

PRACTICE STANDARD FOR REGISTERED NURSES AND REGISTERED  
PSYCHIATRIC NURSES

# Screening and Diagnostic Tests & Imaging

Practice standards set out requirements related to specific aspects of nurses' practice. They link with other standards, policies and bylaws of the British Columbia College of Nurses and Midwives and all legislation relevant to nursing practice.

This standard outlines nurses<sup>1</sup> accountabilities for providing safe nursing care to clients when performing screening and diagnostic tests & imaging activities.

Under the [Nurses \(Registered\) and Nurse Practitioners Regulation](#) and the [Nurses \(Registered Psychiatric\) Regulation](#), nurses may perform certain screening and diagnostic tests & imaging activities by:

- Acting with a client-specific order from an authorized health professional,<sup>2</sup> or
- Acting within their autonomous scope of practice (without a client-specific order).

Nurses may order screening and diagnostic tests or imaging to screen for conditions based on a nursing diagnosis.<sup>3</sup> These tests or images may also support other health professionals to make a diagnosis of a disease or disorder.

Certified practice RNs and RPNs have an expanded scope of practice. In addition to their scope of practice as an RN/RPN, they may also order or perform screening and diagnostic tests & imaging autonomously in accordance with their certified practice designation to support a diagnosis of a disease, disorder, or condition. They do so in accordance with their [RN certified practice limits and conditions](#), [RPN certified practice limits and conditions](#), and as outlined in their certified practice designation's decision support tools.

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<sup>1</sup> "Nurses" refers to the following BCCNM nursing registrants: registered nurses (including certified practice), registered psychiatric nurses (including certified practice) and licensed graduate nurses.

<sup>2</sup> "Authorized health professionals" are physicians, nurse practitioners, certified practice registered nurses, certified practice registered psychiatric nurses, dentists, midwives, naturopaths, podiatrists, and pharmacists.

<sup>3</sup> "Nursing diagnosis" means a clinical judgement of an individual's mental or physical condition to determine whether the condition can be ameliorated or resolved by appropriate interventions of the registrant to achieve outcomes for which the registrant is accountable.

## MEDICAL SERVICE PLAN (MSP) PRACTITIONER NUMBERS

The [\*Laboratory Services Regulation\*](#) allows RNs and RPNs to apply for and use an Medical Services Plan (MSP) practitioner number to order screening and diagnostic laboratory tests for the purpose of communicable disease prevention and management. Per BCCNM standards, applying for and using an MSP practitioner number requires organizational/employer approval and established organizational/employer policies and processes. MSP practitioner numbers will generally only be needed when nurses are ordering tests that are to be completed or processed in outpatient settings.

The *Laboratory Services Regulation* also allows certified practice RNs and RPNs to apply for and use an MSP practitioner number.

## Standards

1. Nurses order, perform, interpret, and/or manage screening and diagnostic tests & imaging according to:
  - a. relevant legislation and regulations,
  - b. BCCNM standards, limits, and conditions,
  - c. organizational/employer policies and processes,
  - d. current evidence, relevant guidelines, and other resources, and
  - e. their individual competence.
2. When nurses receive test or imaging results/reports ordered by another health professional, they communicate the results/reports to the ordering health professional and/or the health care team in a timely manner.
3. Nurses take part in required and relevant reporting programs such as those related to communicable diseases listed in the *Public Health Act*.<sup>4</sup>

## ACTING WITH A CLIENT-SPECIFIC ORDER

4. When nurses perform screening and diagnostic tests and/or imaging, they:
  - a. consider the client's physical, mental, emotional, spiritual, social, and cultural needs relevant to the tests and/or imaging,
  - b. review the client's relevant health history, recent test and/or imaging result(s)/report(s), and other relevant factors,
  - c. perform and document appropriate clinical assessments,

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<sup>4</sup> *Public Health Act*: [https://www.bclaws.gov.bc.ca/civix/document/id/lc/statreg/167\\_2018](https://www.bclaws.gov.bc.ca/civix/document/id/lc/statreg/167_2018)

- d. provide the client with information about the test(s) and/or imaging, as appropriate, and
- e. complete requisitions and labels completely and accurately and specify the health professional(s) who should receive the results/reports, as applicable.

#### **ACTING WITHIN AUTONOMOUS SCOPE OF PRACTICE (WITHOUT A CLIENT- SPECIFIC ORDER)**

5. Nurses are solely accountable and responsible for their clinical decision making when they order, perform, interpret, and/or manage screening and diagnostic tests & imaging within their autonomous scope of practice to:
  - a. screen for a condition based on a nursing diagnosis,
  - b. support other health professionals to make a diagnosis of a disease or disorder, or
  - c. screen for and diagnose a disease, disorder, or condition in accordance with [RN certified practice limits and conditions](#) or [RPN certified practice limits and conditions](#).
6. When nurses order, perform, interpret, and/or manage screening and diagnostic tests & imaging within their autonomous scope of practice, they:
  - a. consider the client's physical, mental, emotional, spiritual, social, and cultural needs relevant to the test & imaging recommendations,
  - b. review the client's relevant health history, recent test and/or imaging result(s)/report(s), and other relevant factors,
  - c. perform and document appropriate clinical assessments and document clinical indication(s) for test(s)/imaging,
  - d. initiate consultation, referrals, and/or transfer care to other health professionals when:
    - i. client care would benefit from the expertise of other health professionals,
    - ii. required by organizational/employer policies or processes, and/or
    - iii. client care needs exceed the scope of practice and/or individual competence of the nurse.
  - e. provide the client information about the test(s) and/or imaging, document the informed choice discussion and the client's choice, as applicable,
  - f. review and follow up on test or imaging result(s)/report(s) following organizational/employer policies and processes,

- g. communicate and collaborate with the client and health care team in a timely manner about the test(s) and/or imaging results/reports, proposed follow-up care, and/or treatment plan, as applicable, and
  - h. document:
    - i. client follow-up (and follow-up attempts),
    - ii. the test or imaging result(s)/report(s), follow-up care, and/or treatment plan, as applicable, and
    - iii. consultations, referrals, and/or transfers of care to other health professionals, as applicable.
7. Nurses do not order screening and diagnostic tests or imaging for themselves, or anyone who is not their client.

### MEDICAL SERVICES PLAN (MSP) NUMBER FOR NON-CERTIFIED PRACTICE NURSES

8. Nurses only apply for and use their Medical Service Plan (MSP) practitioner number to order tests for communicable disease prevention and management when:
- a. they have the approval of their organization/employer, and
  - b. their organization/employer has policies and processes to review and follow up on test results, and processes for the nurse to refer or transfer care to another health professional, as applicable.

## RN Limits and Conditions

BCCNM has placed additional limits and conditions<sup>5</sup> on certain screening and diagnostic tests & imaging to mitigate risks. If a test is not listed below, BCCNM has not placed additional limits and conditions on it beyond those that may already be in the [Nurses \(Registered\) and Nurse Practitioners Regulation](#).

Certified Practice RNs order or perform screening and diagnostic tests and imaging in accordance with their [RN certified practice limits and conditions](#), and as outlined in their certified practice designation's decision support tools.

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<sup>5</sup> These specific limits and conditions are duplicated from the *Registered Nurses Scope of Practice: Standards, Limits, and Conditions*. If there are any differences, the *Registered Nurses Scope of Practice: Standards, Limits, and Conditions* takes precedence.

Limits and conditions for acting with a client-specific order	
<b>Cardiac stress testing</b>	Registered nurses may only carry out cardiac stress testing under a physician’s direction and only following successful completion of additional education.
<b>Putting items into body openings: pelvic exams or cervical cancer screening</b>	Registered nurses who carry out pelvic exams or <a href="#">cervical cancer screening</a> must possess the <a href="#">competencies</a> established by the Provincial Health Services Authority (PHSA) and follow <a href="#">decision support tools</a> established by PHSA.

Limits and conditions for acting within autonomous scope of practice (activities that do not require a client-specific order)	
<b>Screening and Diagnostic Tests</b>	
<b>Instillation and injection: tuberculosis screening</b>	Registered nurses administering purified protein derivative must possess the <a href="#">competencies</a> established by the B.C. Centre for Disease Control (BCCDC) and follow <a href="#">decision support tools</a> established by BCCDC.
<b>Intravenous: central venous catheter</b>	Registered nurses require a client-specific order before inserting a central venous catheter.
<b>Assessing clients and treating conditions- putting items into body openings: pelvic exams or cervical cancer screening</b>	Registered nurses who carry out pelvic exams or <a href="#">cervical cancer screening</a> must possess the <a href="#">competencies</a> established by the Provincial Health Services Authority (PHSA) and follow <a href="#">decision support tools</a> established by PHSA.
<b>Imaging</b>	
<b>Ordering the application of energy:</b>	Registered nurses give a client-specific order for X-ray or ultrasound only under the following circumstances:
<ul style="list-style-type: none"> <li>• X-Rays (except computerized axial tomography scans -CAT scans),</li> <li>• ultrasounds</li> </ul>	<ul style="list-style-type: none"> <li>• Registered nurses who give a client-specific order for X-ray or ultrasound must follow established decision support tools.</li> <li>• Registered nurses who give a client-specific order for X-ray or ultrasound for the purpose of screening or triage or treating a condition must successfully complete additional education.</li> </ul>

### Limits and conditions for acting within autonomous scope of practice (activities that do not require a client-specific order)

- Registered nurses give a client-specific order for X-ray or ultrasound for the purpose of routine management only when organizational processes are in place to direct test results to the appropriate health professional for follow-up.
- Registered nurses who give a client-specific order for chest X-ray for the purpose of tuberculosis screening must possess the [competencies](#) established by the B.C. Centre for Disease Control (BCCDC) and follow [decision support tools](#) established by BCCDC.

[RN certified practice limits and conditions >>](#)

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