

OKLAHOMA BOARD OF NURSING  
2915 North Classen, Suite 524  
Oklahoma City, Oklahoma 73106  
(405) 962-1800

**Nursing Education and Nursing Practice Advisory Committee  
Minutes – June 22, 2005**

The Nursing Education and Nursing Practice Advisory Committee to the Oklahoma Board of Nursing met on June 22, 2005. Notice was posted on the Oklahoma Board of Nursing web site. A notice was also posted on the Cameron Building front entrance at 2915 North Classen Boulevard, Oklahoma City, Oklahoma, as well as the Board office, Suite 524, setting forward thereon the date, time, place and agenda for the meeting.

Place of Meeting:	Basement Conference Room, Cameron Building	
Time of Meeting:	10:00 a.m.	
Members Present:	Linda Fly	Associate Degree Nursing Directors Council
	Lana Bolhouse	Baccalaureate Nursing Deans Council
	Valerie McCartney	Practical Nursing Directors Council
	Ragina Holiman	Oklahoma Nurses Association
	Karen Tomajan	Oklahoma Nurses Association
	Lisa Griffitts	Oklahoma Organization of Nurse Executives
Members Absent:	Judy Unruh	Oklahoma Assoc. of Health Care Providers
	Melinda Laird	Oklahoma Organization of Nurse Executives
Executives	Chris Wiegel	Oklahoma Organization of Nurse Executives
Executives	Marilyn Seiler	Oklahoma Association of Home Care
	VACANT	Oklahoma Association of LPNs
Board Representatives:	Jackye Ward	
	Louise Talley	
Staff Representatives:	Gayle McNish	
	Louise Drake	
	Deborah Ball	

1.0 Call to Order: The meeting was called to order by Jackye Ward at 10:00 a.m.

- 1.1 Declaration of a quorum: A quorum was declared present.
  - 1.2 Introductions: Introductions were made.
  - 1.3 Announcements: G. McNish announced that Jack Nichols, OSALPN representative to the committee, recently passed away. She also announced that Melinda Laird, OONE representative to the committee, has been appointed to the Board. K. Tomajan reported on the results of an ISMP survey of health care providers on medication errors.
- 2.0 Committee Decision Regarding Approval of February 25, 2005 Committee Meeting Minutes: A motion was made (L. Bolhouse) and seconded (K. Tomajan) to approve the minutes.
- Voting:  
Yes: (6) L. Bolhouse, V. McCartney, R. Holiman, L. Fly, L. Griffiths, K. Tomajan  
No: (0)  
Absent: (5) J. Unruh, M. Laird, C. Wiegel, M. Seiler, OSALPN Representative
- 3.0 Verbal Reports Requiring No Action by Committee
- 3.1 Board of Nursing Update: G. McNish announced that a policy developed by the committee, entitled *Determining Faculty-Student Ratios in the Clinical Area* was approved by the Board at its May, 2005 meeting. Revisions to the AUA skills list were also approved.
  - 3.2 Advanced Practice Advisory Committee: L. Drake indicated the committee has not met since the last report provided.
  - 3.3 Advanced Unlicensed Assistant Advisory Committee: G. McNish reported that the committee met on May 3, 2005. The committee reviewed and recommended changes to the AUA skills list to allow unlicensed assistants not certified as AUAs to perform oral suctioning in conjunction with oral care.
  - 3.4 CRNA Formulary Advisory Committee: L. Drake reported that the committee met April 25, 2005. They recommended that the Board add a precaution to the use of promethazine hydrochloride that CRNAs should be aware of pediatric restrictions with the use of this medication. This was approved by the Board at its May, 2005 meeting
- 4.0 Review and Decision Regarding Recommendations of the Rapid Sequence Intubation

## Task Force on Use of Paralytics, Sedatives, and Analgesics in Rapid Sequence Intubation and Management of the Ventilator Patient

G. McNish reported that a Rapid Sequence Intubation Task Force met on May 24, 2005. Minutes from the task force meeting were included with the agenda packet. Karen Tomajan, Lisa Griffiths, and Chris Wiegel represented the Nursing Education and Practice Advisory Committee, Don Baker was appointed from the Emergency Nurses Association, and Tammy Hogue was appointed from the Critical Care Nurses Association. The task force was formed at the request of the Nursing Education and Practice Advisory Committee, in response to a practice issue submitted to the Board office for review. The specific questions submitted for review are 1) whether it is within the Registered Nurse's scope of practice to administer the medications succinylcholine, Vecuronium, Pancuronium, Rocuronium, or Fentanyl I.V. push with the ordering physician present and preparing to intubate a patient during rapid sequence intubation; 2) administering the same medications to an intubated patient without the ordering physician at the bedside for maintaining and sedating ventilator patients in the ICU or ER.

After a review of current literature, guidelines from other boards of nursing, and drug manufacturers' recommendations, the task force voted to recommend to this committee that inquiries on use of paralytics, sedatives, and analgesics for purposes of rapid sequence intubation or management of the ventilator patient be referred to the *Decision-Making Model for Determining Scope of Practice*. Copies of all material reviewed by the task force was included in the agenda packet and the material was reviewed with the committee members. After discussion, it was moved (K. Tomajan) and seconded (L. Griffiths) to accept the recommendation of the task force. No action by the Board will be required to implement this recommendation. L. Drake will draft a response to the individual originally submitting the question to the office.

### Voting:

Yes: (6) L. Bolhouse, V. McCartney, R. Holiman, L. Fly, L. Griffiths, K. Tomajan

No: (0)

Absent: (5) J. Unruh, M. Laird, C. Wiegel, M. Seiler, OSALPN Representative

### 5.0 Review and Decision on Revisions to *Guidelines for the Registered Nurse in the Administration, Management and Monitoring of Epidural Medications*:

At the last meeting, the committee reviewed *Guidelines for the Registered Nurse in the Administration, Management and Monitoring of Epidural Medications* regarding a questions received from a health care facility regarding the ability of the registered nurse to discontinue intrathecal catheters. Committee members requested that additional information be obtained on the use of intrathecal catheters prior to making a recommendation on this issue. G. McNish contacted the individual who submitted the

question to request additional information. In addition, she reviewed current literature in an attempt to find additional references on this topic. A copy of material submitted by the individual who submitted the question and references located by G. McNish were included with the agenda packet. However, the committee did not find that there was adequate information that addressed discontinuation of intrathecal catheters to allow them to make a recommendation on this matter. They requested that L. Drake contact the individual to request more information. The agenda item will be brought to the next meeting.

- 6.0 Review and Decision on Revisions to the *Preceptor Policy*: At the last meeting, the committee requested that G. McNish draft revisions to the *Preceptor Policy* that would allow students participating in community-based clinical experiences to provide limited care in community settings without the direct supervision of a faculty member or preceptor. A copy of draft revisions to the policy were included in the agenda packet. After discussion, it was moved (L. Bolhouse) and seconded (R. Holiman) to recommend to the Board that the draft revisions be accepted.

Voting:

Yes: (6) L. Bolhouse, V. McCartney, R. Holiman, L. Fly, L. Griffiths, K. Tomajan

No: (0)

Absent: (5) J. Unruh, M. Laird, C. Wiegel, M. Seiler, OSALPN Representative

- 7.0 Discussion on Role of the RN/LPN in Administering Local Anesthetic Infiltration Block for Physician-Implemented Procedures: L. Drake asked for the committee's input regarding a question she received on whether RNs and LPNs were prepared to administer local anesthetic infiltration blocks for physician-implemented procedures, such as removal of skin lesions. The committee reviewed the question using the decision-making model and concluded that, although RNs and LPNs may have training related to using a local anesthetic for purposes of starting an I.V., this training does not include the knowledge and skills necessary to allow them to provide such a block for physician-implemented procedures such as removal of skin lesions, unless they are prepared in an advanced practice role. L. Drake will draft a response to the individual asking the question.
- 8.0 Meeting: Monday, October 10, at 1:30 p.m.
- 10.0 Adjournment: The meeting was adjourned at 11:15 a.m.