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OPINION: LPN IV CERTIFIED (IV-C) SCOPE OF PRACTICE

APPROVED DATE: October 10, 2013

REVIEWED DATE: December 2018

REVISED DATE: July 2016

ORIGINATING COMMITTEE:

Education Committee

An advisory opinion adopted by WSBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of WSBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training and supervision to assure the safety of their patient population and/or decrease risk.

Within the Scope of Practice/Role of ___APRN ___RN ___X___LPN ___CNA

**ADVISORY OPINION
 LPN IV CERTIFIED (IV-C) SCOPE OF PRACTICE**

Transition to Updated Scope of Practice:

WSBN Rules and Regulations, Ch. 2, Sect 4 (b)(i)(B) will be updated to combine basic and advanced LPN IV certification to one level of infusion therapy certification reflected in this Advisory Opinion.

Effective no later than August 1, 2018, LPNs who wish to administer infusion therapy shall meet one of the following requirements:

- Current WY certification in advanced IV therapy;
- Completion of a Board approved LPN IV-C Course set forth by the Advisory Opinion – *LPN IV Certified (IV-C) Course Requirements*.
- Completion of a course from another state that meets or exceeds curriculum set forth by the Advisory Opinion – *LPN IV Certified (IV-C) Course Requirements*.

LPNs meeting these requirements shall be known as IV Certified (IV-C).

LPNs certified in basic IV therapy must either complete an advanced course or a course offering curriculum set forth by the Advisory Opinion – *LPN IV Certified (IV-C) Course Requirements*.

Introduction:

Infusion therapy encompasses basic and complex skills as well as a high degree of knowledge, critical judgment, and decision making in order to perform the function competently and safely.

Intent of Advisory Opinion:

In accordance with W.S. 33-21-122 (c)(iii) of the Wyoming Nursing Practice Act (NPA), the Wyoming State Board of Nursing (WSBN) has approved the following Advisory Opinion on LPN IV-C Scope of Practice. The purpose of this opinion is to provide criteria to guide the practice of the LPN in the administration and management of infusion therapy for the protection of the consumer.

Scope of Practice:

The role of the LPN in intravenous infusion therapy is determined and assigned by the RN or licensed provider (APRN, physician, physician assistant, or dentist). The assignment of these functions is based upon the judgment of the RN or licensed provider, agency/facility policy, and the standards of practice outlined in this advisory opinion.

The LPN **not** designated as IV-C may engage in a limited scope managing infusion therapy. The basic knowledge and skills listed below are acquired in a state board approved practical nursing program. This scope includes:

- Observe and manage IV fluid administration, which includes, but is not limited to: observing, monitoring, discontinuing, maintaining, regulating, adjusting, and documenting;
- Calculate and maintain flow rate of peripheral vascular device infusions;
- Discontinue peripheral vascular access lines and infusions on adults; and
- Report and document observations and procedures relating to infusion therapy.

With the exception of those aspects of infusion therapy deemed outside the scope of practice, the Administrative Rules and Regulations of the Wyoming State Board of Nursing, Chapter 3, Section 5, authorizes LPNs designated as IV-C to administer and manage infusion therapy when the following are met:

- Institutional policies and procedures allow the LPN to administer infusion therapy;
- The agency/facility assesses and validates competency for each LPN;
- The agency/facility maintains documentation on training and competency for each LPN; and
- The care is provided under the direction of a RN or licensed provider.

Disclaimer: If an activity is not listed in this Advisory Opinion, it does not fall within the LPN infusion therapy scope of practice.

The LPN-IV **shall not** perform the following:

- Administer blood, blood components, plasma, plasma expanders;
- Antineoplastics; autonomic nervous system agents; cardiovascular agents; central nervous system agents; oxytocic agents or radiologic agents;
- Flush or aspirate an arterial line;
- Provide pediatric infusion therapy to individuals under the age of twelve (12);
- Discontinue a pediatric peripheral access device for individuals under the age of five (5);
- Administer experimental drugs;
- Discontinue or remove a central vascular access device (CVAD), “central line” including peripherally inserted central catheter (PICC); or

The LPN who is designated as IV-C may perform the following functions and duties. All infusion therapy must be provided under the direction of a RN or licensed provider.

| The LPN MAY | | Note |
|---|---------------------|--|
| Collect blood samples via: <ul style="list-style-type: none"> - Phlebotomy; - *CVAD including PICC line; and - Dialysis access site (chronic dialysis setting). | Except that: | The LPN <u>shall not</u> collect blood samples from: <ul style="list-style-type: none"> - Individuals under the age of twelve (12); - An arterial line. |
| *Insert a vascular access device, less than three (3) inches in length into a peripheral vein in individuals age twelve (12) years and over. | Except that: | The LPN <u>shall not</u> insert: <ul style="list-style-type: none"> - Peripheral devices in individuals under the age of twelve (12); - Midline catheters; or - CVAD including PICC lines. |
| *Mix, label and administer IV fluids and medications that are not restricted by institutional policies for individuals age twelve (12) years and over. | Except that: | The LPN <u>shall not</u> administer: <ul style="list-style-type: none"> - Cardiac pressor agents; - Neuromuscular blocking agents; - Concentrated electrolytes (i.e. potassium, magnesium sulfate) - Moderate sedation in adults and children; - Minimal sedation in children; - Lipid-based medications; - Heparin; - Insulin; - Albumin; - Conventional counterparts methotrexate for non-oncologic use; - Chemotherapy agents; - Parenteral anticoagulants; - Neuraxial opioids; - Any other IV medication class the RN determines may cause an unsafe reaction/response based on the individual patient and the LPN’s abilities; - IV fluids/medications to individuals under the age of twelve (12); or |
| *Bolus/push antibiotics. | Except that: | The LPN shall not administer the first dose, which shall only be bolused/pushed by the RN who assesses for allergic response. |
| *Monitor blood and blood products infusion. | Except that: | The LPN shall not monitor blood and blood products infusion until the RN has assessed the first hour of the infusion. |
| *Maintain peripheral access device: <ul style="list-style-type: none"> - Change peripheral IV tubing(s) and dressings; and - Maintain patency using a saline or non-therapeutic dose of heparin flush solution. | | |
| *Remove: <ul style="list-style-type: none"> - Peripheral vascular access device for | Except that: | The LPN <u>shall not</u> remove: <ul style="list-style-type: none"> - Peripheral vascular access device for |

| The LPN MAY | | Note |
|---|---------------------|---|
| individuals age five (5) years and over. | | individuals under the age of five. |
| CVAD including PICC lines: <ul style="list-style-type: none"> - *Access a CVAD; - Administer total parenteral nutrition (TPN); - *Mix, label and administer IV fluids and medications that are not restricted by institutional policies for individuals age twelve (12) years and over; and - Provide CVAD care including dressing change, flushing and locking. | Except that: | The LPN <u>shall not</u> administer: <ul style="list-style-type: none"> - Cardiac pressor agents; - Neuromuscular blocking agents; - Concentrated electrolytes (i.e. potassium, magnesium sulfate) - Moderate sedation in adults and children; - Minimal sedation in children; - Lipid-based medications; - Heparin; - Insulin; - Albumin; - Conventional counterparts methotrexate for non-oncologic use; - Chemotherapy agents; - Parenteral anticoagulants; - Neuraxial opioids; - Any other IV medication class the RN determines may cause an unsafe reaction/response based on the individual patient and the LPN's abilities; - Administer IV fluids/medications by CVAD to individuals under the age of twelve (12); or - Discontinue or remove any CVAD including PICC lines. |
| Monitor and collect data from a patient controlled administration (PCA) pump. | Except that: | The LPN <u>shall not</u> : <ul style="list-style-type: none"> - Initiate or discontinue a PCA pump infusion; - Change the settings of a PCA pump; or - Change the cassette or syringe of a PCA pump. |
| Chronic Dialysis Setting for individuals age twelve (12) years and over: <ul style="list-style-type: none"> - Initiate and discontinue dialysis infusions using an established access – including subclavian, internal jugular, femoral vein, fistula and right atrial catheters; - Perform peripheral venipuncture for the purpose of hemodialysis; - Flush tubing of access device and withdraw blood and heparinized saline from the various accesses for the purpose of removing the heparin and establishing patency; - Administer IV medications and solutions during hemodialysis; - Perform dressing changes to various access sites; and - Discontinue peripheral vascular access lines. | Except that: | The LPN <u>shall not</u> : <ul style="list-style-type: none"> - Access dialysis catheters, fistulas or grafts in a non-chronic dialysis setting for any purpose; - Provide dialysis access care/fluids to individuals under the age of twelve (12). |

*Procedures are included in LPN IV-C Course

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