Chemical Dependency in Nurses and CNAs

Under Nevada law, nurses and CNAs must report potential violations of the Nurse Practice Act. Practicing while impaired is a violation of NRS 632.320 (1)(e) and NAC 632.890 (9).

Chemical dependency is one cause of impairment. The Board’s Disability Advisory Committee has put together this fact sheet to help you identify impairment on the job. If you suspect someone is impaired, urge the individual to seek help. If they refuse, report your suspicions to your supervisors. It may be a difficult decision, but if you do not make it, you will be endangering the health of the patients and the impaired nurse or CNA.

Possible indications of nurse or CNA impairment on the job include:

- Absent or late for work, especially following several days off. However, the drug-addicted nurse or CNA may never be absent and may “hang around” when not on duty. Because the hospital is the source of supply, the nurse or CNA may volunteer to work double shifts, overtime, holidays, days off, etc.
- Odor of alcohol on the breath. Any nurse or CNA who would report for duty after drinking is assuming a terrible risk and in doing so is evidencing his/her loss of control and need for the drug.
- Odor of mouthwash and breath mints. These may be used to mask the odor of alcohol.
- Fine tremors of the hands. This symptom occurs with withdrawal from the drug. The alcoholic nurse or CNA will sometimes begin to use tranquilizers to mask signs of withdrawal and thus may develop cross dependency.
- Emotional instability. The nurse or CNA may change from being irritable and tense to being mellow and calm. There may be inappropriate anger or crying.
- Returns late from lunch break.
- Unable to locate the nurse for long periods of time during their shift.
- May be sleepy or may doze off while on duty.
- Shuns interaction with others and tends to withdraw.
- Makes frequent trips to the bathroom. Perhaps just after accessing the Pyxis. The nurse or CNA may take their purse, backpack or medical supplies, such as IV start kits, syringes, etc., with them to the bathroom.
- Deterioration in personal appearance.
- Frequent bruises or cigarette burns. Bruises over antecubital fossa and on wrists or hands. These injuries are the result of crashing into furniture, falling while intoxicated, dozing off with a lighted cigarette, or the recent injection of a drug.
- Job performance may be affected with sloppy or illegible handwriting, errors in charting, and errors in patient care.
- Lapses in memory or confusion. There may be euphoric recall of events.
- Shunning of job assignment or job shrinkage. The nurse or CNA is apt to drop out of professional activities.
The nurse who is diverting drugs from the unit may:

- always volunteer to give medications
- medicate another nurse’s patients without the assigned nurse’s knowledge
- use the maximum PRN dosage when other nurses use less, or the maximum PRN dosage may always be used on his/her shift but not on another (the PRN medications afford the greatest opportunity for the nurse to supply his/her habit)
- administers IV medications when the patient receives oral medications during previous and subsequent shifts
- removes controlled substances at the beginning of their shift
- removes controlled substances before and/or after their shift
- removes controlled substances for a patient who does not have an order for the medication or who is no longer admitted to the unit
- have responsibility for patients who complain that medication given on his/her shift is not as effective as on others, or that they did not receive medication when the record shows they did
- have frequent wastage, such as spillage of drugs or drawing blood in the syringe
- wastes an entire vial of medication
- asks another nurse to witness a waste that the witness does not actually see the nurse waste
- frequently overrides the Pyxis
- work on a unit where drugs are disappearing or seals have been tampered with
- always offer to count narcotics to make sure the count is correct
- have pinpoint pupils, shaky hands, could be sleepy or hyper while on duty

Keep in mind that no indicator, or group of indicators, is unique to chemical dependency.

However, if there is a drop off in the work performance of a previously good employee, the supervisor should consider the possibility of a problem if several indicators are present.