
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

Complementary therapies refer to a broad range of modalities such as, but not limited to, massage therapy, therapeutic touch, biofeedback, magnet therapy, reflexology, imagery, hypnosis, aromatherapy, and acupuncture. Some of these therapies are inherent in basic nursing practice while others require additional education/training prior to performing them. Complementary therapies are intended to be used in conjunction with the existing treatment plan, not to replace it.

BOTH RN AND LPN ROLES

- A. It is within the scope of practice to perform complementary therapies provided the RN or LPN has:
1. Documented knowledge, skill, and competency necessary to carry out the therapy in a safe manner, and
 2. Employing agency's policies and procedures support nurse's use of complementary therapies.
- B. When complementary therapy is used as a nursing intervention, this should be:
1. Reflected in the client's plan of care, and
 2. Documented in the client's medical record consistent with requirements for reporting and recording

NOTES

1. **Any state or local laws, which require licensure to perform the complementary therapy, must be followed.** For example, massage may be utilized as a nursing care intervention but a massage license is required to offer, provide, or practice massage in a broader context.
2. **Acupuncture can only be performed if the individual is licensed to perform this modality in North Carolina consistent with NC GENERAL STATUTES 90, Article 30 (Practice of Acupuncture).**
3. Nurses are held responsible and accountable for practicing at all times within the scope associated with their highest level of active licensure. Refer to "Practicing at Level Other Than Highest Licensure/Approval/Recognition Position Statement for RN, LPN, and APRN Practice" available at www.ncbon.com for additional information.

REFERENCES

- [G.S. 90-171.20 \(7\) \(b & h\) and \(8\) \(b & f\) – Nursing Practice Act](#)
[21 NCAC 36.0224 \(d\) and \(f\) – Components of Nursing Practice for the Registered Nurse](#)
[21 NCAC 36.0225 \(d\) and \(f\) – Components of Nursing Practice for the Licensed Practical Nurse](#)



COMPLEMENTARY THERAPIES

POSITION STATEMENT for RN and LPN Practice

Approved: 5/2001,
Revised: 4/2006, 4/2007; 5/2009; 11/2009; 5/2016, 9/2019
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