



THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK
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State Board for Nursing
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To: Interested Parties:
From: Barbara Zittel, RN, Ph.D. Executive Secretary to the State Board for Nursing
Re: The Scope of Practice of Licensed Practical Nurses
Date: September 2005

It has come to our attention that there is a need to clarify the scope of practice of Licensed Practical Nurses (LPNs). The information that follows seeks to differentiate the practice of LPNs from that of Registered Professional Nurses (RNs) in order to ensure patients' health and safety and prevent professional misconduct charges against LPNs who practice beyond the scope of their practice. In addition the memo provides information about the supervisory responsibilities of RNs in relation to Graduate Practical Nurses (GPNs) on Limited Permits.

Section 6902 of Article 139 of the Education Law distinguishes between the legal definitions of RNs and LPNs as follows:

The practice of the profession of nursing as a registered professional nurse is defined as diagnosing and treating human responses to actual or potential health problems through such services as casefinding, health teaching, health counseling, and provision of care supportive to or restorative of life and well-being, and executing medical regimens prescribed by a licensed physician, dentist or other licensed health care provider legally authorized under this title and in accordance with the commissioner's regulations. A nursing regimen shall be consistent with and shall not vary any existing medical regimen.

The practice of nursing as a licensed practical nurse is defined as performing tasks and responsibilities within the framework of casefinding, health teaching, health counseling, and provision of supportive and restorative care under the direction of a registered professional nurse or licensed physician, dentist or other licensed health care provider legally authorized under this title and in accordance with the commissioner's regulations.

This definition authorizes Registered Professional Nurses to execute medical orders from select authorized health care providers. In addition, Registered Nurses may function independently in providing nursing care in such areas as:

Casefinding, including but not limited to,

- Identification of epidemiological trends
- Client abuse assessment
- Early identification of emergent complications

Health Teaching, including but not limited to,

- Patient teaching re: signs and symptoms of medication side effects

- Patient teaching regarding disease process (heart disease, cancer) and management in relation to life factors such as culture and ethnicity
- Health care promotion, such as disease prevention, accident prevention, and teaching normal child growth and development

Health Counseling, including but not limited to,

- Mental health counseling
- Addiction counseling
- Health counseling related to management of chronic diseases such as Alzheimer's, Parkinson's, Bi-Polar and Diabetes

Care Restorative of Life and Well Being, including but not limited to:

- Rehabilitation services such as bowel/bladder training, ostomy/wound care
- Triage and continuous assessment for early identification of signs and symptoms of post operative complications with timely intervention
- Ongoing surveillance and nursing intervention to rescue chronically ill persons from development of negative effects and secondary results of treatment

Care Supportive of Life and Well Being, including but not limited to:

- Hospice and palliative care
- Chronic pain management through non-pharmacological nursing measures such as ergo dynamic techniques, relaxation, imagery, therapeutic touch, and rational-emotive therapy (RET)
- Public health care including elder care, well-baby care, school and industrial nursing.

Nursing diagnosis by an RN is cited in section 6901 of Article 139 of the Education Law as: *the identification of and discrimination between physical and psychosocial signs and symptoms essential to effective execution and management of the nursing regimen. Such diagnostic privilege is distinct from a medical diagnosis.* Nursing diagnosis has been additionally interpreted by the Department as including patient assessment, that is, the collection and interpretation of patient clinical data, the development of nursing care goals and the subsequent establishment of a nursing care plan.

Section 6902, cited above, does not include nursing diagnosis within the scope of practice of Licensed Practical Nurses. Thus, Licensed Practical Nurses in New York State do not have assessment privileges; they may not interpret patient clinical data or act independently on such data; they may not triage; they may not create, initiate, or alter nursing care goals or establish nursing care plans. Licensed Practical Nurses function by law in a dependent role **at the direction of the RN** or other select authorized health care providers. Under such direction, Licensed Practical Nurses may administer medications, provide nursing treatments, and gather patient measurements, signs, and symptoms that can be used by the RN in making decisions about the nursing care of specific patients. However, they may not function independent of direction.

The scopes of practice of RNs and LPNs are not interchangeable. Inappropriate use of LPNs may expose agencies to potential litigation, the delegating RN to a potential charge of unprofessional conduct for inappropriate delegation of professional responsibilities [see Regent Rules 29.1(b)(10)], and the LPN

