

# NEVADA STATE BOARD OF NURSING

## Practice Decision

### The role of the RN in removing chest tubes

As previously decided by the board, it is within the scope of the RN to remove mediastinal drainage tubes. This practice decision will add the removal of small bore chest tubes (up to 14 fr.). This is considering it is within the facility policy and the following criteria have been met.

1. There is an order for removal from the attending licensed healthcare provider.
2. The RN has demonstrated competencies set forth by the facility.
3. The RN has the required certification i.e. Advanced Cardiac Life Support, Pediatric Advanced Life Support.
4. The patient will be monitored for a set amount of time as determined by the attending licensed healthcare provider who ordered the chest tube removal.

#### Reference

Lee, G. (2018). Procedure Manual for High Acuity, Progressive and Critical Care, Edited by Debra L. Wiegand, 7th Edition, Elsevier, eBook ISBN: 9780323376631, eBook ISBN: 9780323376662, Paperback ISBN: 9780323376624. *International Emergency Nursing*, 38, 60. <https://doi.org/10.1016/j.ienj.2018.01.003>

Hood, B. S., Henderson, W., & Pasero, C. (2014). Chest Tube Removal: An Expanded Role for the Bedside Nurse. *Journal of PeriAnesthesia Nursing*, 29(1), 53–59. <https://doi.org/10.1016/j.jopan.2013.11.001>