Call to Order

The meeting of the Louisiana State Board of Nursing Practice Committee was called to order by Deborah Olds, President, at 9:20 a.m. on July 22, 2008 in Salon A of the Louisiana State Board of Nursing, 17373 Perkins Road, Baton Rouge, Louisiana 70810.

Roll Call

Committee Members Present
Deborah Olds, MSN, RN, President
Michelle Oswalt, MSN, APRN, CRNA
Patricia Johnson, MN, RN

Committee Members Excused
James Harper, MSN, APRN, CFNP, Chair

Non-voting Board Members Absent
William LaCorte, M.D.
Alan Ostrowe, M.D.

Staff Present
Barbara Morvant, MN, RN, Executive Director
Margaret Griener, MPH, APRN, PNP, Director, Credentialing & Practice
Wade Shows, LSBN Attorney
Brenda Kelt, Licensing Analyst

Guests
Charla Johnson, RN, MSN, Our Lady of the Lake Regional Medical Center
Angele Davis, RN, MSN, Thibodaux Regional Medical Center
Kristi Gravois, RN, Thibodaux Regional Medical Center
Ellen Matthews, RN, Thibodaux Regional Medical Center
Tracy Lee, RN, Woman’s Hospital
Shelly Bourg, RN, Woman’s Hospital

Reorder Agenda
Deborah Olds, President and acting chair, reordered the agenda.

Motion
by M. Oswalt, seconded, that the chair be allowed to reorder the agenda.

Vote
Oswalt - yes, Johnson – yes. Motion carried.

Review of Minutes
The Committee reviewed the minutes of the April 22, 2008 Practice Committee meeting.

Motion
by M. Oswalt, seconded, that the Committee approve the minutes of the April 22, 2008 Practice Committee.

Vote
Oswalt - yes, Johnson – yes. Motion carried.
Old Business

Agenda item 4.1  
Update on Declaratory Statement and guidelines on IV therapy to include PICC line infusion and competencies. Original request for opinion submitted by Lafayette General Medical Center on 8/28/07 and reviewed at the January 22, 2008 Practice committee. Practice Committee reviewed draft of the Declaratory Statement prepared by Board staff at the April 22, 2008 meeting. At the June 11, 2008 Board meeting, the Board determined that rule change would be required.

M. Griener reported that she added to the rule draft the definition for PICC Line and removed the following:

“Techniques for placement of PICC lines may include a modified Seldinger technique”

M. Griener stated that if we include the Seldinger technique, we would have to list all of the techniques and if a technique changed due to new equipment, the rule would have to be rewritten.

Motion  
by P. Johnson, seconded, that the Practice Committee accept the modified draft “Peripherally Inserted Central Catheter (PICC) Insertion, Radiographic Verification of Placement and Removal” and direct staff to initiate rule-making.

Vote  
Oswalt - yes, Johnson – yes. Motion carried.

Agenda item 4.2  
Update on establishing a Task Force to review aesthetic and cosmetic procedures.

M. Griener reported that the Practice Committee had recommended a Task Force on the issue.

M. Griener added that in having the task force meeting, it would be open to the public for nurses who are interested in performing these procedures to come and provide testimony for consideration.

Patricia Johnson agreed to chair the Aesthetic and Cosmetic Procedures Task Force meeting.

D. Olds suggested that it would be convenient if the Task Force could meet in the evening on the night before the next scheduled Practice Committee.

Motion  
by M. Oswalt, seconded, that the Practice Committee directs Board staff to establish a meeting for the Aesthetic and Cosmetic Procedures Task Force.

Vote  
Oswalt - yes, Johnson – yes. Motion carried.
Agenda item 4.3 Update on Medication Attendants in Licensed Nursing Homes. House Bill 246 / Act 293.

M. Griener reported that the Rule on Medication Attendants Certified (MACs) was promulgated on July 20, 2008 and posted to the Louisiana Register. Ms. Griener distributed a copy of the finalized rule to the committee members.

M. Griener stated that the program will be administered by DHH through Health Standards allowing the MACs to give medication to patients in nursing home under the supervision of LPNs and RNs. The program calls for a three (3) year pilot project.

New Business

Agenda item 5.1 Requests for Opinion:
Whether it is within the scope of practice for a registered nurse to remove peripheral nerve block catheters (interscalene/femoral/sciatic/lumbar plexus).
(Our Lady of the Lake Regional Medical Center)

Charla Johnson with Our Lady of the Lake explained that Anesthesia personnel insert the catheter for the Continuous Femoral Nerve Blocks (CFNB) for pain management and continued for forty eight (48) hours after surgery. The question arose whether it was within the scope of practice for an RN to remove the peripheral nerve block catheter. Ms. Johnson brought samples of the ON-Q Soaker catheter, which the Board had issued an opinion on 3/29/05, and the On-Q C-bloc catheter for the committee members to view. Ms. Johnson explained that both are ordered pre-filled, or filled by the Pharmacy. The On-Q Soaker catheter is inserted by the surgeon at the wound site, whereas the On-Q C-bloc is inserted in the nerve block by anesthesia personnel. The On-Q C-bloc has a dial and is a smaller catheter. Insertion length is approximately 4 inches.

Charla Johnson requested that the Board in issuing an updated opinion consider that it not be as specific regarding the delivery system, which can vary from site to site, but more on a skill performance for the removal of the catheter.

M. Oswalt asked Ms. Johnson to clarify her understanding that patients can actually be instructed to take these catheters out.

Charla Johnson confirmed that in researching the topic she found some British journal articles published where five (5) case studies had been performed with pediatric patients where the family was trained to remove the nerve block catheters at home.

Motion
by P. Johnson, seconded, that the Practice Committee recommends to the Board that it is within the scope of practice for a registered nurse to remove peripheral nerve block catheters (interscalene/femoral/sciatic/lumbar plexus).

Vote Oswalt - yes, Johnson – yes. Motion carried.
Agenda item 5.2
Requests for Opinion:
Whether it is within the scope of practice for a registered nurse to administer care for patients with an On-Q C-bloc, including the following:
- Removal of the catheter
- Increasing and decreasing rate of infusion in accordance with physician’s order
- Re-starting infusion once stopped

(Thibodaux Regional Medical Center)

M. Griener stated that the previous agenda item 5.1 already addressed and approved the issue of removing peripheral nerve block catheters included in this request.

Angele Davis with Thibodaux Regional Medical Center explained that in addition to the removal, the request asks if registered nurses can adjust the rate of infusion using the On-Q C-bloc under the same guidelines as allowed for epidural catheters.

M. Griener stated that copies of the current Louisiana State Board of Nursing (LSBN) rules, regulations and statutes related to this topic were included for review of this agenda items. Ms. Griener read §935 on “Anesthetics; authority of registered nurses” from the Nurse Practice Act to the committee aloud:

“Nowithstanding any other provision in this Chapter to the contrary, a registered nurse may administer, in accordance with an order of an authorized prescriber, anesthetic agents to intubated patients in critical care settings, and may titrate and continue infusion of local anesthetic agents through the use of epidural catheters for pain management, excluding obstetrical patients, in accordance with rules and regulations promulgated by the Louisiana State Board of Nursing, in accordance with the Administrative Procedure Act.”

M. Griener explained that the only provision currently allowed by statute for registered nurses is on epidural catheters. M. Griener reviewed this request for opinion with the Executive Director and it was agreed that the Nurse Practice Act would need to be expanded before a practice opinion could be issued.

M. Griener stated that although the nerve block catheter has less potential for complications compared to the epidural catheter, the current statutes only include the epidural catheters for registered nurses. The Nurse Practice Act §930 on “Anesthetics; authority to administer; penalty” clearly states:

“No registered professional nurse shall administer any form of anesthetic to any person under their care” unless they are a CRNA (Certified Registered Nurse Anesthetist). The only exception is §935 already mentioned for epidural catheters under very specific conditions.

At 9:50 am Barbara Morvant, Executive Director, joined the meeting.
P. Johnson asked if the Practice Committee could issue an opinion on this now or wait until the statute issue was investigated further. P. Johnson asked Ms. Charla Johnson with Thibodeaux Regional to confirm that they are asking for the RN scope to include the managing of the On-Q C-bloc as a part of the post-op pain management, where the CRNA administers anesthesia during the actual procedure.

Charla Johnson confirmed that they were addressing post-op use of the On-Q C-bloc as part of their monitoring the patient.

B. Morvant stated that if the Practice Committee believes that it is within the scope of practice for an registered nurse to administer care for patients with an On-Q C-bloc and the current statute and rules do not allow it, then the Board could and should proceed with pursuing the necessary rule and/or statutory change to enable that opinion to be rendered.

B. Morvant reiterated that Nurse Practice Act statute sections §930 to §935 state that no registered nurse may administer an anesthetic agent unless they are a CRNA or unless they come under certain conditions. There are a few exceptions noted, particularly that related to epidural catheters in §935, but the language is very narrow.

At 9:55 am Mr. Wade Shows, Attorney, joined the meeting.

B. Morvant suggested that the nurse anesthetists community be consulted for feedback and support on any proposed change of rules or statutes before it goes to before the Legislature.

Wade Shows, Attorney for the Board asked for clarification of the issue.

M. Griener explained that the request is to allow registered nurses to deliver anesthesia drugs into a catheter to provide a continuous nerve block for pain management.

Mr. Shows stated to for everyone’s consideration that the law (statute) is the binding mechanism. The Board can only proceed with a rule making change by virtue of what the law states. If there are some limitations that the law gives, the rule can not exceed what the law allows.

Mr. Shows reported that in his reading of the Louisiana Revised statute 37:930 that only Nurse Anesthetists can perform certain things, then in statute to 37:935 provided an exception in a very narrow scope for registered nurses.

Mr. Shows asked the committee whether this request for opinion, if rendered, would clearly fall within the current statutes as within the scope of a registered nurse as outlined in §935.
B. Morvant agreed that the request for opinion would not fall within the statutes as currently written.

B. Morvant stated that this is not the first time an issue has arisen related to low dose anesthetic agents used for pain relief rather than anesthesia. Our goal would be to get to the point where the Louisiana State Board of Nursing (LSBN) could broaden the wording so that the statutory language would delineate sedative pain management from anesthesia administration. LSBN should at least continue to be evolving to keep up with changes in technology and practice, as is the case in this request.

Charla Johnson asked if it would be in the scope of practice for a registered nurse to educate the patient to use the On-Q C-bloc when they go home.

B. Morvant advised Ms. Johnson that the RNs should refrain from doing the training and refer it to the physician or CRNA to handle since the Board can not issue an opinion that it is within the RN scope on this issue until the statute is changed.

Motion

by M. Oswalt, seconded, that the Practice Committee recommends to the Board to direct Board staff to schedule a meeting between persons of interest to discuss statute changes regarding the administration of anesthesia agents in postoperative continuous nerve blockage systems.

Vote

Oswalt - yes, Johnson – yes. Motion carried.

Adjournment

A motion for adjournment was approved and seconded. The Committee adjourned at 10:40 a.m.

Submitted by:

Margaret Griener, Director of Credentialing and Practice

Approved 10/22/2008