

OKLAHOMA BOARD OF NURSING  
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Decision-Making Model for Scope of Nursing Practice Decisions:  
Determining RN/LPN 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 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 ([www.ok.gov/nursing/prac1.html](http://www.ok.gov/nursing/prac1.html)) for a list of declaratory rulings, position statements, and guidelines that address specific nursing duties, functions, and activities.

1. Describe the activity/task [act] being performed.
2. Is the act expressly permitted/prohibited by the Oklahoma Nursing Practice Act?
  - a. If **Permitted**, proceed to #3.
  - b. If **Prohibited**, the decision is complete.
  - c. If **Unsure**, proceed to #3.
3. Does the act require you to have substantial specialized nursing knowledge, skill and independent judgment?
  - a. If you answer **NO** to this question, the act may be within the basic scope of practice for an RN or LPN. Proceed to #4.
  - b. If you answer **YES**, the activity may be an act within the scope of practice of an RN only at an advanced practice level. Proceed to #4.
4. Is the act consistent with the scope of practice based upon at least ONE of the following factors?
  - a. Standards of practice of a national nursing organization.
  - b. Positive and conclusive data in nursing literature and research.
  - c. Appropriately established policy and procedure of employing facility.

- i. If you answer **NO** to this question, the act is **NOT** within your scope of practice.
  - ii. If you answer **YES**, proceed to #5.
  
- 5. Do you personally possess the depth and breadth of knowledge to perform the act 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 act is **NOT** within your scope of practice.
  - b. If you answer **YES**, maintain **documented evidence** and proceed to #6.
  
- 6. Do you personally possess current, documented clinical competence to perform this act safely?
  - a. If you answer **NO**, the act is **NOT** within your current scope of practice until competence is achieved.
  - b. If you answer **YES**, proceed to #7.
  
- 7. Is the performance of the act within the accepted “standard of care” which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience?
  - a. If you answer **NO**, the act is **NOT** within your scope of practice. Performance of the act may place both nurse and patient at risk.
  - b. If you answer **YES**, proceed to #8.
  
- 8. Are you prepared to accept the consequences of your action?
  - a. If you answer **NO**, the act is **NOT** within your scope of practice.
  - b. If you answer **YES**, then:
    - i. Perform the act 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.

**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 and Arkansas, and the National Council of State Boards of Nursing.

**Regulatory Authority:**

59 O.S. §567.1 et seq.  
OAC Title 485

Board Endorsed: 9/93

Reviewed w/o Revision: 7/25/01

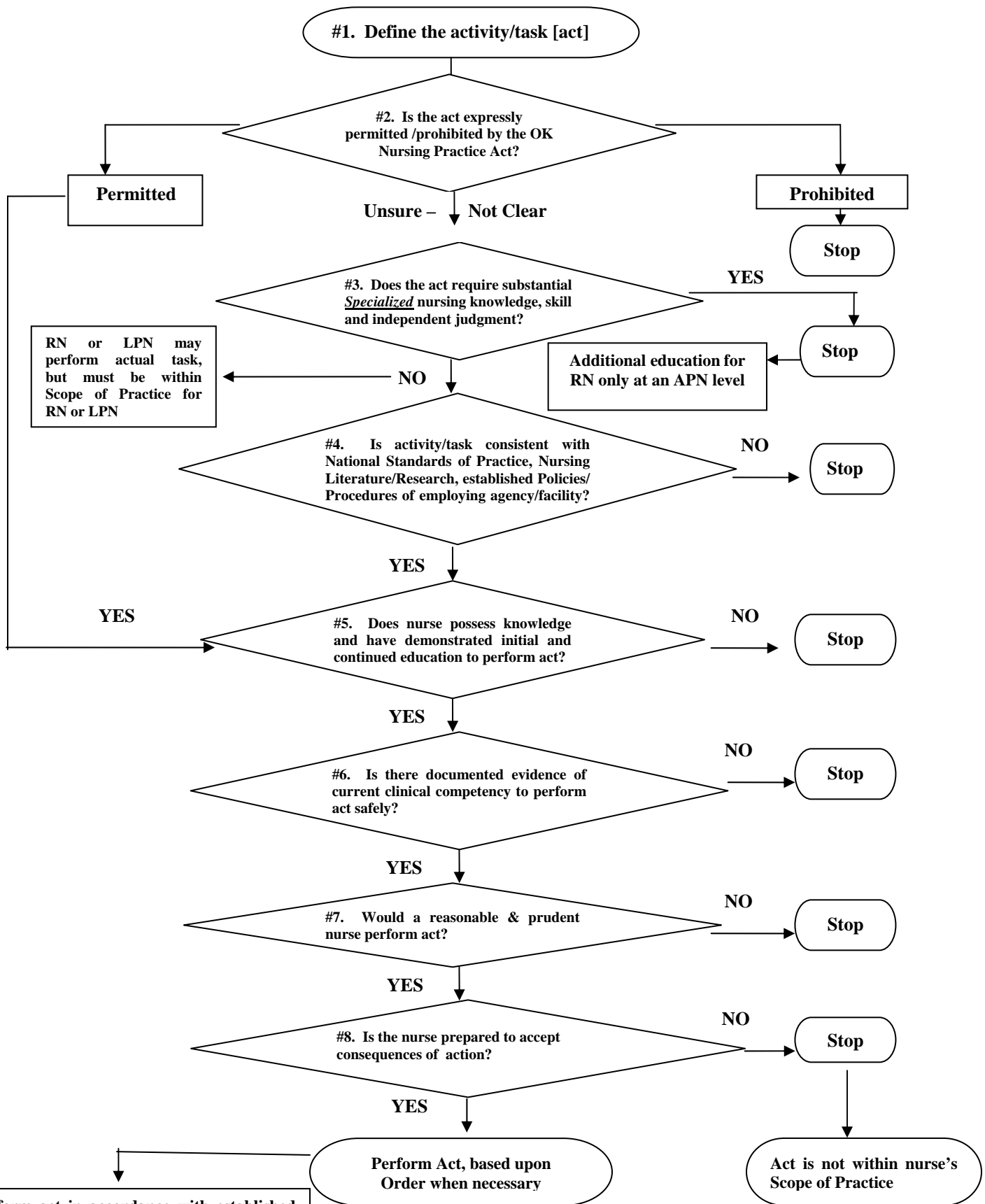
Board Revised: 3/31/04; 5/29/07, 11/10/09

OBN Policy/Guidelines #P-10

Page 2 of 4

H:/SELLIS/Executive/Policies/Practice/DecisionMaking

## Summary of Decision Making Model



Perform act in accordance with established Policies and Procedures of employing facility. Nurse assumes accountability for safe nursing care.

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OBN Policy/Guideline #P-10  
 Page 3 of 4

H:/SELLIS/Executive/Policies/Practice/DecisionMaking

## 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 (#1-7 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 (#1-4 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)