

## **CHAPTER 5**

### **Licensed Vocational Nurse Scope of Practice Standards**

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#### **I. POLICY:**

Licensed Vocational Nurses (LVNs) are NOT independent practitioners. It is not within the scope of LVN practice to function independently. The LVN must practice under the direction of a licensed physician or Registered Nurse (RN) at all times. Such direction may be provided verbally, telephonically, or by written order.

#### **II. NURSING PROCESS:**

##### *Assessment*

Nursing assessment is defined as the collection of data. The LVN may assist in the collection of data during the assessment process. VALIDATION of assessment data, however, must be done by the RN.

The LVN **may** perform and document a basic assessment on assigned patients in emergency and non-emergency situations. A basic assessment is defined as the collection of subjective and objective data and recognition of problems or abnormal conditions specific to the patient. In addition to subjective symptoms reported by the patient, examples of objective data that may be collected by the LVN as part of a basic assessment include:

- ◆ vitals signs, including apical pulse;
- ◆ height and weight;
- ◆ general appearance of the skin and nails (e.g., color, pigmentation, lesions, jaundice, cyanosis, scars, moisture, edema, elasticity, temperature);
- ◆ hair distribution and gross masses or swelling of the scalp;
- ◆ pupil size, shape, symmetry and reaction to light;
- ◆ general appearance of the lips (e.g., observe lips for color, moisture, pigment, gross masses or ulcerations);
- ◆ general appearance of the mouth (e.g., bleeding gums, dental caries, cracked or chipped teeth);
- ◆ general appearance of the eye lids (e.g., scaling, secretions, erythema) and color of the sclera;
- ◆ breath sounds (e.g., rales, wheezes, rhonchi);
- ◆ presence or absence of bowel sounds and abdominal tenderness;
- ◆ gait, posture, curvatures of the spine, range of motion problems;
- ◆ obvious joint injuries or deformities;
- ◆ peripheral pulses (e.g., brachial, radial, dorsalis pedis, posterior tibial);
- ◆ edema of any extremity;
- ◆ involuntary muscular movements.

The LVN **may** perform a psychosocial assessment using active listening, verbal communication, and non-verbal communication to observe and document the patient's

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general mood, general appearance, speech characteristics, orientation to time, place and person, and interaction with others.

The LVN **may not** perform a comprehensive assessment. A comprehensive assessment includes the following:

- ◆ a complete medical history (including chief complaint; history of present illness; past health history; review of systems; family health history; personal/social history; patient profile; laboratory results; **and**
- ◆ a complete medical examination of each system (i.e., integumentary; head, face, and neck; thorax and lungs; breasts; heart; abdomen; extremities and back; genitals and rectum; female genital organs; and neurological and mental exam) using inspection, deep palpation, percussion, and auscultation.

The LVN **may not** perform an emotional assessment based on psychiatric pathology.

### *Triage Assessment*

The LVN **may** perform that part of the triage process that includes interview, observation, the collection of subjective and objective data, and the recognition of problems or abnormal conditions specific to the patient.

The LVN **may not** perform that part of the triage process that includes independent evaluation, interpretation of data, and determination of treatment priorities and levels of care.

The LVN **may not** make a medical or nursing diagnosis.

### *Planning*

A Nursing Care Plan is defined as the development of nursing goals and interventions based upon the patient's present and potential problems.

The LVN **may provide input** on the development of a nursing care plan for assigned patients.

The LVN **may not** assume responsibility for determining nursing interventions for specific patients.

### *Implementation*

Implementation refers to putting the Nursing Care Plan into action.

The LVN **may implement**, under the direction of a physician or the RN, **only those parts of the nursing care plan that are within the licensee's scope of practice.**

If an abnormality is suspected and there are no relevant physician orders for intervention, the LVN **may** complete a basic assessment and report all findings to the physician or RN.

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The LVN **may not independently** determine or initiate a course of action.

### *Evaluation*

Evaluation refers to the assessment of patient outcomes, or the effectiveness of nursing interventions.

The LVN **may assist** in the evaluation of nursing care by collecting subjective and objective data.

The LVN **may not** assume total responsibility for determining the effectiveness of the nursing care provided.

### **III. NURSING PROCEDURES / INTERVENTIONS:**

The LVN **may**, in a genuine emergency, perform lifesaving nursing procedures. Such procedures include basic cardio-pulmonary resuscitation and management of assaultive behavior.

The LVN **may not** perform endotracheal intubation.

The LVN **may not** administer emergency medications intravenously or via endotracheal tube.

Nursing tasks that **may** be performed by the LVN, provided such tasks are authorized by a valid physician's order, include but are not limited to:

- ◆ Application of ace bandages, restraints, postural supports, preformed splints;
- ◆ Assisting the physician;
- ◆ Assisting patients with activities of daily living;
- ◆ Bowel care;
- ◆ Catheterization of the bladder;
- ◆ Cold compress application;
- ◆ Colostomy care;
- ◆ Dressing changes (sterile and non-sterile);
- ◆ Ear irrigation;
- ◆ Electrocardiogram;
- ◆ Finger stick blood glucose testing;
- ◆ Gastrostomy feedings;
- ◆ Harris Flush;
- ◆ Heat application;
- ◆ Ileal conduit care;
- ◆ Insertion of nasogastric tubes;
- ◆ Nasotracheal suctioning;
- ◆ Personal hygiene care;

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- ◆ Specimen collection;
- ◆ Tracheostomy care;
- ◆ Wound irrigation.

The LVN **may** withdraw blood from a patient provided the licensee:

- ◆ has been instructed and has demonstrated competence in the proper procedure to be followed when withdrawing blood; **or**
- ◆ has satisfactorily completed a prescribed course of instruction approved by the Board of Vocational Nurses and the Psychiatric Technician Examiners; and
- ◆ holds post-licensure certification in blood withdrawal.

The LVN **may** remove casts provided the licensee:

- ◆ has received instruction in the proper procedure;
- ◆ has demonstrated the requisite knowledge, skills and ability prior to performance of the procedure;
- ◆ performs the procedure in accordance with a licensed physician's order; and
- ◆ performs the procedure only on casted areas where there is no known incision, suture, clip, staple, skin trauma, or infection.

The LVN **may not** apply casts.

The LVN **may not** cut a window or bivalve a cast, even upon the order of a physician.

The LVN **may** remove sutures, staples, and clips in uncomplicated cases provided the licensee:

- ◆ has received instruction in the proper procedure;
- ◆ has demonstrated the requisite knowledge, skills and ability prior to performance of the procedure; and
- ◆ performs the procedure in accordance with a licensed physician's order.

Uncomplicated cases are defined as those cases which meet the following criteria: The wound is non-infected; the wound does not involve implanted material, drains, or catheters; and the wound does not involve conditions such as skin grafts or radical surgery.

The LVN **may not close a wound** using sutures, staples, or clips.

The LVN **may** administer oxygen to assigned patients in accordance with a valid physician's order. The order must include specific parameters for administration.

The LVN **may not** independently determine that an oxygen deficit exists and proceed to administer oxygen when specific conditions and parameters for oxygen administration are not given by the physician.

### IV. MEDICATION ADMINISTRATION:

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The LVN **may** receive and record verbal orders from physicians to administer medications and/or treatments.

The LVN **may** administer medications via the following routes: oral, intradermal, subcutaneous, sublingual, intramuscular, instillation, suppository, topical, and irrigation.

The LVN **may** perform bladder and eye irrigation, provided the irrigant is specified by the physician, including type of solution and quantity.

The LVN **may not** administer intravenous medications.

The LVN **may not** dispense medications. Dispensing medication is defined as the interpretation of a physician's order for a drug and the proper selection, measuring, packaging, labeling, or in any way filling a prescription for a patient. This includes counting stock medications, placing them in a container with the patient name and issuing the medication to the patient.

The LVN **may** perform tuberculin skin tests, coccidioidin skin tests, and histoplasmin skin tests under the direction of a physician, provided such administration is within the course of a tuberculosis control program.

The LVN **may** administer bronchodilators, mucolytics, steroids, and decongestants via hand-held nebulizer or intermittent positive pressure breathing machine provided the procedure is performed in accordance with a licensed physician's order, **and** the licensee:

- ◆ has received instruction in the proper procedure; and
- ◆ has demonstrated the requisite knowledge, skills and ability prior to performance of the procedure.

### V. INTRAVENOUS THERAPY:

The LVN **may** insert a saline lock intravenous device in a peripheral site and inject sterile normal saline into the tubing provided the following conditions are met:

- ◆ the licensee holds a valid licensure certificate in intravenous therapy;
- ◆ the purpose of instillation is to maintain patency; and
- ◆ the insertion and injection are in accordance with a valid physician's order.

Should a saline lock become occluded, the LVN **may** remove and reinsert a new device.

The LVN **may not** attempt to remove an occlusion by aspiration or other means.

The LVN **may** initiate or superimpose intravenous fluids into a peripheral site and regulate the drip rate per infusion pump provided:

- ◆ the licensee holds a valid post-licensure certificate in intravenous therapy;
- ◆ the infusate is a solution of vitamins, electrolytes, nutrients, blood, or blood products; and
- ◆ the administration of such fluids is in accordance with a valid physician's order.

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The LVN **may not** initiate or superimpose intravenous fluids into a peripheral site if the infusate contains medications.

The LVN **may** assess peripheral insertion sites so that the intravenous infusion is consistent with orders of the supervising physician.

The LVN **may** assess the site so that the area is non-infected. Should signs of infiltration or infection be identified, the LVN **may** discontinue the infusion, reinsert the intravenous line, and continue therapy provided:

- ◆ the licensee holds post-licensure certification in intravenous therapy; and
- ◆ the infusate **does not** contain medications.

Should signs of infiltration or infection be identified, **and the infusate contains medications**, the LVN **may** discontinue the infusion, and reinsert the intravenous line in a new site using an intravenous solution that **does not** contain medications.