

Oklahoma Board of Nursing  
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Decision-Making Model for Scope of Nursing Practice Decisions:  
Determining Advanced Practice Registered Nurse, Registered Nurse and Licensed  
Practical Nurse Scope of Practice Guidelines

The Oklahoma Nursing Practice Act enacted by the Legislature defines a scope of practice for nurses in this state. It is impossible for a practice act to list all of the duties, nursing functions and/or nursing activities licensed nurses are or are not permitted to perform. The Board has endorsed the following guidelines to assist nurses in determining a personal scope of practice based upon legal parameters of practice and one's education, knowledge, competency and experience. To provide documentation of the decision-making process for specific nursing tasks, *Addendum A* identifies nursing duties, functions, and activities that have been reviewed by Board committees and by the Board on or after November 10, 2009, based on questions submitted by licensees and other stakeholders. In some cases, the Board has issued a declaratory ruling, position statement, or guidelines to address specified nursing duties, functions, or activities. Please see the Board's website (<http://www.oklahoma.gov/nursing/guidelines-position-statements.html>) for a list of declaratory rulings, position statements, and guidelines that address specific nursing duties, functions, and activities.

The profession of nursing is a dynamic discipline. Practice potentials change and develop in response to health care needs of society, technical advancements, and the expansion of scientific knowledge. All licensed nurses share a common base of responsibility and accountability defined by the practice of nursing. However, competency-based practice scopes of individual nurses may vary according to the type of basic licensure preparation, practice experiences and professional development activities. The licensed nurse is responsible and accountable, both professionally and legally, for determining his/her personal scope of nursing practice. The intent of this guideline is to present a process to determine activities/tasks appropriate to nursing at various levels. Application of this guideline is accomplished through answering the following questions.

Describe the activity/task being performed.

1. Is the activity permitted/prohibited by the *Oklahoma Nursing Practice Act*, Rules and/or Declaratory Rulings or any other applicable law?
  - a. If **Prohibited**, the decision is complete.
  - b. If **Permitted**, proceed to #2.
  - c. If **Unsure**, proceed to #2.

2. If required by the activity, do you possess the substantial specialized nursing knowledge, skill and have authority for independent judgment?
  - a. If you answer **NO** to this question, the activity is **NOT** within your scope of practice.
  - b. If you answer **YES**, the activity may be within your scope of practice, proceed to #3.
- 2.1 If you are an Advanced Practice Registered Nurse (APRN), is the activity for advanced practice nurses within the recognized scope and standards of your certifying body and consistent with advanced educational preparation as an APRN in an area of specialty?
  - a. If you answer **NO** to this question, the activity is **NOT** within your scope of practice.
  - b. If you answer **YES**, proceed to #3.
3. Is the activity consistent with ALL of the following?
  - Current national nursing standards.
  - Current evidence-based nursing literature and research.
  - Appropriately established written policy and procedure of employing facility.
  - Current employing facility accreditation standards.
  - Appropriate resources are available to perform the activity, intervention, or role in the practice setting.
  - a. If you answer **NO** to this question, the activity is **NOT** within your scope of practice.
  - b. If you answer **YES**, proceed to #4.
4. Do you personally possess the depth and breadth of knowledge to perform the activity safely and effectively as demonstrated by knowledge acquired in a pre-licensure program, post-basic program, or continuing education program?
  - a. If you answer **NO**, the activity is **NOT** within your scope of practice.
  - b. If you answer **YES**, maintain **documented evidence** and proceed to #5.
- 4.1 If you are an APRN, do you personally possess the depth and breadth of knowledge to perform the activity safely and effectively as demonstrated by knowledge acquired in your advanced nursing educational program or continuing education program?
  - a. If you answer **NO**, the activity is **NOT** within your scope of practice.
  - b. If you answer **YES**, maintain **documented evidence** and proceed to #5.

5. Do you personally possess current, documented clinical competence to perform this activity safely?
  - a. If you answer **NO**, the activity is **NOT** within your current scope of practice until competence is achieved.
  - b. If you answer **YES**, proceed to #6.
6. Is the performance of the activity within the accepted “standard of care” which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience?

As Declaratory Rulings, Board Guidelines, and Position Statements are developed by the Board in response to a specific question(s) to guide what a reasonable and prudent nurse should do, such rulings should be considered when responding below.

- a. If you answer **NO**, the activity is **NOT** within your scope of practice. Performance of the activity may place both nurse and patient at risk.
  - b. If you answer **YES**, proceed to #7.
7. Are you prepared to accept the consequences of your action?
  - a. If you answer **NO**, the activity is **NOT** within your current scope of practice.
  - b. If you answer **YES**, then:
    - i. Perform the activity based upon valid Order when necessary, and in accordance with appropriately established policies and procedures of employing facility.
    - ii. Assume accountability for provisions of safe care.
  - c. If you are still **unsure**, stop and defer to a qualified individual.

### **Acknowledgments:**

The Oklahoma Board of Nursing acknowledges the original model development by the Kentucky Board of Nursing. Other contributors: Boards of Nursing from Florida, North Carolina, South Dakota, Pennsylvania, Arkansas and West Virginia, and the National Council of State Boards of Nursing and Tri-Council for Nursing.

### **Regulatory Authority:**

59 O.S. §567.1 et seq.  
O.A.C. Title 485

## Summary of Decision Making Model

1. Is the activity permitted by the *Oklahoma Nursing Practice Act, Rules, and/or Declaratory Rulings* or any other applicable law?

2. If required by the activity, do you possess the substantial *specialized* nursing knowledge, skill and have authority for independent judgment?

- a. If you answer NO, the activity is NOT within your scope of practice
- b. If you answer YES, the activity may be within your scope of practice.

2.1 If you are an Advanced Practice Registered Nurse (APRN), is the activity for APRNs within the recognized scope and standards of your certifying body and consistent with advanced educational preparation as an APRN in an area of specialty? (If yes, proceed to decision #3.)

3. Is the activity consistent with ALL of the following:

- Current national nursing standards?
- Current evidence-based nursing literature and research?
- Appropriately established written policy and procedure of employing facility?
- Current employing facility accreditation standards?
- Appropriate resources are available to perform the activity, intervention, or role in the practice setting?

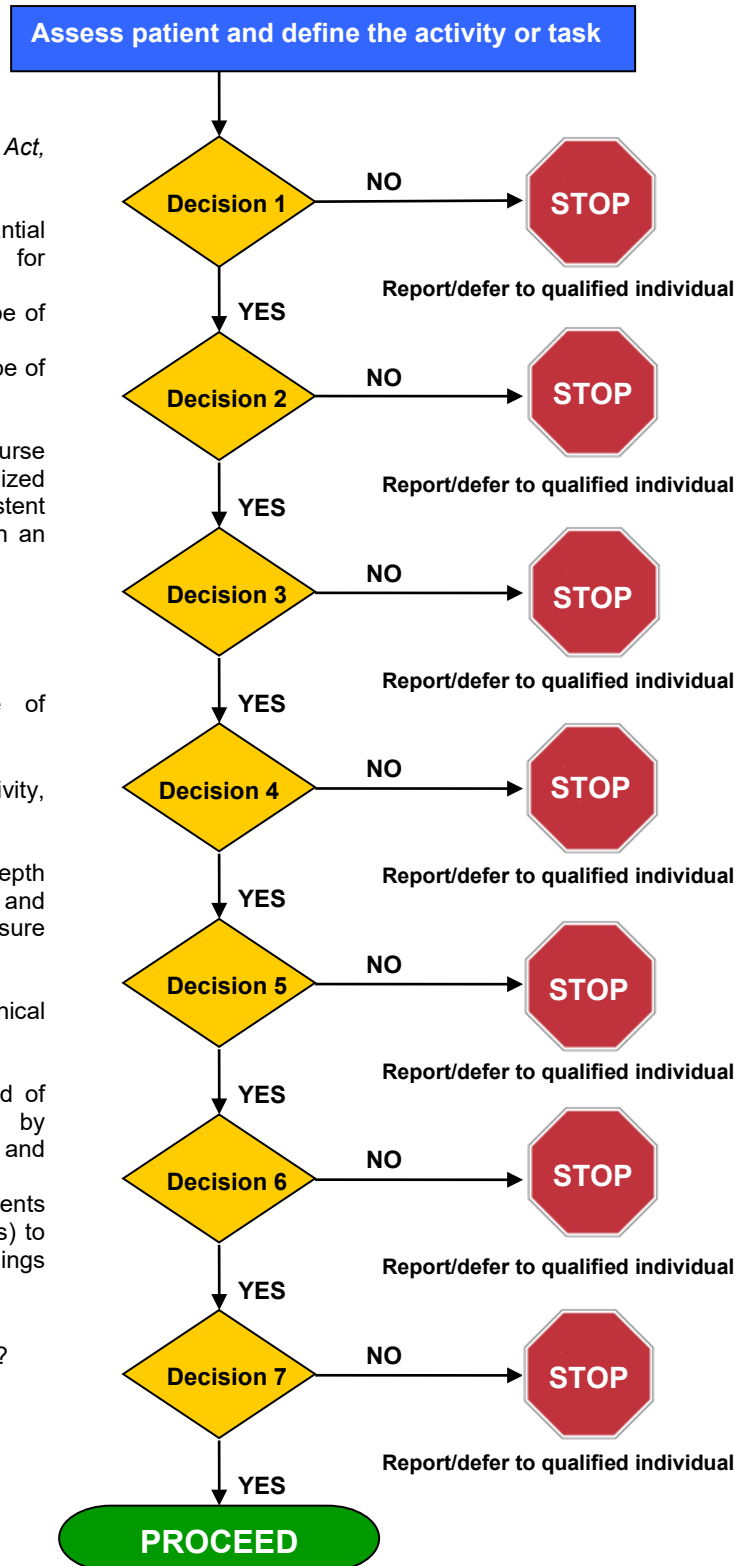
4. Do you (as an RN, LPN, or APRN) personally possess the depth and breadth of knowledge to perform the activity safely and effectively as demonstrated by knowledge acquired in a pre-licensure program, post-basic program, or continuing education program?

5. Do you personally possess current, documented clinical competence to perform this activity safely?

6. Is the performance of this activity within accepted "standard of care" which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience?

As Declaratory Rulings, Board Guidelines and Position Statements are developed by the Board in response to a specific question(s) to guide what a reasonable and prudent nurse should do, such rulings should be considered when responding to this decision.

7. Are you prepared to accept the consequences of your actions?



## Addendum A

### **09-001 Can Registered Nurses adjust the rate of Elastomeric (such as ON-Q) Pumps?**

In response to this practice question, the Nursing Education and Practice Advisory Committee concluded on October 12, 2009, that provided appropriate actions/steps are taken and in place, a Registered Nurse is PERMITTED to adjust the rate of elastomeric pumps. The Registered Nurse performing this task must be knowledgeable about the pump as well as the expected patient response to the intervention. Clinical competency must be assessed, documented and reassessed/documented regularly. The act is to be performed upon valid order and in accordance with appropriately established policies and procedures of the employing facility (#1-6 in the Decision-Making Model).

(Approved by Board, 11/10/2009)

### **09-500 Is routine artificial rupture of amniotic membranes within the scope of practice of Registered Nurses?**

In response to this practice question, the Nursing Education and Practice Advisory Committee concluded on October 12, 2009, that it is **NOT** within the scope of Registered Nurses to perform this activity. The act is not consistent with national standards of practice (#1-3 in the Decision Making Model) in that the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) does not support the artificial rupture of membranes by Registered Nurses. See AWHONN Clinical Position Statement: *Amniotomy and Placement of Internal Fetal Spiral Electrode through Intact Membranes*.

(Approved by Board, 11/10/2009)

### **23-001 Can Registered Nurses insert non-tunneled central venous catheters?**

In response to this nursing practice opinion request, the Board of Nursing concluded during the March 28, 2023, Board meeting that, a Registered Nurse is PERMITTED to insert non-tunneled central venous catheters upon written proof that appropriate training is complete and competency has been demonstrated. The Registered Nurse performing this task must be knowledgeable about the non-tunneled insertion of central venous catheters, as well as the expected patient response to the intervention and how to intervene when unexpected outcomes occur. The Registered Nurse with documented peripherally inserted central catheter (PICC) insertion competency must complete additional training and education, including a didactic course specific to insertion of non-tunneled central venous catheters, and demonstrate competency in central venous catheter insertion as observed, assessed and documented by physician(s) competent in the insertion of non-tunneled central venous catheters. The proctoring physician documents the date the Registered Nurse is proficient to perform the insertion of non-tunneled central venous catheters without direct supervision. Clinical competency must be assessed and documented regularly. The insertion of non-tunneled central venous catheter is to be performed upon a valid order and in accordance with established policies and procedures of the employing facility (#1-6 in the Decision-Making Model).

(Approved by Board, 5/23/2023)