

# **Appendix A:** RNs/RPNs & Autonomous Ordering of Screening and Diagnostic Tests for the Purpose of Communicable Disease Prevention and Management

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This document outlines regulatory requirements and best practices related to Registered Nurse (RN)/
Registered Psychiatric Nurse (RPN) autonomous ordering of select laboratory screening and diagnostic tests
with the issuance of a Medical Services Plan (MSP) practitioner number for the purpose of communicable
disease prevention and management. This optimization of autonomous nursing scope of practice facilitates
streamlined and timely access to care for clients.

# **Background**

As outlined in the BC College of Nurses and Midwives (BCCNM) Screening and Diagnostic Tests & Imaging Practice Standard for <u>Registered Nurses</u> and <u>Registered Psychiatric Nurses</u>, RNs and RPNs, within their autonomous scope of practice, may order or perform laboratory screening and diagnostic tests to screen for and diagnose conditions that support a nursing diagnosis<sup>1</sup>. These tests may also support other health professionals to make a diagnosis of disease, disorder, or condition and to plan treatment.

Certified Practice RNs and RPNs [RN(C)s & RPN(C)s] have an expanded scope of practice, and in addition to their scope of practice as an RN/RPN, they may order or perform laboratory screening and diagnostic tests to support a diagnosis of a disease, disorder, or condition as outlined for their certified practice designation.

### Medical Service Plan (MSP) Practitioner Numbers

The <u>Laboratory Services Regulation</u> was revised in 2023 to recognize RNs/RPNs as referring practitioners for a broad range of laboratory screening and diagnostic tests for the purpose of communicable disease prevention and management. As of November 2024, RNs/RPNs are now able to apply for and use an MSP practitioner number, which is required when ordering tests that are to be completed or processed in outpatient settings (e.g., nurses working with clients in outpatient community-based settings, such as a public health unit).

Per BCCNM standards, RNs/RPNs can apply for and use an MSP practitioner number to autonomously order select laboratory screening and diagnostic tests for the purpose of communicable disease prevention and management provided:

<sup>&</sup>lt;sup>1</sup> "Nursing diagnosis" means a clinical judgement of an individual's mental or physical condition to determine whether the condition can be ameliorated or resolved by appropriate interventions. This includes the potential risk of infection due to suboptimal immunity for a vaccine preventable disease for which pre- or post-vaccination serological testing may be indicated.

- they have the approval of their organization/employer; and
- their organization/employer has policies and processes to review and follow-up on test results, and processes for the nurse to refer or transfer care to another health professional when applicable.

See Laboratory Screening & Diagnostic Tests and Associated BCCDC Guidelines for a list of these tests.

RN(C)s/ RPN(C)s may also apply for an MSP practitioner number and use that number to order screening and diagnostic tests as set out in the certified practice decision support tools for their certified practice designation(s).

For information on the MSP practitioner number application and usage processes, go to: RN(C)s, RPN(C)s, and RNs, RPNs - Province of British Columbia (gov.bc.ca)

#### **Standard of Practice**

RNs/RPNs can autonomously order, perform, interpret and/or manage screening and diagnostic tests in accordance with standard controls on practice. These include:

- relevant legislation and regulations;
- BCCNM standards, limits and conditions;
- organizational/employer policies and processes;
- current evidence, relevant guidelines, and other resources; and
- their individual competence

Nurses are solely accountable and responsible for their clinical decision making when they order, perform, interpret and/or manage a screening and diagnostic test within their autonomous scope of practice. Nurses do not order screening and diagnostic tests for themselves, or anyone who is not their client.

When nurses order and/or perform screening and diagnostic tests within their autonomous scope of practice, they must:

- consider the client's physical, mental, emotional, spiritual, social, and cultural needs relevant to test recommendations,
- review the client's relevant health history, recent test results, and other relevant factors,
- perform and document appropriate clinical assessments and document clinical indication(s) for test(s),
- initiate consultation, referrals and/or transfer care to other health professionals when:
  - o client care would benefit from the expertise of other health professionals,
  - required by organizational/employer policies or processes, and/or

- o client care needs exceed the scope of practice and/or individual competence of the nurse.
- provide the client with information about the test(s), document the informed choice discussion and the client's choice, as applicable, and
- complete requisition(s) and label(s) completely and accurately and specify the health professional(s) who should receive the results, as applicable.

When nurses interpret and/or manage test results, including the management of test results ordered by another health professional, they must:

- monitor and follow up on the test results following organizational/employer policies and processes,
- communicate and collaborate with the client and/or the health care team in a timely manner about the test results, proposed follow-up care, and/or treatment plan, as applicable,
- consult, refer and/or transfer care to other health professionals when the care needs of the client exceed the scope of practice and or individual competence of the nurse, as applicable, and
- document:
  - client follow-up (and follow-up attempts),
  - o the test results, follow-up care, and/or treatment plan, as applicable, and
  - consultations, referrals, and/or transfers of care to other health professionals, as applicable.
- abide by reporting requirements for reportable communicable diseases as listed within the <u>REPORTING</u> <u>INFORMATION AFFECTING PUBLIC HEALTH REGULATION</u>, under the *Public Health Act*.

For more information regarding the BCCNM Screening and Diagnostic Tests & Imaging Practice Standard for Registered Nurses and Registered Psychiatric Nurses, go to:

- RN Screening and diagnostic tests & imaging
- RPN Screening and diagnostic tests & imaging

# **Laboratory Screening & Diagnostic Tests and Associated BCCDC Guidelines**

For the purpose of communicable disease prevention and management, the following laboratory screening and diagnostic tests can be ordered by RNs/RPNs with an MSP practitioner number, as required when working with clients in outpatient community-based settings. NOTE: This is not an exhaustive list, as the tests below pertain to the established guidelines within the <u>BC Communicable Disease Control Manual</u>. For the broader list of tests that RNs/RPNs can order with an MSP number, refer to the <u>Provincial Laboratory Medicines Services</u> webpage, under 'Practitioner Schedules' - <u>Schedule D</u> and <u>Related nursing scope of practice tests</u>.

Laboratory Test		Applicable guidelines within the BC Communicable Disease Control Manual	Applicable BCCDC Competencies	
Tuberculosis (TB)				
TB Sputa <sup>1</sup>	•	Chapter 4: Tuberculosis	TB Screening	
			Competencies	
Sexually Transmitted and Blood Borne Infections				
Hepatitis B:	•	Chapter 1: Communicable Disease Control,	<u>Immunization</u>	
HBsAg		Hepatitis B	Competencies for	
Anti-HBs	•	Chapter 2: Immunization	BC Health	
Anti-HBc Total			<u>Professionals</u>	
Anti-HBc IgM				
HBeAg				
Anti-HBe				
Hepatitis C:	•	Chapter 1: Communicable Disease Control,		
Anti-HCV		<u>Hepatitis C</u>		
HCV RNA				
Herpes Simplex Virus (HSV):	•	Chapter 5: Sexually Transmitted Infections, Herpes		
HSV 1 and 2 serology		Simplex Virus (HSV) non-certified practice DST		
HSV NAT				
Human immunodeficiency	•	Chapter 5: Sexually Transmitted Infections,		
virus (HIV):		Guidelines for Testing, Follow-up, and Prevention of		
HIV 1 and 2 serology		HIV		

<sup>&</sup>lt;sup>1</sup> For the purpose of TB screening, both chest x-rays and IGRA tests may be used. However, these tests are not included in the RN/RPN Laboratory Services Practitioner Schedule, and as such, RNs/RPNs are unable to use their MSP practitioner number to order these tests; should this occur, the laboratory or radiology clinic may request payment from the client or refer them back to their health care provider to seek a requisition from an appropriate referring practitioner.

Laboratory Test	Applicable guidelines within the BC Communicable Disease Control Manual	Applicable BCCDC Competencies		
Syphilis:	Chapter 5: Sexually Transmitted Infections, Syphilis			
Syphilis Antibody	non-certified practice DST			
Syphilis NAT				
Respiratory Diseases (Pertussis, Influenza, COVID-19, Respiratory Syncytial Virus [RSV])				
Pertussis:	Chapter 1: Communicable Disease Control,	<u>Immunization</u>		
Bordetella Pertussis NAT	<u>Pertussis</u>	<u>Competencies for</u>		
	Chapter 2: Immunization	BC Health		
COVID-19:	Chapter 1: Communicable Disease Control, COVID	<u>Professionals</u>		
SARS-CoV-2 virus NAT	• Chapter 2: Immunization			
Influenza:	Chapter 2: Immunization			
Influenza A/B NAT				
RSV:	Chapter 2: Immunization			
RSV NAT				
Other Vaccine Preventable Diseases				
Hepatitis A:	Chapter 1: Communicable Disease Control,	<u>Immunization</u>		
Anti-HAV IgM	<u>Hepatitis A</u>	<u>Competencies for</u>		
Anti-HAV Total	Chapter 2: Immunization	BC Health		
Measles:	Chapter 1: Communicable Disease Control, Measles	<u>Professionals</u>		
Measles IgM	<u>Chapter 2: Immunization</u>			
Measles IgG				
Мрох:	Chapter 1: Communicable Disease Control, Mpox			
Mpox NAT	Chapter 2: Immunization			
Mumps:	Chapter 1: Communicable Disease Control, Mumps			
Mumps IgM	Chapter 2: Immunization			
Mumps IgG				
Rubella:	Chapter 1: Communicable Disease Control, Rubella			
Rubella IgM	Chapter 2: Immunization			
Rubella IgG				
Rabies:	Chapter 1: Communicable Disease Control, Rabies			
Rabies antibody	<u>Chapter 2: Immunization</u>			
Varicella:	Chapter 1: Communicable Disease Control, Varicella			
Varicella IgG	Chapter 2: Immunization			
Varicella Zoster Virus NAT				