

February 21, 1996

Troy Trosclair, MN, RN
Director of Nursing Support Services
Thibodaux Hospital and Health Centers
602 North Acadia Road
Thibodaux, Louisiana 70301

Dear Mr. Trosclair:

Your request for an opinion of the Board of Nursing regarding if it is within the scope of practice for a registered nurse to instill normal saline into a drainage tube in the chest wall if the distal end of the tube is located within the intrathoracic cavity and the proximal end of the tube is connected to gravity drainage as a therapeutic procedure for treating empyema within the hospital and home setting was presented to the Board at its February 1, 1996 meeting.

The Nursing Practice Committee studied the issue at its January 8, 1996 and formulated a recommendation to the Board of Nursing. On February 1, 1996 the Committee presented its recommendation to the Board, and after due deliberation, the Board adopted the following opinion:

In response to Agenda Item 4.13:

That it is within the scope of practice for a registered nurse to instill normal saline into and irrigate a chest tube for open drainage only provided there is no danger of spontaneous pneumothorax with atmospheric pressure entering the pleural space as verified by x-ray.

If you have any questions about this matter, please feel free to contact me.

Sincerely,

Patricia K. Ladner, MN, RN
Nursing Consultant for Practice

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