TRANSPORT OF CLIENT



POSITION STATEMENT for RN and LPN Practice

A Position Statement does not carry the force and effect of law and rules but is adopted by the Board as a means of providing direction to licensees who seek to engage in safe nursing practice. Board Position Statements address issues of concern to the Board relevant to protection of the public and are reviewed regularly for relevance and accuracy to current practice, the Nursing Practice Act, and Board Administrative Code Rules.

Issue:

It is within registered nurse (RN) scope of practice to function as members of interdisciplinary air and/or ground transport teams on a routine and/or as needed basis. Throughout a client transport, the RN is responsible for:

- providing and maintaining the required level of nursing care, including all ordered medical interventions and medications;
- managing all equipment necessary for client care; and
- ensuring overall client safety.

RNs providing nursing care during client transports are licensed and regulated by the North Carolina Board of Nursing and are not required to hold Emergency Medical Services (EMS) credentials. Employers may, however, require RNs employed by their agency to hold additional credentials or certifications prior to transporting clients.

RN Responsibilities and Role:

The responsibilities of the transport nurse include, but are not limited to:

- obtaining and documenting appropriate education, training, and initial and ongoing competency validation specific to the type of nursing transport responsibilities and activities being delivered;
- maintaining accountability for oversight and supervision of the care of the client;
- conducting comprehensive assessment, continuous evaluation, and reassessment of the effectiveness
 of the nursing care and medical interventions provided to the client; and developing and revising the
 plan of care appropriate to the client's needs;
- implementing appropriate interventions based on the plan of care, client priorities, emergency air and ground nursing transport standards of practice, established policies/procedures/protocols, standing orders, and orders received on-line/off-line from authorized providers including physicians, nurse practitioners, certified nurse midwives, and physician assistants;
- communicating and documenting all relevant assessments, nursing care, and medical treatments provided to the client, and the client's response to care;
- providing an accurate and thorough handoff report of client status, both written and verbal, to the receiving health care team;

- working collaboratively with other pre-facility, intra-facility, and inter-facility providers and healthcare professionals to ensure the continuum of optimum client care; and
- ensuring appropriate age and client specific equipment is available prior to embarking on the transport.

RN scope of practice for specific advanced activities, performed during transport and/or within the facility, are evaluated using the NCBON Scope of Practice Decision Tree for the RN and LPN. This tool provides for the careful consideration of standards of practice, evidence-based support, and appropriateness of an activity in a particular setting for a specific client or client population.

LPN Role:

Given the level of independent assessment, decision-making, nursing management, and evaluation required for the safe care of the client in transport situations, this activity is **beyond** licensed practice nurse (LPN) scope of practice.

The LPN may, however, provide convalescent transports for stable clients under the assignment and supervision of an RN, physician, dentist, or other person authorized by State law to provide LPN supervision.

References:

G. S. 90-171.20 (7) - Nursing Practice Act

21 NCAC 36.0224 – Components of Nursing Practice for the Registered Nurse

21 NCAC 36.0225 - Components of Nursing Practice for the Licensed Practical Nurse

NCBON Scope of Practice Decision Tree for the RN and LPN

Air and Surface Transport Nurses Association (ASTNA) – www.astna.org – Role of the registered nurse in the out-of-hospital environment.

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Revised: 5/2015, 9/2018; 9/2022