

**Louisiana State Board of Nursing
Practice Committee Meeting Minutes
April 22, 2008**

- Call to Order** The meeting of the Louisiana State Board of Nursing Practice Committee was called to order by James Harper, Chair, at 9:05 a.m. on April 22, 2008 in Salon A of the Louisiana State Board of Nursing, 17373 Perkins Road, Baton Rouge, Louisiana 70810.
- Roll Call** **Committee Members Present**
James Harper, MSN, APRN, CFNP, Chair
Michelle Oswalt, MSN, APRN, CRNA
Deborah Olds, MSN, RN
Patricia Johnson, MN, RN
- Non-voting Board Members Present**
William LaCorte, M.D.
- Non-voting Board Members Absent**
Alan Ostrowe, M.D.
- Staff Present**
Margaret Griener, MPH, APRN, PNP, Director, Credentialing & Practice
Brenda Kelt, Licensing Analyst
- Guests** Joni Nickens, APRN, FNP, Liaison - Louisiana Association of Nurse Practitioners (LANP)
Cheri Johnson, RN, BSN, Woman's Hospital, Director of Obstetrical Services
Sandi Giambrone, RN, Woman's Hospital
Tracie Meeks, RN, Woman's Hospital
Holly Little, RN, Woman's Hospital
Treneda Collins, RN, Woman's Hospital
Joynita Harris, RN, Woman's Hospital
Laura Poole, RN, Director Women's Services, Terrebonne General Medical Center
Shannon W. Bergeron, RN, Lafayette General Hospital
Nita T. Krehbiel, RN, Lafayette General Hospital
Linda Bekki Starns, RN, North Oaks Medical Center
Kellie Brame, RN, North Oaks Medical Center
Kerri Redmond, RN, Terrebonne General Medical Center
Everett C. Lofton, RN, Huey P. Long Medical Center
Terri Edwards, RN, Tulane – Lakeside Hospital
Melodie Knippers, RN, Louisiana State Board of Nursing
- Reorder Agenda** James Harper, Committee Chair, reordered the agenda.
- Motion** by D. Olds, seconded, that the chair be allowed to reorder the agenda.
- Vote** Olds - yes, Johnson – yes, Oswalt - yes. Motion carried.
- Review of Minutes** The Committee reviewed the minutes of the January 22, 2008 Practice Committee meeting.

Practice Committee Meeting Minutes

April 22, 2008

Page 2

Motion by D. Olds, seconded, that the Committee approve the minutes of the January 22, 2008 Practice Committee.

Vote Olds - yes, Johnson – yes, Oswald - yes. Motion carried.

Old Business

Agenda item 4.1

Legislative directive to LSBN to study the scope of practice in relation to RNs performing medical screening exams (EMTALA). House Bill 673 became HCR (House Concurrent Resolution) 202.

M. Griener reported that the report required by HCR 202 was submitted to the House and Senate Health and Welfare Committees on February 29, 2008.

Agenda item 4.2

Review of draft of 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.

M. Griener stated that her research in preparing the draft of the Declaratory Statement included all literature submitted by the Petitioner, as well as additional data collected by Board staff such as the Seldinger technique developed in 1953.

M. Griener reviewed the Declaratory Statement draft which says that a properly trained RN could insert a PICC line using the Seldinger technique with a physician's order within specified guidelines of training, documentation and precautions. The Declaratory Statement provided "Course of Instruction" for:

- A. Nurses performing duties to include insertion with radiographic verification of PICC line tip placement
- B. Nurses performing duties that would include management and monitoring of PICC lines
- C. Nursing performing the duties of PICC line removal

Shannon Bergeron, PICC nurse with Lafayette General suggested the Declaratory Statement be changed slightly to include "modified" Seldinger technique.

Ms. Bergeron distributed a copy of a position statement recently released by the Association for Vascular Access (AVA) entitled "Interpretation of Chest Radiographs by Nurses for Verification of Peripherally Inserted Central Catheter Tip Position" for the committee to review.

Dr. LaCorte reviewed two letters he had provided for the committee from physicians who raised issues related to this topic.

Dr. LaCorte stated that he has seen catheter associated complications in his practice of internal medicine and geriatrics, expressed concern regarding a registered nurse reading a radiological film and using the PICC line prior to a radiologist approving the placement. He explained that in some cases other options such as discontinuation of IV therapy and switching to oral medications is more appropriate for patient safety and care.

S. Bergeron clarified that the PICC lines are being ordered by the treating physician for the IV therapy.

J. Harper stated that in review of the article provided by Ms. Bergeron (“Interpretation of Chest Radiographs by Nurses for Verification of Peripherally Inserted Central Catheter Tip Position” by AVA), that it provides the following Position Statement:

“A nurse who has met the requirements to competently assess the anatomic location of a vascular catheter on a chest radiograph can verify the tip position of a peripherally inserted central catheter (PICC) and authorize use of the device.

The vascular access nurse will provide written documentation of their assessment of the PICC tip position in the patient’s medical record. The diagnostic radiologist will interpret the chest radiograph and provide the comprehensive radiographic report.

Vascular access nurse specialists who have attained competency in the chest radiographic assessment of vascular catheter position cannot make a medical diagnosis. Vascular access nurses will not provide an interpretation of the chest radiograph nor be accountable for any radiologic finding.”

Ms. Bergeron confirmed that they would not be looking at the X-ray for diagnosis, but looking at the film for the PICC tip placement.

Bekki Starns, PICC nurse with North Oaks Medical Center, concurred that the trained PICC nurse has to know the anatomy of the body to properly look at the X-ray in determining the PICC tip placement, but they are not looking at the film for any type of diagnostic determination. Patient safety is taken very seriously. The petition request is asking the Board of Nursing to provide guidelines for trained PICC line nurses whereby, if the nurse meets a specific criterion in education and training, they can put the PICC lines in, verify the tip placement and start the IV therapy ordered by the physician.

Ms. Bergeron added that even when the radiologist reads the film, they do not authorize the line for release or use for the therapy. They merely confirm where the PICC tip is located, which the trained PICC nurse has already checked.

Ms. Bergeron stated that use the line for IV therapy is authorized by a standing order signed by the treating physician that says something like: *PICC tip placement confirmed, then OK to use the line.* The radiologist’s report does not authorize the line use or that the PICC tip is appropriately placed, but rather that the tip is located in a specific location.

Practice Committee Meeting Minutes

April 22, 2008

Page 4

Everett C. Lofton, RN with Huey P. Long Medical Center, stated that they have only one radiologist who is extremely busy reading films. He asked that the committee consider that the actual use of the PICC line for IV therapy be considered provisional until the radiologist has read the X-ray. Mr. Lofton stated that if PICC tip placement looked questionable in any way, he would of course hold off and not use the line until he could find a physician or radiologist to read the film.

M. Griener reported that when the Board is drafting opinions and declaratory statements they are intentionally broad to address the issue for the entire state. However the company or agency can always be more restrictive, such as excluding pediatric populations, within their policies and procedures to limit the practice further within their facility.

Motion

by P. Johnson, seconded, that the Practice Committee recommends to the Board approval of the Declaratory Statement and guidelines on IV therapy with the revision “modified Seldinger technique”, and direct Board staff to consult with counsel regarding whether rulemaking is necessary.

Vote

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

Committee took a break at 10:05 a.m.

Committee resumed at 10:15 a.m.

Agenda item 4.3

Review of draft of Declaratory Statement and guidelines for a qualified RN to perform a medical screening exam (MSE) under the direction of a physician to rule out Labor per the Emergency Medical Treatment and Labor Act (EMTALA). Declaratory Statement to include AWHONN (Association of Women’s Health, Obstetrical and Neonatal Nursing) guidelines.

Original request for opinion submitted by Woman’s Hospital in Baton Rouge on 1/12/07 and reviewed at the January 22, 2008 Practice committee.

M. Griener explained that when she researched the statement by the Association of Women’s Health and Obstetric and Neonatal Nurses (AWHONN), it was testimony in a letter to the Centers for Medicare and Medicaid Services (CMS). CMS took the recommendations from AWHONN, and other sources, and issued a revision on September 29, 2006.

Cheri Johnson, Director of Obstetrical Services at Woman’s Hospital, stated that she has reviewed the draft of the Declaratory Statement prepared by Board staff and that it seemed reasonable.

Motion

by D. Olds, seconded, that the Practice Committee recommends to the Board approval of the Declaratory Statement for a qualified RN to perform a medical screening exam (MSE) under the direction of a physician to rule out Labor per the Emergency Medical Treatment and Labor Act (EMTALA), within AWHONN (Association of Women’s Health, Obstetrical and Neonatal Nursing) guidelines.

Practice Committee Meeting Minutes

April 22, 2008

Page 5

Vote Olds - yes, Oswald - yes. Johnson – recused herself from vote. Motion carried.

Agenda item 4.4 Review of Board staff research regarding various aesthetic and cosmetic procedures.

M. Griener stated that there have been several discussions on this topic; many included Dr. Marier, Executive Director of the Louisiana State Board of Medical Examiners. Upon request from Dr. Marier, Ms. Griener contacted the Massachusetts Board of Nursing and spoke with their Practice Consultant.

Ms. Griener was advised that their state was directed to establish a Task Force by their Legislature under a “Medical Spa” law in the State of Massachusetts. The Task Force includes members from their Medical, Nursing and Cosmetology Boards. The Practice Consultant advised that the Task Force is on-going.

M. Griener advised that in meetings with the Executive Director, the possibility of developing a Focus Group for Louisiana was discussed and suggested to include representatives from the Medical Board and Cosmetology Board. Louisiana does not currently have “Medical Spa” legislation.

Motion by M. Oswald, seconded, that the Practice Committee recommends to the Board to direct Board staff to investigate establishing a Task Force to review aesthetic and cosmetic procedures.

Vote Olds - yes, Johnson – yes, Oswald - yes. Motion carried.

Agenda item 4.5 Update on Medication Attendants in Licensed Nursing Homes. House Bill 246 / Act 293

M. Griener reported that this legislation is under the Department of Health Standards in the Department of Health and Hospitals. A Program Manager has been hired for the program by the name of Denise Trailer.

M. Griener advised that the committee that worked on the Medication Attendants (MACs) do not expect a lot of people to apply for the MAC program. In order to qualify, the applicant would have to be Certified Nurse Assistant (CNA) who has worked in a long term facility for a year, and who is recommended by the administration of that facility. The program is a “pilot program” that would be evaluated and determined in about five (5) years if it would continue. There is no limit on the number of nursing home or long term care facilities that can elect to participate. However, the MAC training program would include at least 100 hours of training, 60 didactic/theory and 40 clinical.

Practice Committee Meeting Minutes

April 22, 2008

Page 6

New Business

Agenda item 5.1

Requests for Opinion:

Whether it is within the scope of practice for a qualified APRN to perform the following aesthetic/cosmetic procedures (Ochsner Medical Center)

- Microdermabrasion
- Botox injections
- Tattooing
- Breast expansion and the ordering of breast implants

M. Griener advised the committee that Board staff received written advisement from the Petitioner to rescind the request for opinion at this time.

Adjournment

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



Submitted by:

Margaret Griener, Director - Credentialing and Practice

Approved 7/22/2008