

Registered Nurse (RN) Prescribing Practice Guidelines

2022



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The College of Registered Nurses of Newfoundland and Labrador (CRNNL)¹ is the regulatory body for Registered Nurses (RNs) and Nurse Practitioners (NPs) in the province. The mandate of the College is to protect the public through self-regulation of the nursing profession in accordance with the *Registered Nurses Act (2008)* and *Registered Nurses Regulations (2013)*.

This document articulates the practice expectations for RN prescribers. An RN prescriber refers to an RN who has obtained the required **education**, **authorization**, and **competence** to add RN prescribing to their individual scope of practice as authorized by the College.

RN prescribing involves using the nursing process to:

- assess individuals within an employer sponsored area(s) of need, whom have conditions and require nursing care within the RN's competence and authorization to prescribe
- establish a plan of care which may include:
 - prescribing medications, ordering laboratory and diagnostic screening tests (including but not limited to ultrasound, x-ray, CT, etc.)
 - and/or other non-pharmacological interventions, and making referrals within the parameters outlined by the employer sponsor
- provide nursing care and services

This document should be used in conjunction with applicable federal and provincial Acts and Regulations, the College's **RN Prescribing Framework** and other relevant College documents/resources, employer/organization policies, and evidence-informed best practices. As self-regulated professionals, RNs are responsible and accountable to know their practice expectations and to practise in accordance with the current *Standards of Practice for Registered Nurses and Nurse Practitioners*, *Scope of Practice Framework*², and Code of Ethics.

The practice expectations for RN prescribing include legislative and regulatory expectations, practice setting expectations (e.g., assessment, orders and prescriptions, documentation, judgement and critical thinking, evaluation, and collaborative teams) and public expectations for client/person centered care.

Legislative and Regulatory Expectations

The RN who is authorized to prescribe:

- acts in a professional manner, is accountable for individual practice, and maintains competence (knowledge, skill, and judgment) in all aspects of nursing practice including prescribing (legislation, regulatory, employer, client-consent)
- orders laboratory and diagnostic tests, and other nonpharmacological interventions, and prescribes medication(s) and as per employer sponsor and College authorization and in accordance with an applicable guidance document

¹Herein referred to as the College.

²Refer to the most recent version of the Scope of Practice Framework for explanations/definitions of scope of practice, authorization, education, and competence, competencies, practice as a RN and practice as an NP.

- understands the limits of their practice, and only performs those services for which they are authorized and competent to perform, and otherwise consults with other providers as needed (e.g., making a referral to another health care professional/allied health)
- understands the scope of practice of the RN authorized to prescribe and how it differs from that of a NP and other authorized prescribers
- is competent in the assessment and treatment of the condition(s) and symptoms relevant to the specific practice area or client population according to employer authorization
- orders laboratory and diagnostic tests³, and other nonpharmacological interventions, makes referrals, and prescribes medications for clients for which they have a therapeutic relationship
- maintains competence in ordering laboratory and diagnostic tests, and other nonpharmacological interventions, referrals, and prescribing medications as per College and employer sponsor authorizations
- will only order laboratory and diagnostic tests, and other nonpharmacological interventions, make referral, and prescribe medications for family members, and others close to them (e.g., personal relationship) if the prescribing decision is specific to the clinical practice area/client population where they have been authorized, and
 - there is no other authorized prescriber available, and
 - the nurse has taken reasonable steps to transfer the care and transfer of care occurs at the earliest opportunity
- engages in evidence-informed and best practices in prescribing, monitoring, and dispensing drugs according to employer sponsor authorization and guidance document
- ensures that the collection, use, and disclosure of client health information is done in accordance with applicable legislation (e.g., PHIA), regulations, standards, and employer/organization policies
- participates in mandatory and relevant provincial and/or national reporting programs, such as, but not limited to, the Canadian Vigilance Program for adverse drug events
- checks the client's current medication profile in HealtheNL viewer before prescribing
- practices cultural humility and safety in prescribing decisions, such as:
 - engaging with the client with the intent of establishing a trusting relationship, using a relational, respectful demeanor
 - listening to the client and family (i.e., person-centred approach)
 - recognizing and incorporating cultural wisdom and practices
 - assessing the client's knowledge and community support systems
- dispenses and/or prescribes in accordance with a guidance document as per provincial, territorial, and/or federal standards, legislative requirements, and employer authorization

³Diagnostic screen tests include forms of energy, including but not limited to ultrasound, x-ray, computerized tomography, etc.

Limitations

Will not prescribe outside the parameters of the College's and employer sponsor authorization.

Will not prescribe for themselves.

Will not prescribe for family members, and others close to them (e.g., personal relationship) EXCEPT if the prescribing decision is specific to the clinical practice area where they have been authorized, and there is no other authorized prescriber available, and the nurse has taken reasonable steps to transfer the care and transfer of care occurs at the earliest opportunity.

Will not prescribe if self-employed (e.g., independent, contract, or private practice).

Will not prescribe any medication regulated by the *Controlled Drugs and Substances Act* (CDSA) and related regulations, unless receiving specific authorization from the employer sponsor and College.

Will not prescribe medications for study protocols.

Will not accept or distribute medication samples from pharmaceutical companies.

Practice Setting Expectations

The RN who is authorized to prescribe:

Assessment:

- applies knowledge of the etiology, pathophysiology, risk factors, predisposing factors, clinical manifestations, communicability, complications, diagnostic findings, epidemiology, evidence-informed research, diagnosis, and management of the medical conditions specific to the area of employer sponsor authorization
- makes prescribing decisions based on a form of assessment of the client as appropriate and as determined by the employer and outlined in a guidance document
- confirms health condition as authorized by employer sponsor and in accordance with the guidance document

Orders and Prescriptions:

- orders diagnostic or laboratory tests, and other nonpharmacological interventions as authorized by the employer sponsor and in accordance with the guidance document
- prescribes only to clients with health conditions as per employer authorization and for which they have the required individual competence
- ensures that prescription and/or orders are accurate, complete, and legible

Documentation:

The RN who is authorized to prescribe clearly documents the prescribing decisions made in accordance with the guidance document and employer sponsor. This includes but is not limited to:

- the decision and the rationale for prescribing decisions
- reference to the laboratory and diagnostic screening tests, and other nonpharmacological interventions and the prescribing decision
- any communications with other members of the client's health-care collaborative team
- any consultation, referrals, or transfers related to the prescribing decision and plan of care
- client education

Judgment and Critical Thinking:

- uses clinical judgment and critical thinking to decide if the medication(s) and the laboratory and diagnostic screening test(s), or nonpharmacological interventions outlined in the guidance document are appropriate for the client in the specific situation
- selects the appropriate treatment regimen from the guidance document
- assumes responsibility for interpretation of laboratory or diagnostic screening tests relevant to the client's condition
- is accountable for follow-up of laboratory and diagnostic screening test(s) that were ordered, as outlined in the guidance document
- integrates client information and evidence-informed practice and develops and implements the appropriate care plan in consultation with the client, family, and other health care professionals (e.g., referrals)
- synthesizes relevant knowledge and findings from laboratory or diagnostic tests to contribute to the plan of care through the prescription of medication(s) and/or device(s)
- attains, maintains, and demonstrates competence relevant to the identified client's health conditions as well as the medications and associated laboratory and diagnostic screening tests for the health conditions
- uses evidence-informed practice for appropriateness, safety and cost-effectiveness when ordering laboratory and diagnostic screening tests, and other nonpharmacological interventions, to support prescribing decisions

Evaluation:

- recognizes adverse effects of pharmacological or nonpharmacological treatment
- takes appropriate action to manage adverse effects
- transfers care to other health-care professionals authorized to make prescribing decisions and orders laboratory and diagnostic screening tests for clients outside their individual competence or employer sponsor authorization

Collaborative Teams

- understands the scope and roles of other health care team members as they relate to collaboration and consultation
- coordinates and facilitates client care, as well as ensuring continuity of care and communication with other health care providers, agencies, and community resources
- works collaboratively as part of a health care collaborative team with access to a physician, NP, and other health care providers as appropriate (e.g., pharmacists, dentists, social workers, etc.)
- seeks consultation with, and/or guidance from, a physician or NP to ensure client's needs are met in a timely manner:
 - when the care required for the client is beyond individual scope of practice
 - when they must deviate from the guidance document for treatment; or
 - when the client's condition deteriorates, or symptoms persist despite treatment

Public Expectations

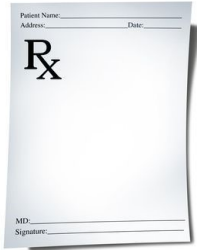
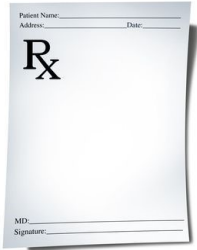
Client/Person Centred Care:

The RN who is authorized to prescribe:

- prescribes in the best interest of the client without influence from factors that may place the RN in a conflict of interest (actual, potential, or perceived) such as, but not limited to financial support by pharmaceutical companies, marketing incentives, or self interests
- respects the client's right to privacy and confidentiality and collects, uses, and discloses prescribing decisions and findings from laboratory and diagnostic tests only when it is pertinent to the care being provided (i.e., within the circle of care)
- communicates with the client about health assessment findings and prescribing decisions
- supports clients to make informed decisions and to follow recommended medication regimes by discussion with the client: rationale, implications, expected risks and outcomes, administration instructions, side effects, risks, and benefits

Appendix A: What are the differences between Registered Nurses prescribers and Nurse Practitioners?

Registered Nurses (RNs) and Nurse Practitioners (NPs) are both registered nurses who have completed different levels of education and perform different roles in meeting client's health care needs. The College regulates both roles and has produced this infographic to clearly show how the two roles differ.

RN	NP
	
Has an expanded scope of practice to include prescriptive authority	Has a licence to practice as an RN and NP.
Have obtained additional prescribing specific continuing education from a program approved by College Council	Graduate education from an approved program
Authorized to prescribe medications and order diagnostic and screening tests for an employer sponsor identified area of need with access to the support of a collaborative team	Authorized to practise and prescribe autonomously for unlimited clients with varying degrees of health care needs
Not able to provide a diagnosis, instead use employer guidance documents	Can make a diagnosis without the use of guidance documents as a guide
Not authorized to prescribe Controlled Drugs and Substances (CDS)	Authorized to prescribe for all health conditions, including controlled drugs and substances and cannabis for medical purposes
Order laboratory and diagnostic screening tests, manage results and make referrals as authorized by the employer sponsor in the guidance document	Authorized to order all laboratory and diagnostic screening tests and manage results and perform invasive and non-invasive as relevant procedures for their clients
Cannot prescribe as part of self-employment in initial phase	Can prescribe as part of self-employment



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