STATEMENT ON SUPERVISION OF LVNs IN DIALYSIS SETTINGS

Background
The Board of Registered Nursing (BRN) has received inquiries from nursing organizations and individual nurses about the legal scope of practice for an RN who may be asked to: delegate to the LVN patient assessment for the purpose of determining a treatment; delegate to the LVN intravenous medication administration as the treatment; and direct the LVN to administer intravenous medication through a central line. These questions have arisen in part due to practices at free standing dialysis facilities.

Business and Profession Code, Section 2725, Nursing Practice Act, authorizes registered nurses to assess patients, determine abnormality, implement a medical treatment plan, refer, report, or implement a standardized procedure, and administer medication by all routes. California Code of Regulations 1443.5 (4) states that the RN delegates tasks to subordinates based on the legal scope of practice of the subordinates and on the preparation and capability needed in the tasks to be delegated, and effectively supervises nursing care being given by subordinates.

Interpretation
The BRN’s interpretation of law governing the practice of registered nursing is that the RN function of assessment to determine abnormality, determine the appropriate treatment, and implement a treatment for the abnormality such as administration of an intravenous medication for a hemodialysis patient cannot be delegated by the RN to the LVN. The RN is not authorized under the Nursing Practice Act to delegate or supervise the LVN administering intravenous medication. The BRN continues to interpret the law that RNs can delegate and supervise Intravenous Therapy certified LVNs in accord with Business and Professions Code, Section 2860.5 and California Code of Regulations, Article 8, Section 2542, which gives certified LVNs the authority to superimpose intravenous solutions of electrolytes, nutrients, vitamins, blood and blood products.