

OPINION OF THE LOUISIANA STATE BOARD OF NURSING
THE INDUCTION OF LABOR WITH OXYTOCIN BY REGISTERED NURSES

JUNE 30, 1978

On June 20, 1978, the Board of Nursing considered your request for its opinion relative to policies governing registered nurses' activities and responsibilities in labor inductions with oxytocins. The Board appreciated the presence of Mrs. Lucille Bortle and Ms. Ann Ruffino for the discussion. They helped to clarify extenuating circumstances which vary in each service agency.

The Board of Nursing believes that the registered nurse is responsible for and accountable to the consumer of nursing care for the quality of nursing care he or she receives. When administering medications, the registered nurse has an adjunct responsibility to know the cause and effect of every medication (s)he administers, and (s)he should be prepared to initiate remedial nursing action in the case of an untoward effect of a medication. In order to have some assurance of quality obstetrical nursing care for patients undergoing labor induction with oxytocic drugs, the nursing policies should provide that nurses will administer oxytocin drips and monitor such labor inductions only when it is certain that the attending physician can be reached at all times and that the physician will arrive to attend to the patient within a predetermined span of time. The time limit should be determined by mutual agreement between the nursing and medical departments and should be written into the policies. Should a nurse have reason to believe that an attending physician will not or cannot adhere to the time limit, said nurse should immediately discontinue the induction.

The Board members felt that specifying a time limit for the arrival of the attending physician is safer than specifying whether or not the physician must be in the hospital building because the time limit provides definite provision that the physician will be present to provide medical intervention when such is necessary.