

Intravenous (IV) Therapy by Licensed Practical Nurses Standards

The Intravenous (IV) Therapy by Licensed Practical Nurses standards are listed below. For your convenience and future reference, you may wish to bookmark the Alabama Administrative Code Link [<http://www.abn.alabama.gov/Content.aspx?id=123>]. Intravenous (IV) Therapy by Licensed Practical Nurses Standards are located **Rule 610-X-6-.14.**

610-X-6-.14 Intravenous (IV) Therapy by Licensed Practical Nurses.

- (1) A licensed hospital may develop a standardized procedure, as defined in Rule 610-X-6-.12, for intravenous (IV) therapy by a licensed practical nurse.
- (2) The minimum requirements for a licensed practical nurse to perform IV therapy includes successful completion of an organized program of study, supervised clinical practice, and demonstrated clinical competence, initially and at periodic intervals according to the requirements of Rule 610-X-6-.12.
- (3) The minimum training for the licensed practical nurse that performs selected tasks associated with IV therapy shall include:
 - (a) Anatomy and physiology.
 - (b) Fluid and electrolyte balance.
 - (c) Equipment and procedures utilized in intravenous therapy
 - (d) Complications, prevention, and nursing intervention.
 - (e) Introducing a peripheral intravenous device on an adult patient.
 - (f) Set-up, replacement, and removal of intravenous tubing for gravity flow and/or pump infusion.
 - (g) Intravenous fluid infusion calculations, and adjustment of flow rates on intravenous fluids, and administration of intravenous medications by piggyback.
 - (h) Procedures for reconstituting and administering intravenous medications via piggyback including but not limited to pharmacology, compatibilities and flow rates.
- (4) Medications may be administered by licensed practical nurses through a peripheral intravenous catheter by intravenous push provided the following criteria are met:
 - (a) A complete standardized procedure application is submitted and approved by the Board prior to implementation.
 - (b) The medication(s) does not require the substantial skill, judgment, and knowledge of a registered nurse.
 - (c) Documented one year of experience with IV therapy,
 - (d) On site supervision by a registered nurse at any time IV push medication therapy is performed by a licensed practical nurse.

- (i) The registered nurse is required to be physically present and immediately available in the facility.
- (ii) Heparin (10 units:1 ml) flush or saline flush via a peripheral IV line is not a medication within the meaning of these rules.
- (e) Medications that may be administered by peripheral IV push by a licensed practical nurse if identified in the licensed hospital's standardized procedure include, but are not limited to the following:
 - (i) H2 blockers.
 - (ii) Analgesics.
 - (iii) Antiemetics.
 - (iv) Antibiotics.
 - (v) Fifty percent (50%) dextrose in an emergency situation.

- (5) The minimum training for the licensed practical nurse that performs selected tasks associated with IV push therapy shall include:
 - (a) Pharmacology of specific drugs and reversal agents, if applicable, including but not limited to:
 - (i) Classification.
 - (ii) Indications.
 - (iii) Usual IV dosage.
 - (iv) Dilution.
 - (v) Contraindications and precautions.
 - (vi) Side effects.
 - (vii) Antidote, if applicable.
 - (viii) Nursing considerations and implications.
 - (b) Procedure for reconstituting medications including compatibilities.
 - (c) Technique of medication administration by IV push.
- (6) Tasks that shall not be performed by a licensed practical nurse include:
 - (a) Initiation of intravenous therapy in a neonate.
 - (b) Administration of:
 - (i) Solutions requiring titration. Solutions, such as heparin drips, that require changes based on lab results subject to written orders or protocol, are not solutions requiring titration for purposes of these rules.
 - (ii) Blood or blood components.
 - (iii) Plasma volume expanders.
 - (iv) Fibrinolytic or thrombolytic agents.
 - (v) GP-II-B-III-A inhibitors, also known as platelet-aggregate inhibitors.
 - (vi) Hyperalimentation administered by routes other than peripheral intravenous catheter.
 - (vii) IV medications for the purposes of moderate sedation or anesthesia.
 - (viii) IV medications via push or bolus through a central line including a peripherally inserted central catheter (PICC).
 - (ix) IV push insulin or chemotherapeutic agents. This does not preclude hanging a pre-mixed bag of fluids containing additives except for insulin and chemotherapeutic agents.
 - (x) Any other drugs deemed to be inappropriate by the licensed hospital standardized procedure.

- (c) Accessing or programming an implanted IV infusion pump.
- (d) Performance of the repair of a central venous route access device.
- (e) Performance of therapeutic phlebotomy.
- (f) Direct access of a central venous route access device including but not limited to:
 - (i) Implanted ports for intravenous therapy.
 - (ii) Lines used for hemodynamic monitoring.
 - (iii) Central venous catheters and devices including Groshong catheters, Hickman catheters and peripherally inserted central catheters (PICC). These rules do not prohibit licensed practical nurses from administering medications via piggyback or in secondary solutions via central lines.