

ADMINISTRATION OF METHADONE BY LICENSED PRACTICAL NURSES

The Wisconsin Board of Nursing has been asked to provide an opinion on whether it is within the scope of practice of a licensed practical nurse (L.P.N.) to administer methadone in a narcotic maintenance treatment program. Secondly, if it is within the scope of practice of an L.P.N. to administer methadone, what level of supervision would be legally required of the L.P.N.? The following analysis represents the Board of Nursing's position regarding the interpretation of the administrative code governing the standards of practice of the L.P.N.¹

The scope of practice for licensed practical nurses is set forth in Chapter N6.04, Wis. Admin. Code. The code delineates two categories of practice for the L.P.N.; basic patient situations and complex patient situations. The following provisions in N6.04 (1) apply to the standard of practice of an L.P.N. in basic patient situations.

PERFORMANCE OF ACTS IN BASIC PATIENT SITUATIONS. In the performance of acts in basic patient situations, the L.P.N. shall, under the general supervision of an R.N. or the direction of a physician, podiatrist, dentist or optometrist;

- (a) accept only patient care assignments which the L.P.N. is competent to perform;
- (b) Provide basic nursing care;
- (c) Record nursing care given and report to the appropriate person changes in the condition of the patient;
- (d) Consult with an R.N., physician, podiatrist, dentist or optometrist in cases where an L.P.N. knows or should know a delegated nursing or medical act may harm a patient; and
- (e) Perform the following other acts when applicable:
 - 1. Assist with the collection of data;
 - 2. Assist with the development and revision of a nursing care plan;
 - 3. Reinforce the teaching provided by an R.N., physician, podiatrist, dentist or optometrist and provide basic health care instruction; or
 - 4. Participate with other health care team members in meeting basic patient needs.

¹ This paper does not represent an analysis of any state or federal laws or regulations which may govern the certification or operation of a narcotic maintenance treatment program or the personnel who are authorized health care providers in such programs.

The following provisions in N6.04 (2) apply to the standard of practice of the L.P.N. in complex patient situations.

PERFORMANCE OF ACTS IN COMPLEX PATIENT SITUATIONS. In the performance of acts in complex situations the L.P.N. shall:

- (a) Meet standards under sub. (1) under the general supervision of an R.N., physician, podiatrist, dentist, or optometrist.
- (b) Perform delegated nursing or medical acts beyond basic nursing care under the direct supervision of an R.N., physician, podiatrist, dentist, or optometrist. An L.P.N. shall, upon the request of the board, provide documentation of his or her nursing education, training or experience which prepares the L.P.N. to competently perform these assignments.

The scope of practice of the L.P.N encompasses a range of patient care situations and is not static. The L.P.N. may perform duties beyond basic nursing care if such duties are consistent with his or her educational preparation. The L.P.N. may also perform additional duties pursuant to the orders of a licensed physician, optometrist, podiatrist, dentist or registered nurse. The scope of practice of the L.P.N., changes as knowledge, technology and developments occur in the health care field. Fundamentally, the L.P.N. must have the requisite education, training and experience to perform the delegated duties whether the nursing care is described as basic or complex.

The administration of methadone falls within the realm of basic patient care if the patient's medical condition is stable and the dosing level is not frequently changing. In basic patient care situations, the L.P.N. administers the medication dose, witnesses the consumption of the dose, and observes and records the administration. In basic patient care situations, the administration of methadone shall be performed by the L.P.N. under the general supervision of a physician or registered nurse. General supervision means to regularly coordinate, direct and inspect the practice of another; it does not require that the supervising health care provider be available on-site at all times.

In other situations when the patient is not stable, such as during the induction phase of a narcotic maintenance treatment program, or when the patient is non-compliant with treatment or has other co-morbidities, the administration of methadone may constitute a complex patient situation that requires the performance of delegated medical or nursing acts beyond basic care nursing care. The L.P.N. who administers methadone in a complex patient situation shall be under the direct supervision of a physician or registered nurse. Direct supervision requires immediate availability to continually coordinate, direct and inspect at first hand the practice of another. Direct supervision has been generally defined as on-site presence, access or communication within a relatively short time period.

The role of the L.P.N. in administering methadone represents merely one aspect of the continuum of care for the patient in a narcotic maintenance treatment program – the administration of the medication. The L.P.N. cannot act independently or be required to make an assessment, diagnosis or treatment decision. The necessity of precisely adhering to the written protocols for administration and the reporting of any change in a patient's condition are imperative. The L.P.N. must be either under the general or direct supervision of another health care provider, such as physician or registered nurse, who has the knowledge, skill and ability to coordinate, direct and inspect the L.P.N. practice. The level of supervision will vary according to the complexity of the patient care involved.