

**NEVADA STATE BOARD OF NURSING  
PRACTICE DECISION**

**QUESTION:**

Is it within the scope of practice of a Registered Nurse to administer prostaglandin or other cervical ripening agents in term pregnancy prior to labor induction?

**HISTORY:**

The question was formally posed to the Practice Committee by University Medical Center in April, 1997. The Practice Committee reviewed the proposal at the regularly scheduled meetings in May and July, 1997. A survey was conducted of all nursing boards as to the standard across the country. Twenty three percent of the jurisdictions responded. Fourteen states do allow this practice for a Registered Nurse.

**RECOMMENDATION:**

The committee unanimously recommends that a Registered Nurse may administer prostaglandin or other cervical ripening agents in term pregnancy (37 complete weeks) prior to labor induction, if the following guidelines have been met:

1. The RN has been educated and is competent in the pharmacology, physiology, assessment, monitoring contraindications, and interventions related to the administration of these products, including advanced fetal monitoring. The instruction must include a didactic portion and a clinical portion.
2. The RN is competent to perform the procedure and has the documented and demonstrated knowledge, skill, and ability to perform the procedure pursuant to NAC 632.071, 632.224, and 632.225.
3. There are agency policies and procedures in place for the nurse to perform the procedure.
4. Critical care facilities and OB coverage must be available 24 hours per day at the site of the procedure.
5. The RN must have document competence in advanced fetal monitoring.
6. The RN may not simultaneously administer agents such as oxytocin and prostaglandin.
7. If there are contraindications, the medications must be administered by the physician or other attending practitioner.
8. Administration must be a direct medical order, not part of a standing order or protocol.
9. The nurse maintains accountability and responsibility for nursing care related to the procedure and follows the accepted standard of care that would be provided by a reasonable and prudent nurse.
10. This practice is not within the scope of an LPN.

Approved by the Board on September 11, 1997

Revised by the Nurse Practice Advisory Committee: 2/10/09

Approved by the Board: July 16, 2009