</p>	Scheduling appointments and follow-up for attendance, non-sterile dressing changes if not performed by the patient/care partner, consideration for PD catheter flush depending on delegation authority and training, reinforcement of education related to care of access
Admission Process	Education, assessments if not previously completed (e.g., urgent starts, acute kidney injury (AKI))	Admission paperwork, preparation of chart/filing, schedule appointments and training, reminder calls, lab draws, vital signs, weights, supply ordering, management of facility-owned equipment, obtain samples for Association for the Advancement of Medical Instrumentation (AAMI) analysis, cultures, and endotoxin, LPN/LVN may perform vaccinations/tuberculin (TB) skin tests administration of other medications if allowed by individual state NPAs
Training		
Education	Assessment of learning style, learning capabilities, education, evaluation of learning	Reinforce education within the scope of practice
Determining a safe transition	Assessment of readiness, determination of the frequency of ongoing monitoring	

Home Dialysis Workflow	RN Required	Task May Be Delegated
Monitoring and Ensuring Success		
Follow-up and oversight	Education and re-education of high-risk issues, assessment, and monitoring to include status of AKI, dialysis access, home environment, life goals, depression, burnout, observing lab results for trends, making recommendations for prescription management, determining frequency and completion of home visits, peritoneal equilibration test (PET), assessing when respite is needed and when transition back to home setting is appropriate	Assistance during clinic visits and home visits with phlebotomy, management of supplies, obtaining vital signs and weights, scheduling follow-up appointments, LPN/LVN may administer injections and other medications, PET tests if allowed by individual state practice acts
Emergent issues	Assessment and evaluation of issue and determination of the plan, on call	Act as a second person, if required for safety for after-hours clinic/home visit
Determining success	Evaluation of continued success at home, follow-up education	Collection of data with parameters for reporting

Reference

Cahill, M.L., Painter, D. R., & Branch, J.L, & Haras, M.S. (2025). A 2025 Updated: The authority for certain clinical tasks performed by unlicensed patient care technicians and LPNs/LVNs in the hemodialysis setting: An update and invitation to take action. *Nephrology Nursing Journal*, 52(3), 215-227.

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