

TENNESSEE BOARD OF NURSING POSITION STATEMENT

RE PRACTICE: LPN Care of Ventilator Dependent Patients in the Home Health

Setting

PURPOSE: The purpose of this policy is to protect the health and safety of the citizens of Tennessee.

AUTHORITY: Tennessee Code Annotated 63-7-108 Practical Nursing Defined

The “practice of practical nursing” means the performance for compensation of selected acts required in the nursing care of the ill, injured or infirm and/or carrying out medical orders prescribed by a licensed physician or dentist under the direction of a licensed physician, dentist or professional registered nurse. The licensed practical nurse shall have preparation in and understanding of nursing, but shall not be required to have the same degree of education and preparation as required of a registered nurse.

POSITION: It is the position of the Tennessee Board of Nursing that an LPN may provide home health care to a ventilator-dependent patient, but may only provide those services which fall within the scope of practice as an LPN, including:

Patient Care Responsibilities:

Monitor and maintain patient on high flow oxygen; deflate or inflate tracheostomy cuff; monitor cuff pressures using minimal leak technique; maintain security of tracheostomy patient’s airway- ties etc; disconnecting ventilator to do open suctioning; open suctioning patient while on a tracheostomy collar; use closed suction technique on a ventilated patient; use closed suction for patient on a high humidity high flow oxygen system; use a resuscitation bag to ventilate a tracheostomized patient with high flow oxygen during the suction procedure and during an emergency; change from ventilator to tracheostomy collar if circuit is preassembled and settings appropriately adjusted by RN or respiratory care practitioner; administer aerosol treatment to patient requiring disconnect of the circuit; give aerosol treatment to patients while on a tracheostomy collar; administer meter dose inhaler medication to patients while on the ventilator or tracheostomy collar; perform tracheostomy care on a ventilated patient or patient with a tracheostomy collar; change inner cannula of tracheostomy.

Equipment Responsibilities:

Turning the ventilator on or off during modality change (for example from tracheostomy collar and back to the ventilator); respond to alarms (high pressure, leak, frequent suctioning requirement, disconnect) and troubleshoot problems associated with frequently occurring issues *in consultation with a licensed respiratory therapist.*

The following activities are not within the scope of practice of the LPN caring for ventilator dependent patients in the home care setting:

Setting up and changing a ventilator or trach collar circuit; assembly of high humidity, high flow oxygen set up; application or management of speaking valve of patient on or off the ventilator; lavage of trach patient during suctioning; change HME daily on ventilator patient; adjustment of alarms; change out trach of tracheotomized patient; change ventilator settings except for on/off and standby.

Adopted September 27, 2007

Reformatted and Re-affirmed 2/2009 36

10/2010 in collaboration with the Tennessee Board of Respiratory Care

Addendum:

While all emergency situations cannot be anticipated, the board acknowledges that emergency situations occur and can sometimes be anticipated. The board charges the home health agency registered nurse supervisor to look for and attempt to anticipate emergencies that may require emergency action not always within the scope of practice for a licensed practical nurse. The agency Registered Nurse shall establish and ensure a training program for Licensed Practical Nurses on potential emergencies situations that allows for education of the procedure to help to stabilize the patient, practice on the steps to stabilize the patient and adequate supervision for back up. Both the Registered Nurses doing the training and the Licensed Practical Nurses receiving the training shall maintain a record of both the initial and annual training on emergency procedures. Having said this, the Tennessee Board of Nursing anticipates the need for LPNs practicing in home health agencies to replace the outer cannula in an emergency situation to establish a patent airway for a patient.

Reaffirmed 08-21-2014