

# *Louisiana State Board of Nursing*

## **DECLARATORY STATEMENT FOR ADVANCED PRACTICE REGISTERED NURSES FIRST ASSISTING IN SURGERY**

### *I. Background:*

The safety and welfare of the patient should be given primary consideration in the selection of a first assistant in surgery. Ideally, the first assistant to the surgeon should be a qualified physician. However, in those situations when a qualified physician is not available to assist in surgery, an advanced practice registered nurse/APRN who has acquired the necessary knowledge, skills, abilities, and judgment may function in the role of a first assistant in surgery under the direction of the surgeon.

The decision by an APRN to function as a first assistant in surgery is to be made deliberately with an understanding of the professional accountability that the role requires. The complexity of knowledge and skill required to competently function as a first assistant in surgery necessitates that specialized education beyond basic advanced practice nursing educational programs be formally obtained and documented. In the event that multiple assistants in surgery are utilized during a surgical procedure, each APRN performing intraoperative first assistant techniques must meet the qualifications set forth within this statement.

### *II. Qualifications:*

APRNs seeking to function as first assistants in surgery must meet the requirements and qualifications for practice as a Registered Nurse First Assistant/RNFA as set forth by the Association of periOperative Registered Nurses/AORN including but not limited to:

A. completion of an RNFA educational program that meets the “AORN Standards for RN First Assistant Education Programs”:

1. “AORN Standards for RN First Assistant Education Programs” are programs that:

- a. are at a minimum equivalent to six (6) semester credit hours of formal, post-basic RN education;
- b. award college credits and degrees or certificates of completion upon satisfactory completion of all requirements;
- c. are associated with
  - 1.) a college or university that is accredited by an institutional accrediting agency that is recognized by the US Department of Education;
  - 2.) a nursing program (eg, school, college, department of nursing) that is accredited by a national nursing accrediting agency that is recognized by the US Department of Education, if eligible; and
  - 3.) a nursing program that is approved/recognized/accredited by a state board of nursing;

- d. adheres to the current version of the “AORN Position Statement on RN First Assistants” and the “AORN Position Statement on the Perioperative Advanced Practice Nurse”; and
- e. incorporate all of the content in the current edition of the *Core Curriculum for the RN First Assistant*.

\*\*\*Exception to the requirement for completion of an RNFA educational program that meets the “AORN Standards for RN First Assistant Education Programs” applies only to APRNs who are privileged and practicing as first assistants in surgery prior to August, 2014.

- B. maintenance of current licensure in Louisiana as an APRN; and
- E. demonstration of compliance with statutes, regulations, and institutional policies relevant to RNFAs.

### III. Scope of Practice:

The APRN practicing as a first assistant in surgery functions in an expanded perioperative nursing role. Perioperative nursing is considered a specialized area of practice for the APRN. The activities included in first assisting in surgery as an APRN are further refinements of perioperative nursing practice which are executed within the context of advanced practice nursing. The assistant in surgery collaborates with the surgeon to promote optimal patient outcomes and does not concurrently function as a scrub nurse or circulator. Intraoperative nursing behaviors are based on an extensive body of scientific knowledge. Additionally, intraoperative first assistant techniques include but are not limited to:

- handling and/or cutting tissue;
- providing surgical site exposure;
- providing hemostasis.
- using instruments or medical devices;
- suturing; and
- surgical wound management.

These behaviors may vary depending on patient populations, practice environments, services provided, accessibility of human and fiscal resources, agency policy, and the Law Governing the Practice of Nursing.

### IV. Credentialing & Clinical Privileges:

An APRN may function as a first assistant in surgery only after the qualifications listed above have been met and after privileges to function as a first assistant in surgery have been granted by a credentialing committee established by the health care facility. The Board recommends that nursing representation be included on the credentialing committee when privileges for nurses are under consideration. Written policies and procedures should be available in facilities utilizing assistants in surgery, including RNFAs, and should address current and continued competencies. An orientation to the operating room should be provided to first assistants in surgery who are not employees of

the facility. The performance of the APRN assisting in surgery should be reviewed by the credentialing committee at regular, designated intervals to evaluate current and continued competency. Documentation of completion of an RNFA educational program that meets the “AORN standards for RN First Assistant Education Programs” must be retained in the APRN’s file.

Resources:

Association of periOperative Nurses. (2013). AORN Position Statement on RN First Assistants. Retrieved from [http://www.aorn.org/Clinical\\_Practice/Position\\_Statements/Position\\_Statements.aspx](http://www.aorn.org/Clinical_Practice/Position_Statements/Position_Statements.aspx)

Association of periOperative Nurses. (2013). AORN Standards for RN First Assistant Education Programs. Retrieved from [http://www.aorn.org/Clinical\\_Practice/RNFA\\_Resources/First\\_Assisting\\_\(RNFA\).aspx](http://www.aorn.org/Clinical_Practice/RNFA_Resources/First_Assisting_(RNFA).aspx)

Association of periOperative Nurses. (2014). AORN Position Statement on Advanced Practice Registered Nurses in the Perioperative Environment. Retrieved from Registered Nurses in the Perioperative Environment. Retrieved from [http://www.aorn.org/Clinical\\_Practice/RNFA\\_Resources/First\\_Assisting\\_\(RNFA\).aspx](http://www.aorn.org/Clinical_Practice/RNFA_Resources/First_Assisting_(RNFA).aspx)

Center for Medicare and Medicaid Services. (June, 2014). State Operations Manual Appendix A – Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. Retrieved from [http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap\\_a\\_hospitals.pdf](http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_a_hospitals.pdf)

National Council for State Boards of Nursing. (2008). *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification, Education*. Chicago: Author.

Delineation of Surgical Privileges, 42C.F.R.482.51(a)(4). (2007). Retrieved from <http://www.gpo.gov/fdsys/pkg/CFR-2011-title42-vol5/pdf/CFR-2011-title42-vol5-part482.pdf>

Definition: Under the direction of the physician means that the physician is available and physically present in the practice setting; does not mean that the physician must observe every action performed by the nurse.

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Revised 3/19/87; 2/4/98; 8/27/14  
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