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Owner Victoria Yutko

Policy Area Nursing

Applicability Rees - Sharp

References Policy, SRS,
Scope of

Practice

# Scope of Practice, Licensed Vocational Nurse (LVN), 30114

Origination

8/1/2008

### I. PURPOSE:

The purpose of this document is to clarify tasks and responsibilities that Licensed Vocational Nurses (LVN) can legally perform within their Scope of Practice.

## II. DEFINITIONS:

- A. EHR: Electronic Health Record
- B. **Provider**: Physician (M.D.), Doctor of Osteopathy (D.O.), Podiatrist (D.P.M.), Nurse Practitioner (N.P.), or Physician's Assistant (P.A.)
- C. Triage: The screening and classification of ill or injured patients in order to determine their medical needs.

### III. TEXT:

### A. Scope of Practice:

- 1. LVNs are responsible for knowing their legal scope of practice as defined by the Vocational Nursing Practice Act and as delineated in this policy.
- 2. The LVN is responsible for maintaining clinical competence with regards to these skills and activities expected of an LVN.
- 3. Sharp Rees-Stealy (SRS) will support the LVN's educational needs with regard to new skills or maintenance of skills and knowledge base in any required activity.
- 4. An LVN should not perform an activity when the LVN does not feel clinically competent or questions the legal scope of practice for that activity. Questions should be directed to the LVN's immediate supervisor for clarification.

## B. Scope of Practice related to Procedures and Medication Administration:

- 1. The LVN may assist with exams, invasive procedures, and minor surgeries that are carried out by providers. LVNs taking part in these procedures should not go beyond the skills covered in the LVN Scope of Practice and/or the allowable activities listed in this document (Skills are reviewed at SRS Clinical Staff Orientation and Urgent Care Clinical Orientation and defined by Title 16, Article 5, of *The Vocational Nursing Practice Act with Rules and Regulations* issued by the Board of Vocational Nursing and Psychiatric Technicians, Department of Consumer Affairs, State of California). Some skills listed in this document may be department specific or may require training and/or certification of competency.
- The LVN may perform skilled tasks involving medication administration, basic assessment, some invasive procedures (see section E), IV therapy (with Board of Vocational Nursing and Psychiatric Technician Certification) and wound management under the order of the provider.
- 3. **Verbal Orders:** An LVN may accept and act upon a written, verbal or telephone order from the provider, if the act or order is within the LVN scope of practice. Verbal orders should be limited to emergency situations or when written communication is not possible.

## C. Allowed skills include but may not be limited to:

## 1. Assessment and Message Management:

- a. Taking messages for the triage Registered Nurse (RN) or provider but may not triage. LVNs may perform the part of the triage process that includes observation and data collection. Licensed Vocational Nurses may not perform that part of the triage process that includes independent evaluation, interpretation of data, treatment priorities and levels of care.
- b. Performing physical assessments on patients (e.g. listening to heart tones, lung sounds, noting skin color, etc.).

# 2. Medication Administration (in accordance with SRS Policy and Procedure 43204.99):

- a. Administering ordered medications orally, topically, vaginally, rectally, subcutaneously, intramuscularly and intradermally. Administering prescribed drops to the nose, eye, and ear. Administering premixed allergens based on a written order when the physician is on-site.
- b. Performing allergy skin testing when a physician is on-site during the administration/observations periods.
- c. Performing skin tests (tuberculin and histoplasmin).
- d. Administering anesthetics in the following instances:
  - 1. When the anesthetic is used as a diluent in the reconstitution of powders for intramuscular injections.
  - 2. When administering the anesthetic subcutaneously or intradermally prior to insertion of an IV needle or catheter.

- 3. Administering spray and swish topical anesthetics, including the viscous lidocaine used in "GI cocktails."
- 4. Administering anesthetic eye drops.
- e. Phoning prescriptions to pharmacies after the physician has reviewed, approved and documented them in the EHR.
- f. Counting and logging controlled substances.
- g. Verifying Medical Assistant's (MA) medications before administration against the order entered in the EHR by a provider and documenting their verification in the EHR.
- h. Administering chemotherapeutic agents orally and intramuscularly.
- i. Instilling dimethyl sulfoxide (DMSO) and Bacillus Calmette Guerin (BCG) into the bladder.
- j. Administering Zoladex subcutaneously.
- k. Administering pulmonary treatments with a nebulizer.
- I. Reading back orders to the physician when a verbal order is made. Verbal orders should be limited to emergency situations only.

## D. IV Therapy:

Certification by the Board of Vocational Nursing and Psychiatric Technician approved course is required. The following actions are approved:

- 1. Inserting and discontinuing peripheral IVs.
- 2. Flushing extension tubing through needleless injection caps (saline/heparin locks) with normal saline or heparin solution (heparin lock) in accordance with SHC Policy and Procedures 30608.99 and 30617.99.
- 3. Giving IV fluids containing electrolytes, vitamins and nutrients, except via bolus or push.
- 4. Adding electrolytes/vitamins to bags of IV solutions.

### E. Invasive Procedures:

- 1. Inserting nasogastric tubes.
- 2. Instructing and assisting patients in the application of colostomy appliances.
- 3. Obtaining throat and nasal sinus cultures, and suctioning patients for sputum culture.
- 4. Administering enemas.
- 5. Performing deep endotracheal suctioning.
- 6. Venipunctures, if certification from the LVN Board is obtained.
- 7. Performing urethral catheterizations and bladder irrigations.
- 8. Performing ear lavages. A Provider or Registered Nurse (RN) must visualize the ear canal before and after the procedure.

a. RN may assess the tympanic membrane before and after an ear lavage is performed by a LVN.

## F. Wound Management:

- 1. Removing sutures or staples.
- 2. Applying basic and complex dressings.
- 3. Applying warm or cold compresses.
- 4. Applying Unna boots.

## G. Other Skills and Therapies Within The Scope of Practice include, but are not limited to:

- 1. Operating under standing orders if the physician has made the order specific to the individual patient.
- 2. Teaching patients laboratory and radiology preparations, exercise, hygiene, medication and dietary information, per physician instructions.
- 3. Relaying written or verbal instruction or information from physicians regarding abnormal test results to patients after they are reviewed by the physician.
- 4. Administering oxygen therapies per masks or cannulas, as prescribed.
- 5. Placing leads and running ECGs.
- 6. Applying Holter Monitors and Treadmill hook-ups.
- 7. Cutting toenails on non-diabetic patients.
- 8. Measuring for crutches and crutch teaching.
- 9. Applying and removing pre-formed orthopedic immobilizers, such as splints, slings and knee immobilizers.
- 10. Removing casts only on casted areas where there is not an incision, sutures, clips, staples, skin, trauma or infection.
- 11. Performing eye irrigations.
- 12. Inserting and removing contact lenses, except Morgan lenses.
- 13. Performing tonometries.
- 14. Performing visual acuities, visual field screenings, audiometry and tympanometry.
- 15. Performing urine dipstick urinalysis and urine pregnancy tests.
- 16. Reading and interpreting Mantoux (tuberculin) skin tests compared to a written or visual standard.
- 17. When receiving telephone orders from a physician, an LVN is required to read back the order to the originating physician.
- 18. Perform Percutaneous Tibial Nerve Stimulation (PTNS): The LVN is required to be trained by the Vendor initially for the Percutaneous Tibial Nerve Stimulation procedure, and obtain a passing grade on the annual PTNS competency. Ongoing competency to be managed on site by competency validator. Proof of competency validation to be kept in performing department.

- 19. If there is a departmental need, performing:
  - a. Booth audiometry when certified by the Council for Accreditation in Occupational Hearing Conservation CAOHC. Certificate of Training to be kept in performing department.
  - b. Pulmonary Function Tests after successfully completing on site training. Proof of training to be kept in performing department.
  - Breath Alcohol Testing when certified by an Accredited Educator and/or continuing Education Course for the Occupational Health Professional.
     Certificate of Training to be kept in performing department.
  - d. Urine Drug Screen Testing (forensic and non-forensic) when certified by an Accredited Educator and /or Continuing Education course for Occupational Health Professional. Certificate of Training to be kept in performing department.
  - e. Hair Collection testing when certified by an Accredited Educator and /or Continuing Education Course for the Occupational Health Professional. Certificate of Training to be kept in performing department.
- 20. Removal of drains, which include Jackson Pratt drains and Penrose drains, as long as the LVN has a written order, has received training and has demonstrated competency to perform the procedure.
- 21. Insertion of lidocaine into the urethra at the commencement of a catheterization, as long as the LVN has a written order, has received training and has demonstrated competency to perform the procedure.
- 22. Licensed Vocational Nurses (LVN) working in SRS UC Centers may follow orders to perform Point of Care (POC) tests and ECGs delegated by a competency validated RN who is functioning under a Standardized Procedure (SP). The RN must ensure the patient's clinical presentation meets criteria for the SP and document the order and criteria that were met in the electronic health record (EHR).
- 23. With a provider order, may instruct patients how to self-administer intramuscular (IM) and subcutaneous (SQ) injections (e.g. insulin, enoxaparin).

## H. Activities which are **NOT** allowed at SRS include, but are not limited to:

- a. Assessment and Message Management:
  - 1. Triaging patients.
  - 2. Interpreting test results for patients.
- b. Medication Administration:
  - 1. Preparing medications for administration by other health care professionals including physicians.
- c. IV Therapy:
  - 1. Administering IV fluids via a central line.
  - 2. Giving any IV fluid via syringe bolus or push.

- 3. Titrating or administering IV medications.
- 4. Accessing or de-accessing an implanted venous port.
- 5. Accessing peripherally inserted central catheters or midline catheters.
- 6. Flushing of peripheral venous tubing connected to primary or secondary containers while the line is connected to the patient.
- 7. Chemotherapy.

## d. Invasive Procedures:

- 1. Performing gastric lavages.
- 2. Inserting central lines.
- 3. Performing sclerotherapies.
- 4. Suturing.

## e. Wound Management:

- 1. Debriding wounds, except wet to dry dressings.
- 2. Using hypodermic needles to drain or inject decubitus ulcers or pressure wounds.
- 3. Using sharp instruments, such as scissors and scalpels, to incise and debride necrotic tissue.
- f. Other Skills and Procedures **not** within the LVN Scope of Practice:
  - 1. Applying casts.
  - 2. Applying splints that must be formed (e.g. fiberglass, aluminum finger splints)
  - 3. Inserting or removing Morgan lenses.
  - 4. Administering physical therapy modalities.
  - 5. Working under non-patient specific standardized procedures.
  - 6. Applying liquid nitrogen to the skin using a nitro pen.
  - 7. Chemical Peels.
  - 8. Administering laser or ultra-violet lights for skin care, skin cell treatment, or other skin related issues or treatments.
  - Performing foot care on patients with the following conditions: diabetes, pre-diabetes, peripheral vascular disease, toenail fungus or peripheral neuropathy.

### **IV. REFERENCES:**

- A. Read by Ann Shuman, Supervising Nursing Education Consultant, BVNPT, 4/24/08, 12/20/11
- B. Brooks, J. Board of Vocational Nursing and Psychiatric Technicians. *Vocational Nursing Practice Act with Rules and Regulations: Includes amendments through July 31, 2015.*

C. Business and Professions Code sections 2069, 2860.5

Note: Nothing in these regulations shall be construed to modify the requirement that a licensed physician or podiatrist be physically present in the treatment facility as required in Section 2069 of the code.

## V. ORIGINATOR:

SRS Nursing P&P Committee

## VI. ACCREDITATION

- A. Accreditation Association for Ambulatory Health Care (AAAHC)
  - 1. 4(A) and 4(C)(1)(a)

## VII. LEGAL REFERENCES:

Board of Vocational Nursing and Psychiatric Technicians Title 16, Article 5

## **VIII. CROSS REFERENCES:**

- A. Sharp Healthcare P&P <u>30608.99</u>: IV Therapy: Peripheral IV Insertion, Assessment, Maintenance and Removal
- B. Sharp Healthcare P&P <u>30617.99</u>: IV Therapy: Vascular Access Devices: Adult Flushing Procedure
- C. SRS P&P <u>43204.99</u>: Medication Administration and Documentation of Medication Administration (at SRS)

## IX. ATTACHMENTS:

None

## X. APPROVALS:

## A. Ongoing

- A. SRS Nursing Policy and Procedure Committee: 05/08, 07/11, 02/19, 11/19, 06/21, 8/22
- B. SRS Policy and Procedure Committee: 07/08, 11/19, 07/21, 08/22
- C. Patient Care Managers (PCM): 11/19, 07/21, 8/22
- D. Patient Care Directors (PCD): 07/21, 8/22

### B. Historic

A. SRS Director of Urgent Care, Training and Education, Special Projects, Infection Control: 7/ 11, 01/12

B. SRS Patient Care Leadership Team: 05/08

C. SRS Patient Care Managers: 04/16

D. SRS VP Health Services: 11/19

E. SRS Director of Nursing: 07/11; 01/12, 6/2013, 12/13, 04/16

F. SRS Chief Clinical Operations Officer: 11/19

G. SRS Director of Surgical Specialty Care: 11/20

H. SRS ENT Department Chair: 11/20

I. SHC Policy and Procedure Steering Committee: 08/08, 09/11

## XI. REPLACES:

A. SRS Policy #0004, 04/86. Revised 04/05

## XII. HISTORY:

System #30114; originally dtd 08/08

Reviewed/Revised: 09/11; 01/12; 04/16; 02/19; 11/19; 03/20

## **Approval Signatures**

Step Description	Approver	Date
Site Admin	Karen Whitten: Policy & Procedure Coord	8/18/2022
Regulatory	Anais Beltran: Regulatory Comp Coord-SRS	8/17/2022
Editor	Victoria Yutko: Prgm Mgr- Training & Edu-SRS	8/15/2022
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