NEVADA STATE BOARD OF NURSING
Practice Decision
The Role of the RN/LPN with Respirator/Ventilator

It is within the scope of the RN/LPN to provide care to the patient with invasive mechanical respirator/ventilation. This is considering it is within the facility policy and the following criteria have been met.

The criteria for RN/LPN (Nurse) competencies and responsibilities of care include:

1. The nurse has demonstrated competency set forth by the facility policy and in accordance with NAC 632.225 for RNs and NAC 632.242 for LPNs.
    - LPNs must defer any variations or issues with patency or placement to the overseeing RN, RT, or provider for assessment, guidance, and management.

2. Provision of ordered treatments and administration of medication that does not require manipulation of the mechanical of a artificial airway or mechanical ventilator in both places.
3. Provision of hygiene and comfort care.
4. Provision of patient and family education.
5. When a patient has been determined to be brain dead and pronounced dead by a physician, the nurse with a provider order may remove the respirator/ventilator.
6. The nurse may, under the provisions of NAC 632.220, refuse to remove the respirator/ventilator for medical, ethical, or moral reasons.

Responsibilities of care specific to LPN scope of practice:

1. The LPN is **not** responsible for ensuring the security of the artificial airway and related functionality of the ventilator before, during, and after transport. The LPN can participate as part of the team and provide the cares identified in sections one through six of this document.
2. The LPN performing the procedure conforms with the requirements set forth in NAC632.242, NAC632.230, and NAC 632.234(1).

References

Board of Vocational Nursing and Psychiatric Technicians: Board Meeting on December 9, 2022. Discussion and Possible Action to Consider Submittal of modified proposed test as public comment to the Respiratory Care Board: Title16, California Code of Regulations section 1399.365, Basic Respiratory Tasks and Services.

Respiratory Care Board of California and Board of Vocational and Psychiatric Technicians Joint Statement April 2019

www.rcb.ca.gov & www.bvnpt.ca.gov

NEVADA STATE BOARD OF NURSING
Practice Decision
Role of the LPN in Hemodialysis

The Nevada State Board of Nursing finds that it is within the scope of practice of a Licensed Practical Nurse (LPN) who is educationally prepared and properly trained per NAC 632.242 and NAC 632.450 to perform skills outlined herein for hemodialysis.

Participation in the administration of hemodialysis is limited to chronic hemodialysis in an inpatient and/ or outpatient setting, excluding self-care, home dialysis, and peritoneal dialysis.

The educationally prepared and appropriately trained LPN may initiate, administer, and discontinue hemodialysis provided the following requirements are met:

1. Function under the supervision of a Licensed Independent Practitioner (LIP) or RN trained in dialysis, physically present in the facility, and responsible for the supervision of the LPN at all times pursuant to NAC 449.5435.
2. Possess and retain current IV certification.
3. Complete training and document proficiency in the tasks and skills being performed in accordance with NAC 632.242 and NAC 632.450 including:
    a. Administration of a local anesthetic for analgesic purposes when initiating dialysis at the access site pursuant to the provisions of NAC 449.5435.
    b. Administration of heparin associated with routine dialysis and catheter maintenance.
    c. Administration of normal saline and dialysis solutions
4. Follow clinical practice guidelines from the American Nephrology Nurses Association for hemodialysis addressing the knowledge and skills for completing proper assessment, procedures and documentation.
5. Follow applicable written policies and procedures approved by the employer/agency in accordance with the following:
    a. NAC 449.541
    b. NAC 449.5415
    c. NAC 449.5435.

References:

American Nephrology Nurses Association Garbin, M.G., & Chmielewski, C. (2013). Job analysis and role delineation: LPN/LVNs and hemodialysis technicians. Nephrology Nursing

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NEVADA STATE BOARD OF NURSING
Practice Decision
The Role of the LPN with Regard to Suprapubic Catheter Replacement

The Nevada State Board of Nursing finds that it is within the scope of practice of a Licensed Practical Nurse (LPN) who is educationally prepared and properly trained per NAC 632.232 and NAC 632.242 to replace a suprapubic catheter, collect data, and perform a focused assessment of the stoma site and tract, subject to the following regulatory parameters:

- **Clinical Maturation Window:** The suprapubic catheter replacement applies strictly to a well-healed, established pathway and must occur no less than four (4) weeks after initial surgical placement.
- **Focused Assessment Parameters:** The focused assessment performed by the LPN applies strictly to the documentation and evaluation of:
    - Stoma location and tract condition
    - Surrounding abnormal skin appearance
    - Device dimensions (catheter size and balloon volume)
    - Timing of initial surgical placement
    - Interpreting and reporting clinical findings to the supervising provider.

The educationally prepared and properly trained LPN must:

- Complete a comprehensive program of study with the Society of Urologic Nurses and Associates' Clinical Practice Guidelines addressing the knowledge and skills for completing proper storage, preparation, insertion, assessment, and documentation related to suprapubic catheter replacement.

- Follow applicable written procedures and policies approved by medical staff and the nursing administration of the employment agency.

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