

Nursing Scope of Practice

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Questions are frequently posed to the Board of Nursing by Registered Nurses (RNs), Licensed Practical Nurses (LPNs) and Certified Registered Nurse Practitioners (CRNPs) regarding their scope of practice. The Professional Nursing Law, the Practical Nurse Law and the board's regulations do not offer a laundry list of tasks/duties that nurses, with their respective licenses, can or cannot do.

For the **RN** – Section 2(1) of the Professional Nursing Law provides:

“The ‘Practice of Professional Nursing’ means diagnosing and treating human responses to actual or potential health problems through such services as case finding, health teaching, health counseling, and provision of care supportive to or restorative of life and well-being, and executing medical regimens as prescribed by a licensed physician or dentist. The foregoing shall not be deemed to include acts of medical diagnosis or prescription of medical therapeutic or corrective measures, except as performed by a certified registered nurse practitioner acting in accordance with rules and regulations promulgated by the Board.”

For the **LPN** – Section 2(1) of the Practical Nurse Law provides:

“The ‘practice of practical nursing’ means the performance of selected nursing acts in the care of the ill, injured or infirm under the direction of a licensed professional nurse, a licensed physician or a licensed dentist, which do not require the specialized skill, judgment and knowledge required in professional nursing.”

The Board of Nursing cannot pre-approve a specific practice. The following series of questions is intended as a suggested guideline to help you determine

whether a specific practice that you might undertake is consistent with the nursing practice acts and regulations of the board. These guidelines do not constitute legal advice.

For the **RN**:

1. Is the practice permitted or prohibited by the Pennsylvania nurse practice acts or regulations?
2. Does the practice require you to have, and do you in fact have, the specialized nursing knowledge, preparation, experience, skill and competency?
3. Is the practice consistent with the ethical and quality standards embraced by the professional nursing community in the commonwealth?
4. Is the practice contained in standards of practice developed by appropriate nursing associations?
5. Are you prepared to accept full responsibility for your action and be accountable to the client or patient?

RNs should review sections 21.11 (General Functions) and 21.18 (Standards of Nursing Conduct) of the board's regulations and section 14 of the Professional Nursing Law when considering the above questions.

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- [2009 Novel Influenza A \(H1N1\)](#), information from the PA Department of Health

For the **LPN**:

1. Is the practice permitted or prohibited by the Pennsylvania nurse practice acts or regulations?
2. Is the practice one which does not require the specialized skill, judgment and knowledge required in professional nursing?
3. Does the practice require you to have, and do you in fact have, the practical nursing knowledge, preparation, experience, skill and understanding?
4. Is the practice consistent with the ethical and quality standards embraced by the practical nursing community in the commonwealth?
5. Is the practice contained in standards of practice developed by appropriate nursing associations?
6. Are you prepared to accept full responsibility for your action and be accountable to the client or patient?

LPNs should review sections 21.141 (Definitions), 21.145 (Functions of the LPN) and 21.148 (Standards of Nursing Conduct) and sections 2 and 16 of the Practical Nurse Law when considering these questions.

For the **CRNP** :

Sections 8.2 of the Professional Nursing Law sets forth provisions related to CRNP scope of practice. Section 8.2 (a) and (b) provide that a CRNP function within the scope of practice of the particular clinical specialty area in which the nurse is certified by the board and that a certified registered nurse practitioner may perform acts of medical diagnosis in collaboration with a physician and in accordance with regulations promulgated by the board. The onus is on the CRNP to decide if a specific duty or function is within their scope of practice. The board is currently developing regulations related to CRNPs and their practice.

Section 8.3 of the Professional Nursing Law provides requirements for CRNPs seeking prescriptive authority approval from the board. Only CRNPs who have been granted prescriptive authority approval may prescribe drugs. Prescriptive authority approval, like the CRNP certification, must be renewed biennially to be valid.

The Professional and Practical Nurse laws and the rules and regulations are available on the Board of Nursing Web site at www.dos.state.pa.us/nurse.

Act 25 to Strengthen Consumer Protection

On July 17 **Governor Edward G. Rendell** signed Act 25 into law, which is a major legislative accomplishment for the Bureau for Professional and Occupational Affairs and its boards. This law amends Act 48 of 1993 by adding a provision raising the maximum fine the board imposes for violations of the licensing laws or regulations from \$1,000 to \$10,000, as well as authorizing the licensing boards to impose the costs of investigation. Furthermore, the act provides privilege protection to Department of State investigative files, as well as confidentiality requirements.

“BPOA has been working to pass this legislation since 2004,” **Commissioner Basil L. Merenda** said. “This is an important law because the new maximum fine acts as a very strong deterrent to unlawful activity by licensees, which in turn will enable us to more effectively protect the health, safety and welfare of every consumer in the commonwealth.”

Act 25 will affect all 29 boards. The law went into effect Sept. 15. Prosecutors are now able to recommend to the respective licensing board to impose the maximum fine if the violation is egregious.

Future plans for legislation include proposals to create a statutory obligation for a licensee to cooperate with investigators and prosecutors in disciplinary matters and authorizing the boards' authority to expunge a disciplinary history of a license for minor violations such as failure to complete the continuing education requirement.

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