

Nevada State Board of NURSING

GUIDELINES FOR PROTOCOLS FOR ADVANCED PRACTITIONER OF NURSING (APN)

“Protocol” means written directions for assessment and management of specified medical conditions that the Advanced Practitioner of Nursing (APN) and collaborating physician have agreed upon as a basis for their practice (NAC 632.072). Protocols may be disease-oriented, procedure-oriented and/or process-oriented. To avoid legal ramifications from standards set too high or too restrictive, to be reasonably met by practitioners at all times, in any setting, they should reflect safe and realistic care within the practice setting, scope of practice and education of the APN. Protocols must be maintained at all practice sites.

Disease-Oriented Protocols

Disease-oriented protocols are usually set up by using a list of all possible disease processes or medical conditions encountered by the APN. These conditions or processes are listed with a designation of whether they are assessed and treated by the APN independently, require a consultation with a collaborating physician, or require a referral to a physician. An example of such a protocol follows:

| Medical Condition | APN | Consultation | Referral |
|--|-----|--------------|----------|
| Antepartum: | | | |
| Initial prenatal exam | X | | |
| Repeat prenatal exam | X | | |
| Complication/Significant Risk Pregnancy | | X | |
| Acute Serious Complication/ High Risk Pregnancy | | | X |
| Abrasions | X | | |
| Abuse (sexual, physical, emotional) | X | X | |
| AIDS | | X | X |
| Allergic Reactions | X | | |
| Bites | | | |
| Human | | X | |
| Insect | X | | |

Disease-oriented protocols often need to be updated when individual learning has occurred or experience is gained.

Procedure-Oriented Protocols

Procedure protocols may be used by the APN in situations where the APN has obtained recognized, specialized training or education in doing certain procedures or minor surgery that traditionally have been performed or referred to a physician. The procedures may be listed in a separate section of the general protocols and referenced to standard procedure manuals or reference books. In some situations the APN may want to list the description of the procedure.

Examples of types of procedures that the APN may want to note are:

- Minor surgical procedures
- Lumbar Punctures
- Colposcopy
- Norplant implants and removals
- Ultrasound

Process-Oriented Protocols

Process protocols are flexible and easily adapted to all levels of practice settings. They also accommodate the rapid changes and complexity of the health care field. They are set up as levels of care: Primary, Secondary, and Tertiary. At any time based on the APN's assessment, she/he may stop practicing and consult or refer.

According to Rebecca Zettler, in The Process Protocol Workbook, a Primary level of care is one in which the APN performs all processes of data collection, assessment, ordering diagnostic studies and planning treatment. A Secondary care level is one where the APN may feel confident to collect data but may want to consult with the collaborating physician in the areas of assessment and/or treatment. A Tertiary care level is when the APN may be involved in an acute life-threatening condition where the initial evaluation and stabilization of the patient is performed and immediate notification and referral of management is transferred to a physician.

Process protocols may also include appendices to cover procedures, minor surgery, and ordering studies and therapies; and a section on prescribing, dispensing, and ordering drugs and devices. An appendix would also include a list of resources, a statement of competency by the collaborating physician, and a specialty-specific formulary. It may include state statutes and regulations pertinent to the APN and any certificates or documents that the APN feels reflects her/his skills or expertise.

APNs may choose any type of protocol, or create a combination of any of the protocols, to reflect their own practice settings.

Reference: Zettler, Rebecca. The Process Protocol Workbook. 1991.

Approved by the Advanced Practice Advisory Committee on 6/15/98
Approved by the Nevada State Board of Nursing on 12/10/98
Revised by the Advanced Practice Advisory Committee on 11/28/00