

PRACTICE STANDARD FOR BCCNM REGISTERED NURSES

Registered Nurse: Acting with Client-specific Orders

Introduction

The *Registered Nurse: Acting with Client-specific Orders* practice standards, limits, and conditions apply to registered nurses (RNs), certified practice registered nurses [RN(C)s], and licensed graduate nurses (LGNs) when they are acting with client-specific orders.

Acting with client-specific orders refers to registered nurses¹ performing activities that they are educated, competent, and allowed to perform **with a client-specific order**.

Registered nurses may provide care to clients by acting with a client-specific order for an activity that is:

- Outlined in the [Nurses \(Registered\) and Nurse Practitioners Regulation](#),
- In alignment with BCCNM standards, limits, and conditions,
- Allowed by organizational/employer policies, processes, and restrictions, and
- Within the registered nurse's individual competence.

Registered nurses need to know when they are allowed to act within their autonomous scope of practice (without a client-specific order) and when a client-specific order is required before performing an activity.

A **client-specific order** is an instruction or authorization given by a regulated health professional for a nurse to provide care for a specific client, whether or not the care or service includes a restricted activity or a non-restricted activity.

- A consultation, referral or professional recommendation is not an order.
- Registered nurses also need to know which health professionals are authorized to give a client-specific order that they are allowed to act with.

A registered nurse may act with a client-specific order given by:

¹ References in this standard to registered nurses include licensed graduate nurses.

An **authorized health professional** who is listed in the [*Nurses \(Registered\) and Nurse Practitioners Regulation*](#) as authorized to give an order for a restricted activity to be performed by a registered nurse.

- Only these health professionals are authorized to give orders for activities listed in section 7 (restricted activities that require an order) of the Regulation that allow the registered nurse to perform that activity.
- For registered nurses, authorized health professionals include physicians, nurse practitioners, certified practice registered nurses, certified practice registered psychiatric nurses, dentists, midwives, naturopaths, podiatrists, and pharmacists.

A **non-listed health professional** who is NOT listed in the [*Nurses \(Registered\) and Nurse Practitioners Regulation*](#) is not authorized to give orders for restricted activities in section 7 of the Regulation.

- However, depending on organizational/employer policies and processes, a non-listed health professional may give orders for activities that are within the registered nurse's autonomous scope of practice.
- Non-listed health professionals have specialized competence within their profession's scope of practice and individual competence that allows them to assess a client and to design or recommend care to meet the client's needs.

Standards

1. Registered nurses require a client-specific order from an **authorized health professional** to perform any restricted activity listed in **section 7** (restricted activities that require an order) of the [*Nurses \(Registered\) and Nurse Practitioners Regulation \(to the extent the care provided is not within the activities or related limits and conditions listed in section 6 of the Nurses \(Registered\) and Nurses Practitioners Regulation, or, as noted for certified practice registered nurses, in section 8².*](#)
2. Registered nurses acting with a client-specific order ensure the ordered activity is:
 - a. Within the scope of practice as set out in the *Nurses (Registered) and Nurse Practitioners Regulation*,
 - b. Consistent with standards, limits and conditions established by BCCNM,
 - c. Consistent with organizational/employer policies, processes, and restrictions, and
 - d. Within their individual competence.
3. Registered nurses acting with a client-specific order ensure that they have the competence to:
 - a. Perform the activity safely and ethically,
 - b. Identify potential risks of the activity to the client and how to minimize those risks,

2 Certified practice registered nurses do not require an order for a restricted activity listed in section 8 of the [*Nurses \(Registered\) and Nurse Practitioners Regulation*](#) that is within the autonomous scope of the nurse's certified practice designation and the nurse's individual competence.

- c. Manage the intended outcomes of the activity, and
 - d. Recognize unintended outcomes of the activity and implement a plan for dealing with these unintended outcomes.
4. Before performing an activity with a client-specific order, registered nurses consider applicable employer/organizational policies, processes, and resources, and other relevant human and system factors that may impact their ability to:
 - a. Perform the activity competently and safely within their practice setting, and
 - b. To manage intended and unintended outcomes of the activity.
5. Registered nurses perform advanced activities with a client-specific order only when they have obtained the additional education, training, and/or clinical experience needed to gain and maintain the competence to perform the activity safely.
6. Registered nurses acting with a client-specific order ensure that the order:
 - a. Is client-specific,
 - b. Is clear and complete,
 - c. Is documented, legible, dated and signed with a written/electronic signature, and
 - d. Contains enough information for the nurse to carry it out safely.
7. Registered nurses accept a verbal or telephone client-specific order only when there is no reasonable³ alternative, according to organizational/employer policies and processes, and when doing so is in the best interest of the client. Nurses repeat the client-specific order back to the ordering health professional to confirm its accuracy and promptly document the order.
8. Registered nurses conduct assessments to ensure that the client's condition continues to warrant the activity before acting with a client-specific order.
9. Registered nurses may not change or cancel a client-specific order given by an authorized health professional when the activity is outside of the nurse's autonomous scope of practice or the nurse's individual competence.
10. Registered nurses communicate and collaborate with the health professional (or their delegate) who gave the client-specific order, follow organizational/employer policies and processes, take action as needed, and document in the client record, when:
 - a. The ordered activity may no longer be appropriate because the client's condition, needs or wishes have changed (e.g., to 'hold' the order),
 - b. They are not able to carry out a client-specific order,

³ "Reasonable" refers to the common understanding that registrants of BCCNM would have as to what is appropriate in the situation.

- c. The client-specific order does not appear to consider a client's individual characteristics, values/beliefs, and preferences,
 - d. The client-specific order does not appear to reflect current evidence or be in the best interest of the client,
 - e. They change or cancel a client-specific order for activities that are within their autonomous scope of practice, or
 - f. The safeguards and resources are not available to manage the outcomes of performing the activity, including reasonably foreseeable unintended outcomes.
11. Registered nurses follow the standards for *Acting within Autonomous Scope of Practice* when they change or cancel a client-specific order that is within their autonomous scope of practice and individual competence.
 12. Registered nurses are responsible and accountable for any changes or cancellations they make to a client-specific order that is within their autonomous scope of practice and individual competence.
 13. Registered nurses obtain a client-specific order to perform an activity or provide care or a service that is within their autonomous scope of practice when:
 - a. It is required by organizational/employer policies, processes, or restrictions,
 - b. There are insufficient organizational/employer supports, processes and resources in place (such as decision support tools or clinical practice documents) to enable the nurse to meet BCCNM standards, limits, or conditions related to the activity, care or service, or
 - c. The nurse does not have the individual competence to make a nursing diagnosis or carry out an assessment to determine whether the client would benefit from the activity, care, or service, but is competent to carry out the activity.
 14. Registered nurses **ONLY** act with a client-specific order from a **non-listed health professional** when:
 - a. The activity is within the nurse's **autonomous scope of practice**,
 - b. The nurse is able to meet BCCNM standards, limits, or conditions related to the activity,
 - c. The activity is within the nurse's individual competence, and
 - d. Organizational/employer policies, and processes exist that:
 - i. Clarify the accountability and responsibility of the nurse and the non-listed health professional, and
 - ii. Outline the requirements for the non-listed health professional to complete an assessment and to ensure that the ordered activity is in the best interest of the client.

Glossary

Additional education: Additional education is structured education (e.g., workshop, course, program of study) designed for the nurse to attain the competencies required to carry out a specific activity. Additional education:

- builds on the entry-level competencies
- identifies the competencies expected of learners on completion of the education,
- includes both theory and application to practice, and
- includes an objective evaluation of learners' competencies on completion of the education.

Advanced activities: Activities that are within a nurse's scope of practice but require additional education, training and/or clinical experience that build on the foundational knowledge, skills, and judgement attained during entry-level nursing education.

Competence: The integration and application of current knowledge, skills, attitudes, and judgment required to perform safely, ethically, and appropriately within an individual's practice.

Competencies: The knowledge, skills, attitudes, and judgment required to provide safe, competent, and ethical care within an individual's practice or in a designated role or setting.

Decision support tools (DSTs): Evidence-based documents used by nurses to support clinical judgment and decision-making by guiding the assessment, diagnosis and treatment of client-specific clinical problems. DSTs come in various forms and are created by organizations or specialists in a specific area of health care.

NOT YET APPROVED

BCCNM limits and conditions for registered nurse: Acting with client-specific orders

1. [Cardiac stress testing](#)
2. [Insert a central venous catheter \(CVC\)](#)
3. [Surgical suturing or harvesting veins](#)
4. [Apply a cast for a fracture of a bone](#)
5. [Administer nutrition by enteral instillation](#)
6. [Compound and dispense a therapeutic diet administered by enteral instillation](#)
7. [Put an instrument or device beyond the pharynx](#)
8. [Put an instrument, device, hand, or finger beyond the labia majora:](#)
 - [Pelvic exams](#)
 - [Cervical cancer screening](#)
 - [Fit a pessary](#)
 - [Apply fetal scalp electrodes](#)
9. [Apply electricity:](#)
 - [Electrocautery](#)
10. [Administer medications/substances](#)
11. [Administer medications:](#)
 - [Experimental medications \(Drug Schedules Regulation\)](#)
12. [Compound, dispense, administer Schedule II drugs \(Drug Schedules Regulation\)](#)
13. [Medical aesthetics](#)

Activity	BCCNM Limits Conditions for Registered Nurse: Acting with Client-specific Orders
1. Cardiac stress testing	a. Registered nurses may only carry out cardiac stress testing under a physician's direction and only following successful completion of additional education.
2. Insert a central venous catheter (CVC)* <i>*May also be referred to as a central venous access devices (CVAD) or central venous device (CVD)</i>	a. Registered nurses require a client-specific order before inserting a central venous catheter.
3. Surgical suturing or harvesting veins	a. Registered nurses must successfully complete an RN First Assist Program before doing surgical suturing or harvesting veins under a physician's order.
4. Apply a cast for a fracture of a bone	a. Registered nurses who cast a fracture of a bone: <ul style="list-style-type: none"> i. Require a client-specific order from a physician or nurse practitioner registered in B.C.* ii. Must successfully complete additional education. <i>*Registered nurses may only act on a client-specific order to cast a fracture of a bone given by a medical practitioner or nurse practitioner who is registered in British Columbia as per the Nurses (Registered) and Nurse Practitioners Regulation Section 7(3).</i>
5. Administer nutrition by enteral instillation	a. Within autonomous scope of practice, registered nurses can administer enteral feeds <i>only</i> to stable clients with an established diet. b. Registered nurses must follow a client-specific order from an appropriate health professional for all other clients.
6. Compound and dispense a therapeutic diet administered by enteral instillation	a. Within autonomous scope of practice, registered nurses can compound and dispense a therapeutic diet administered through enteral instillation <i>only</i> to stable clients with an established diet. Registered nurses must obtain a client-specific order from an appropriate health professional for all other clients.
7. Put an instrument or device beyond the pharynx	a. Registered nurses <i>may not</i> carry out endotracheal intubation.

Activity	BCCNM Limits Conditions for Registered Nurse: Acting with Client-specific Orders
<p>8. Put an instrument, device, hand, or finger beyond the labia majora:</p> <ul style="list-style-type: none"> • Pelvic exams • Cervical cancer screening • Fit a pessary • Apply fetal scalp electrodes 	<p>a. Registered nurses who carry out pelvic exams or cervical cancer screening must possess the competencies (BCCDC & PHSA: Competencies for Pelvic Examination) established by the Provincial Health Services Authority (PHSA) and follow decision support tools (PHSA: Pelvic Exam by Registered Nurses and Registered Psychiatric Nurses) established by PHSA.</p> <p>b. Registered nurses require a client-specific order from an authorized health professional to fit a pessary.</p> <p>c. Registered nurses require a client-specific order from an authorized health professional to apply fetal scalp electrodes.</p>
<p>9. Apply electricity:</p> <ul style="list-style-type: none"> • Electrocautery 	<p>a. Registered nurses must successfully complete an RN First Assist Program before doing electrocautery under a physician's order.</p>
<p>10. Administer medications/ substances</p>	<p>a. Registered nurses do not induce general anesthesia or give the first dose of anesthetic agents administered through a catheter.</p>
<p>11. Administer medications:</p> <ul style="list-style-type: none"> • Experimental medications (Drug Schedules Regulation) 	<p>a. Registered nurses may, with a client-specific order from an authorized health professional, administer experimental medications not yet listed in any drug schedule as part of a formal research program.</p>
<p>12. Compound, dispense, administer Schedule II drugs (Drug Schedules Regulation)</p>	<p>a. Registered nurses require a client-specific order from an authorized health professional before compounding, dispensing or administering Schedule II medications to treat a disease or disorder.</p>

Activity	BCCNM Limits Conditions for Registered Nurse: Acting with Client-specific Orders
13. Medical aesthetics ⁴	<ul style="list-style-type: none">a. RNs successfully complete additional education before providing medical aesthetic procedures.b. RNs administering injectable drugs or substances or implantable devices for medical aesthetic purposes only do so:<ul style="list-style-type: none">i. with a client-specific order from an authorized health professional, andii. when the ordering health professional, or another health professional who has assumed responsibility for the care of the client, is present within the facility when the procedure is being performed and immediately available for consultation.c. RNs do not prescribe dermal fillers

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⁴ “Medical aesthetics” refers to elective non-surgical clinical procedures that include the performance of a restricted activity (activities listed in sections 6 and 7 of the [Nurses \(Registered\) and Nurse Practitioners Regulation](#)) and are primarily intended to alter or restore a person’s appearance.