

IV Medication Administration by Licensed Practical Nurses Guidelines

I. Introduction/Purpose:

- A. In accordance with the *Oklahoma Nursing Practice Act*, specifically 59 O.S. § 567.3a.2., “the practice of nursing” includes “execution of the medical regime including the administration of medications and treatments prescribed by any person authorized by state law to so prescribe.” Therefore, IV therapy and medication administration may be within the scope of practice of the Licensed Practical Nurse (LPN) who has **appropriate educational training and supervision**.
- B. The Registered Nurse (RN) is responsible for the patient assessment and analysis of data collected during the assessment in determining nursing care needs of the patient. The RN delegating IV medication administration to the LPN must be available to assess the patient and to analyze assessment data, as required. Availability of the RN for assessment must be considered by the RN delegating IV therapy to the LPN, such as in home health or hospice, where the RN is not usually immediately available.

II. Supervision and Delegation

- A. The LPN functions under the supervision or direction of a Registered Nurse (“RN”), licensed physician or dentist. [59 O.S. §567.3a.4]. The supervising individual has responsibility to appropriately delegate tasks and skills to a qualified person working under the nurse’s direction. Therefore, the RN delegating IV therapy/medication administration to an LPN working under the RN’s supervision must be able to verify that the LPN has been trained and is competent to perform the skill.
- B. The individual delegating IV therapy to the LPN has responsibility to adequately supervise the LPN. The term “supervising” is defined in the Rules of the Oklahoma Nursing Practice Act as: “providing guidance for accomplishing the nursing task or activity, with initial direction of the task or activity and periodic inspection of the actual act of accomplishing a task or activity”. [OAC § 485:10-1-2]
- C. The term “delegating” is defined in the Rules of the Oklahoma Nursing Practice act as: “entrusting the performance of selected nursing duties to individuals qualified, competent and legally able to perform such duties”. [OAC § 485:10-1-2]

### III. Training of the Licensed Practical Nurse

- A. The practicing LPN may not have been trained in IV therapy during her/his basic nursing educational program. Currently in Oklahoma, IV therapy is part of most LPN educational programs, but this has not been true for all programs in the past. Appropriate training may include training by the employer, and should be documented and maintained in the employee file.
- B. The Oklahoma Board of Nursing does not approve IV certification courses. Therefore, a licensee who advises an employer that they are IV certified may or may not have been trained as part of the certification process to perform the specific skills that the employer is requiring. The employer should verify the content of the IV certification course and identify a method to verify competency of the LPN in performing the skills required by the employer.
- C. The LPN's education, training and competency validation of skills must be specific to the types of access devices and medications used in the facility.

### IV. Policy and Procedure Requirements

- A. Policies and procedures addressing IV therapy/medication administration must be written and available to the LPN. Employer policies and procedures should address at least the following:
  - 1. identify intravenous fluids and medications the LPN is granted the authority to administer in the facility;
  - 2. determine routes of administration (e.g. peripheral lines, central venous catheters and central lines having external access) by which the LPN may infuse solutions, medications and if appropriate blood and blood products;
  - 3. state if the LPN can draw blood via peripheral devices, venipuncture, and/or a central venous line; and
  - 4. identify medications that may and **may not** be administered as IV push (bolus) by the LPN via peripheral or central devices.
- B. The LPN's job description should include IV therapy/medication administration if this is a required skill for the nursing position. The employer should have a mechanism for training and routine competency evaluation for these skills.
- C. The employer may also wish to refer to the Board's document entitled *Decision-Making Model for Scope of Nursing Practice Decisions: Determining RN/LPN Scope of Practice Guidelines* for assistance in determining parameters for the role of the LPN in IV medication administration in the facility. The guidelines may be accessed on the Board's website at:  
<http://www.oklahoma.gov/nursing/practice.html>
- D. The Infusion Nurses Society provides national standards for practice. Nurses may want to utilize this resource, along with the *Decision-Making Model*, when determining LPN scope of practice.

V. **Regulatory Authority:**

59 O.S. §567.3a.2, 3, 4 and OAC §485:10-1-2

VI. **References**

Infusion Nurses Society. 2021 Infusion Therapy Standards of Practice, 8th edition, ISBN 13:9780000166159

North Dakota Board of Nursing. Role of LPN in IV therapy. Retrieved May 18, 2022 from:

<https://www.ndbon.org/Practice/Policies-Procedures-Guidelines/LPNRole-IVTherapy.asp>

Texas Board of Nursing. LVNs Engaging in Intravenous Therapy, Venipuncture, or PICC Lines, Position Statement 15.3. Retrieved May 18, 2022, from:

[http://www.bne.state.tx.us/practice\\_bon\\_position\\_statements.asp](http://www.bne.state.tx.us/practice_bon_position_statements.asp)