

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'¹ 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,² 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.³ 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.

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

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

³ "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*.⁴

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,
 - 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.

⁴ *Public Health Act*: https://www.bclaws.gov.bc.ca/civix/document/id/lc/statreg/167_2018

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.

RPN Limits and Conditions

BCCNM has placed additional limits and conditions⁵ 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 \(Registered Psychiatric\) Regulation](#).

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

Limits and conditions for acting with a client-specific order	
Screening and Diagnostic Tests & Imaging	
Procedures Below the Body Surface	<ul style="list-style-type: none"> • RPNs are limited to taking blood with short devices or from existing peripheral venous access devices. • RPNs must successfully complete additional education to carry out venipuncture and to establish intravenous access. • At this time RPNs must not take blood for the purpose of donation.
Administering a Substance	<ul style="list-style-type: none"> • RPNs must not administer radiopaque dyes via parenteral instillation.

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

Limits and conditions for acting with a client-specific order	
Screening and Diagnostic Tests & Imaging (cont'd)	
Putting items into body openings: pelvic exams or cervical cancer screening	<p>RPNs who carry out pelvic exams or cervical cancer screening must:</p> <ul style="list-style-type: none"> successfully complete additional education, and possess competencies outlined in Core Nursing Practice Competencies for Pelvic Exams (for Registered Nurses) established by the Provincial Health Services Authority (PHSA) or equivalent approved by their employer.

Limits and conditions for acting within autonomous scope of practice (activities that do not require a client-specific order)	
Screening and Diagnostic Tests	
Intravenous: venipuncture	<ul style="list-style-type: none"> RPNs are limited to using short peripheral venous access devices to take blood. RPNs must successfully complete additional education to carry out venipuncture. RPNs must not take blood for the purpose of donation.
Tuberculosis Screening	<ol style="list-style-type: none"> RPNs who administer purified protein derivative must possess the competencies outlined in Registered Nursing Competencies for Tuberculosis Screening established by the British Columbia Centre for Disease Control (BCCDC) or equivalent approved by their employer. RPNs who administer purified protein derivative must follow the BCCDC Non-certified Practice Tuberculosis Screening Decision Support Tool for Registered Nurses or equivalent approved by their employer.
Assessing clients and treating conditions: inserting instrument, hand or finger-nasopharyngeal	<ol style="list-style-type: none"> RPNs must follow a decision support tool approved by their employer when carrying out nasopharyngeal suctioning. RPNs are limited to re-inserting previously established nasogastric tubes (e.g., replacing a blocked tube). Initial insertion of a nasogastric tube requires a client-specific order from a listed health professional.

Limits and conditions for acting within autonomous scope of practice (activities that do not require a client-specific order)	
Screening and Diagnostic Tests (cont'd)	
Assessing clients and treating conditions: inserting instrument, hand or finger- beyond the opening of the urethra	<ol style="list-style-type: none"> 1. RPNs must follow a decision support tool approved by their employer when inserting or flushing a catheter.
Assessing clients and treating conditions: inserting instrument, hand or finger- pelvic exams or cervical cancer screening	<ol style="list-style-type: none"> 1. RPNs who carry out pelvic exams or cervical cancer screening must: <ul style="list-style-type: none"> • successfully complete additional education, and • possess competencies outlined in Core Nursing Practice Competencies for Pelvic Exams (for Registered Nurses) established by the Provincial Health Services Authority (PHSA) or equivalent approved by their employer. 2. RPNs who carry out pelvic exams or cervical cancer screening must follow the Decision Support Tool for Registered Nurses: Pelvic Exam established by PHSA or an equivalent approved by their employer.
Assessing clients and treating conditions: inserting instrument, hand or finger- into artificial opening into the body	<ol style="list-style-type: none"> 1. RPNs are limited to inserting suprapubic and gastrostomy tubes in clients with stable and predictable physiological health. 2. RPNs are limited to carrying out ostomy care for clients with stable and predictable physiological health. 3. RPNs are limited to carrying out tracheostomy care for clients with stable and predictable physiological health.

Limits and conditions for acting within autonomous scope of practice (activities that do not require a client-specific order)	
Imaging	
Issue an instruction or authorization for the application of energy: X-rays for the purpose of tuberculosis screening to a named individual (except computerized axial tomography scan- CAT scans)	<ol style="list-style-type: none"> 1. RPNs who issue an instruction or authorization for a chest X-ray for the purpose of tuberculosis screening must possess the competencies outlined in Registered Nursing Competencies for Tuberculosis Screening established by the British Columbia Centre for Disease Control (BCCDC) or equivalent approved by their employer. 2. RPNs who issue an instruction or authorization for a chest X-ray for the purpose of tuberculosis screening must follow the BCCDC Non-certified Practice Tuberculosis Screening Decision Support Tool (for Registered Nurses) or equivalent approved by their employer.

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

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