

NEVADA STATE BOARD OF NURSING
Practice Decision Regarding Administration of Prostaglandin Products

Opinion Question:

What is the role of the RN in the administration of prostaglandin products in the case of fetal anomaly or congenital abnormality?

Recommendation:

Administration of prostaglandin or other cervical ripening agents in the case of fetal anomaly or congenital abnormality must be specified as an advanced scope of practice, and only performed following the completion of didactic and clinical training. *The RN (in collaboration with the facility policy, procedure and process for dealing with ethical decision making) has an obligation to be knowledgeable about the moral, ethical and legal rights of all patients and to protect and support those rights. When Registered Nurses are involved in ethical issues, mechanisms in the individual facility must be in place to assist them in ethical decision making so that they can continue to provide competent nursing care.*

This procedure can be performed in the obstetrical department, labor & delivery unit or relevant department as determined by the facility and staffed by qualified Registered Nurses. Appropriate policy and procedure should be developed and implemented in each facility following the recognized process specific to each facility.

Consumer Safety:

With training and competencies in place as outlined in the practice question related to the administration of prostaglandin products or other cervical ripening agents in term pregnancy or in the case of fetal demise, the RN will be qualified to perform this skill. (All guidelines as previously approved by Board for administration of prostaglandin agents must be met – see NRS 632.475)

Public Interest:

In each individual case, the patient or client has the right to determine what will be done with his or her own person. The patient should be given accurate information, and all the information necessary for making informed judgements; to be assisted with weighing the benefits and burdens of options in the treatment or intervention they choose without coercion and to be given necessary emotional support.

Practitioner Safety:

Only Registered Nurses with the appropriate didactic and clinical training in collaboration with the facility policies and procedural support may participate in the administration of prostaglandin or cervical ripening agents in cases where there is identified fetal anomaly or congenital abnormality. The didactic portion of the education program must include anatomy, physiology, pharmacological influences, assessment, monitoring, contraindications and interventions related to the administration of these products. (See NRS 632.475)

Competency Mechanisms:

The process for measurement of initial and continued competency must be the same as the process outlined in the practice of administration of cervical ripening agents in term pregnancy or in the case of fetal demise.

Current Trends and National Standards:

See practice question regarding the administration of prostaglandin or other cervical ripening agent in term pregnancy or in the case of fetal demise - approved by the Board on September 11, 1997.

Literature Review:

1. Moore, S.M. (1996) Couples' Evaluation of Foreknowledge of Fetal Impairment. *Clinical Nursing Research*, 5 (1), 81-96.
2. Blumberg, L. (1994). The Politics of Prenatal Testing and Selective Abortion. *Sexuality and Disability*, 12 (2). 135-152
3. Hamblet, J.L. (1994). Ethics and the Pediatric Perioperative Nurse. *Today's O.R. Nurse*, 16 (2), 15-21
4. American Nurses Publishing (1985) A.N.A Code for Nurses with Interpretive Statements
5. Zeanah, C.H., Dailey, J.V., Rosenblatt, M. J., and Saller, D.N. (1993) Do Women Grieve After Terminating Pregnancies Because of Fetal Anomalies? A Controlled Investigation. *Obstetrics & Gynecology*, 82 (2) Aug. 270-275.

Standardization Procedures:

See practice question regarding the administration of prostaglandin or other cervical ripening agent in term pregnancy or in the case of fetal demise - approved by the Board on September 11, 1997.

Impact: Fiscal/Manpower:

There is no apparent fiscal impact. The impact on the Registered Nurse providing care for the patient under these circumstances would include emotional, ethical and moral considerations that should be addressed prior to the episode of care.

Scope of practice affected:

The qualified Registered Nurse will work as a team member with the attending physician. Within the scope of qualified Registered Nurses and Advanced Practitioner Nurses; this is not within the scope of a LPN.

Applications to Past Decisions: Interface with NRS 632.475

Currently, qualified nurses in the State of Nevada may:

1. Administer prostaglandin or other cervical ripening agents in term pregnancy (36 weeks or greater) and;
2. Administer prostaglandin or other cervical ripening agents in the case of fetal demise.

Prepared by Kelly DeMaria RN, MSN 3/18/99

Approved by the Nursing Practice Advisory Committee 3/24/99

Adopted by the Nevada State Board of Nursing 5/14/99