

PRACTICE STANDARD FOR BCCNM REGISTERED NURSES (CERTIFIED PRACTICE)

Registered Nurse (Certified Practice): Prescribing

Introduction

The *Registered Nurse (Certified Practice): Prescribing* standards apply to registered nurses who have met the BCCNM requirements to be certified by BCCNM and who have met the BCCNM requirements to be a prescriber in one or more of the following certified practice designations:

- Reproductive Health (Contraceptive Management) Certified
- Reproductive Health (Sexually Transmitted Infections) Certified
- Remote Practice Certified
- RN First Call Certified
- Opioid Use Disorder Certified

The *Registered Nurse (Certified Practice): Prescribing* standards apply when prescribing a medication to be dispensed by a pharmacist for use by a specific person.

Certified practice registered nurses may prescribe medications:

1. Within their certified practice designation,
2. In alignment with BCCNM standards, limits, and conditions,
3. Allowed by organizational/employer policies, processes, and
4. Within the certified practice registered nurse's individual competence.

In addition to these *Registered Nurse (Certified Practice): Prescribing* standards, certified practice RNs who prescribe medications also follow:

- The *Registered Nurse (Certified Practice): Acting within Autonomous Scope of Practice* standards, limits, conditions **including the limits and conditions when prescribing**,

- The [Medication](#) practice standard.

The standards for *Registered Nurse: Acting by Giving Client-specific Orders* apply when a certified practice registered nurse gives a client-specific order for compounding, dispensing or administering a medication to be acted on by another nurse (RN, LPN or RPN) or other health professional, other than a pharmacist.

"Medication" used within this standard refers to Schedule I, IA, II, III, and unscheduled drugs as defined in the provincial [Drug Schedules Regulation](#) under the [Pharmacy Operations and Drug Scheduling Act](#) (PODSA).

Standards

1. Certified practice registered nurses are accountable and responsible for their prescribing decisions.
2. Certified practice registered nurses prescribe only those medications as allowed by:
 - a. The *Nurses (Registered) and Nurse Practitioners Regulation*,¹
 - b. Other relevant provincial or federal legislation or regulations,
 - c. BCCNM standards, limits, and conditions,
 - d. Organizational/employer policies and processes, and
 - e. The nurse's individual competence.
3. Before prescribing, certified practice registered nurses ensure they have the competence to:
 - a. Assess the client health status, including conducting an accurate health history and clinical evaluation,
 - b. Make or confirm a diagnosis of a disease, disorder, or condition that is within the autonomous scope of practice of the nurse's certified practice designation and the nurse's individual competence, and that can be improved or resolved within the context of the client's overall health status and care needs,
 - c. Prescribe the medication safely, including knowing the medication's therapeutic use, indications, dosages, precautions, contraindications, side effects, adverse effects, potential interactions between the medication and foods/medications/substances, medication forms and routes for administration, and
 - d. Manage, monitor, and evaluate the client's response to the prescribed medication.
4. Certified practice registered nurses use current evidence to support decision-making when prescribing medications.
5. When prescribing, certified practice registered nurses:

¹ Despite the [Nurses \(Registered\) and Nurse Practitioners Regulation](#), only registered nurses with certified practice are authorized to prescribe any medications, and they may only do so for the purpose of treating diseases, disorders, or conditions within their certified practice area, in accordance with BCCNM's standards, limits and conditions for certified practice.

- a. Assess the client in person, or, if clinically appropriate, through a virtual health care encounter with a visual assessment. If a visual assessment is not possible, certified practice registered nurses prescribe without a visual assessment only after determining that it is clinically appropriate and only:
 - i. If the client is known to the nurse, and/or
 - ii. The client is being assessed in person by another health care provider.
 - b. Consider the client's health history related to the condition or health concern such as age, sex, past medical and mental health history, family history, social history, risk factors, and the client's understanding, beliefs, and values,
 - c. Undertake and document an appropriate clinical evaluation such as a physical and mental examination, and/or a review of relevant diagnostic or monitoring tests and/or specialist reports,
 - d. Obtain and review the best possible medication history for the client using PharmaNet and/or other sources (including any traditional medicines, natural health products, non-prescription medications, and substance use, in addition to prescribed medications), and take action to address any discrepancies,
 - e. Assess the client's known allergies and ensure allergy information is documented,
 - f. Assess for difficulties in the client's ability to pay for and/or access medications, and the potential need to refer the client to available provincial medication access programs,
 - g. Document the medication prescribed to the client and the indication(s) for the medication,
 - h. Establish a plan for reassessment/follow-up with respect to the prescribed medication, either by the certified practice registered nurse themselves or by another prescriber, and
 - i. Monitor and document the client's response to the medication being prescribed (as applicable).
6. Certified practice registered nurses complete prescriptions for medications legibly, accurately, and completely, including:
 - a. The date the prescription was written,
 - b. Client name, address (if available) and date of birth,
 - c. Client weight (if required),
 - d. The name of the drug or ingredients, strength if applicable, and dose,
 - e. The quantity prescribed and quantity to be dispensed,
 - f. Dosage instructions (e.g., the frequency, maximum daily dose, route of administration, duration of medication therapy), and

- g. Prescriber's name, work address, work telephone number, written/electronic signature, and prescriber number.
- 7. Certified practice registered nurses follow organizational/employer policies and processes (including security, privacy, and confidentiality measures) when transmitting a prescription to a pharmacy.
- 8. Certified practice registered nurses collaborate, communicate, and/or consult with the client and with other health care professionals when prescribing medications, including:
 - a. Consideration of:
 - i. The broader plan of care for the client developed by the health care team including other prescribers,
 - ii. The plan for reassessment/follow-up with respect to the prescribed medication,
 - iii. When the prescribing decision would benefit from the expertise of other health care professionals, and
 - iv. When the needs of the client exceed the nurse's scope of practice or individual competence,
 - b. Documenting the prescribing decision, plan of care and communication with the health care team.
- 9. Certified practice registered nurses do not provide any person with a blank, signed prescription.
- 10. Certified practice registered nurses do not prescribe medications for themselves, or anyone else who is not their client.
- 11. Certified practice registered nurses participate in required and relevant provincial and/or national reporting programs.
- 12. Certified practice registered nurses who prescribe controlled drugs and substances follow the requirements of the [College of Pharmacists of BC's Controlled Prescription Program](#) including requirements related to securing and disposing of prescription pads; reporting any loss, theft or misuse of the prescription pads; and record retention.

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.

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.

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Effective date: June 2, 2025

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Pub. No. 951