Legislation and Nursing Regulations

As a nurse, you understand that legislation and nursing regulations are essential for providing safe and competent care. In this module, we will explore health-care legislation and nursing regulations, focusing on how they establish who is authorized to practice and define the scope of nursing practice. We will also identify the three categories of authorized nursing activities: non-restricted activities, restricted activities that do not require an order, and restricted activities that require an order. This understanding will help you know your scope of practice and ensure the safety of those in your care.

The information provided in this module is current as of today. Changes to legislation and nursing regulations are anticipated and it is important to revisit this information regularly to ensure you are current

Note: This module is designed specifically for nurses. If you're a midwife, please refer to the separate modules created for midwifery practice.

Estimated time: 15 minutes

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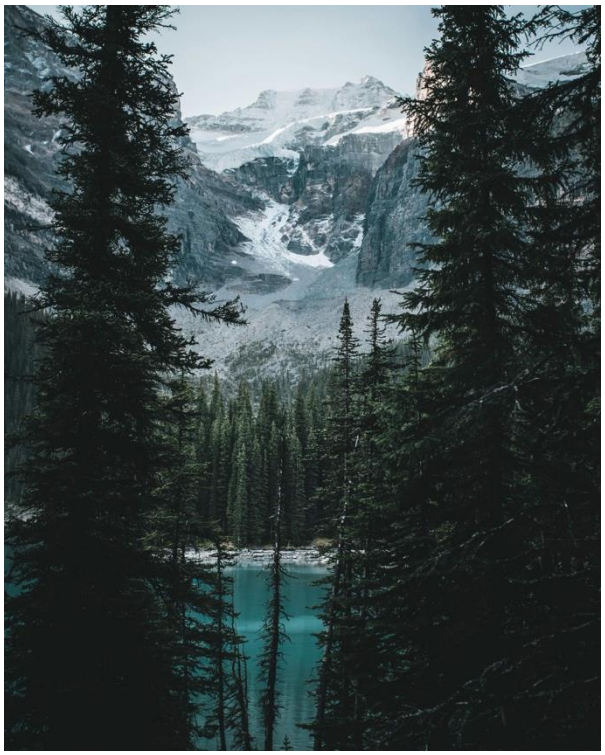
Territorial acknowledgement



We acknowledge the rights and title of the First Nations whose collective unceded territories encompass the land base colonially known as British Columbia. We give specific thanks to the hənt8qt8əmint8əmt8 speaking peoples the xt8məθkʷəy̓əm (Musqueam) and sel'íl'witulh (Tsleil- Waututh) Nations and the Sḵwx̱wú7mesh-ulh Sníchim speaking Peoples the Sḵwx̱wú7mesh Úxwumixw (Squamish Nation), on whose unceded territories BCCNM's office is located. We also give thanks for the medicines of these territories and recognize that laws, governance, and health systems tied to these lands and waters have existed here for over 9000 years.

We also acknowledge the unique and distinct rights, including rights to health and wellness, of First Nations, Inuit, and Métis peoples from elsewhere in Canada who now live in British Columbia. As leaders in the settler health system, we acknowledge our responsibilities to these rights under international, national, and provincial law.

Legislation

Introduction

There are misconceptions about legislation and nursing regulation. Consider whether the following statements are fact or fiction.

Nursing regulations are the same across Canada

Fiction: While nursing is regulated across Canada, each province and territory has its own regulatory body and nursing regulation. This means that the scope of practice, registration requirements, and other aspects of nursing practice can vary between jurisdictions.

Nurses can practice without registration or licensing in B.C.

Fiction: In B.C., it is illegal to practice nursing without being registered with BCCNM. BCCNM regulates nursing practice to ensure public safety by upholding professional standards. All nurses must maintain practising registration to practice legally.

Restricted activities are activities nurses are not allowed to perform

Fiction: Restricted activities are higher risk activities that only a regulated health professional, like a nurse, is authorized to perform. 'Restricted' means that these activities are reserved for certain health professionals to perform. These activities are outlined in each nursing designations' regulation.

Legislation and the nursing regulations impact a nurse's practice

Fact: Legislation and regulations define what nurses are legally allowed to do. In B.C., regulations under the *Health Professions Act* guide everything from scope of practice to licensing and accountability. Nurses must follow these rules to practice legally and protect the public.

How did you do? Whether you got them all or missed a few, it's all part of the learning process. Over the following lessons, you'll learn about the foundational laws that ensure public safety, uphold standards, and guide professional conduct. First, let's start by learning what legislation governs nursing practice.

Provincial legislation

The *Health Professions Act* (*HPA*) is provincial legislation that regulates the majority of B.C.'s health professions. Each health profession has its own regulation under the *HPA*.

In 2020, the government introduced new legislation to modernize the province's health regulatory system. The *Health Professions and Occupations Act (HPOA*) received Royal Assent in November 2022. Only parts of it are in force. The *HPA* remains the governing legislation for health professionals and regulatory colleges.

Indigenous Peoples

The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) is a global human rights declaration adopted by the United Nations in 2007. It sets out minimum standards for the survival, dignity, and well-being of Indigenous Peoples.

The *Declaration on the Rights of Indigenous Peoples Act* (*DRIPA*), passed in B.C. in 2019, legally commits the province to align its laws with UNDRIP. It provides a framework for upholding Indigenous rights in provincial programs, services, and legislation.

What do UNDRIP and *DRIPA* mean for nurses?

- **Practice culturally safe and anti-racist care.** Nurses are expected to recognize, reflect and actively work to address Indigenous-specific racism in health care. Providing culturally safe, trauma-informed care is not optional—it is part of ethical and professional nursing practice. Nurses must critically reflect on their own assumptions, power, and privilege when caring for Indigenous clients and families.

- **Respect informed consent and self-determination.** UNDRIP affirms Indigenous Peoples' right to make decisions about their own health care. Nurses must support informed consent, respect traditional healing practices, and recognize client rights in decision-making.

- **Respect Indigenous Peoples ways of knowing and being.** ***DRIPA*** pushes health professionals to recognize Indigenous laws and systems of knowledge. Nurses are responsible for providing culturally safe and anti-racist care to Indigenous clients, families, and communities.

- **Educate yourself.** Nurses must engage in ongoing education to ensure they provide culturally safe care. This may include education on colonialism, Indigenous health disparities, and the history of residential schools. BCCNM's standards reflect this as part of the nurses' duty to provide safe, ethical, and person-centred care.

What you need to do

Incorporate the following practices to promote cultural safety and humility in health-care. By following these practices, you will learn how to reflect on personal biases, integrate inclusive practices into your daily routines, and advocate for systemic changes that support Indigenous health and rights.

Learn

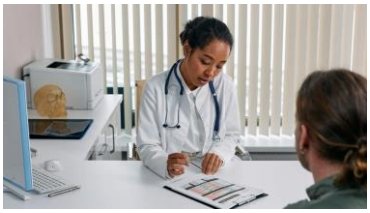
Learn about UNDRIP and DRIPA and how they apply to health care.

Reflect

Reflect on personal biases and how they may imp act Indigenous clients.

Integrate

Integrate cultural safety and cultural humility into daily practice, documentation, and communication.



Acknowledge and support

Acknowledge and support Indigenous healing practices when providing care.

Advocate

Advocate for systemic changes that support Indigenous rights and health equity.

Incorporate these practices to promote cultural safety and humility in health care. By learning about UNDRIP and *DRIPA*, reflecting on personal biases, integrating inclusive practices, supporting Indigenous healing, and advocating for systemic change, you contribute to safe, more equitable care for Indigenous clients.

Up next, an overview of the nursing regulations.

Lesson 3 of 8

Nursing regulations

Scope of practice describes the activities that a health professional is **educated**, **competent**, and **authorized** to perform, in keeping with the terms of their license. Aspects of nursing scope of practice may overlap or be shared with other regulated health professions.

Understanding nursing regulations

Nursing regulations help outline what each type of nurse can do, making it clear what activities they're legally allowed to perform (scope of practice). This clarity ensures that everyone understands the distinct scope or practice of Licensed Practical Nurses (LPNs), Nurse Practitioners (NPs), Registered Nurses (RNs), and Registered Psychiatric Nurses (RPNs).

As a regulatory body, the British Columbia College of Nurses and Midwives (BCCNM) is mandated by the *HPA* to set standards, limits, and conditions for nursing practice. This ensures that nurses can provide safe, and competent, and ethical care when practising within scope no matter where they practice.

Review your nursing regulation

Click the link to go to your nursing regulation:

- Nurses (Licensed Practical) Regulation
- Nurses (Registered) and Nurse Practitioners Regulation
- Nurses (Registered Psychiatric) Regulation

How do nursing regulations define what nurses do?

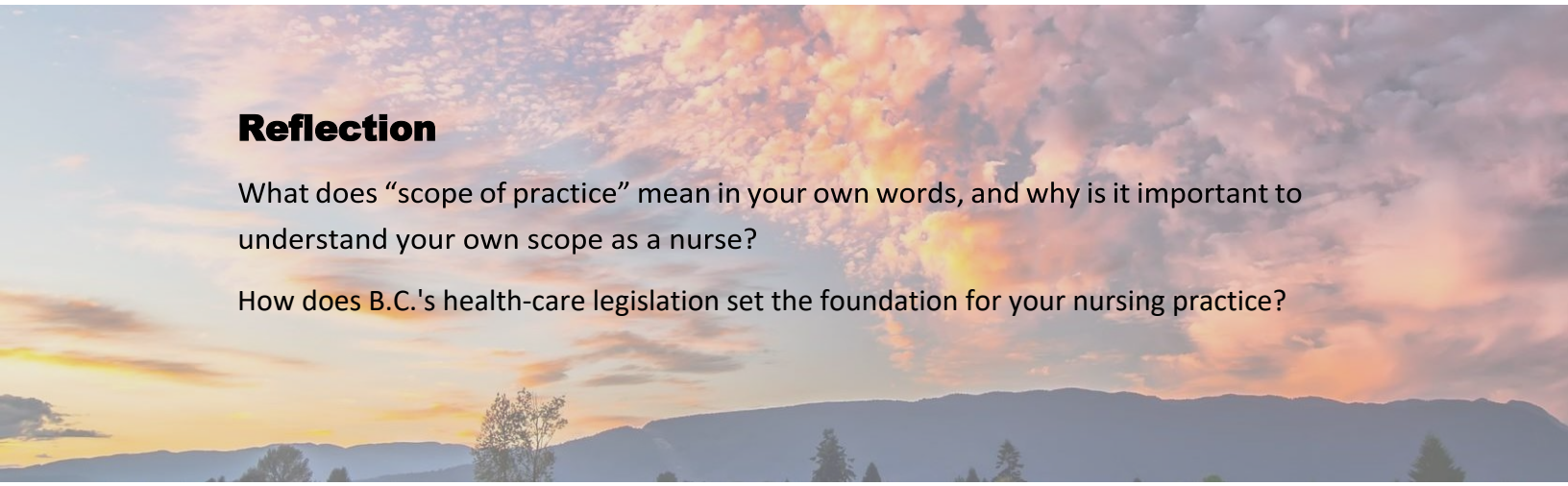
Nursing regulations can be complex and use legal terminology that may be challenging to understand. However, this legal language serves an important purpose—it encompasses the various roles that nurses fulfill. Consider the following excerpt from nursing regulation:

> *"A registrant in the course of practising nursing may do any of the following: (a) perform a procedure on tissue below the dermis, below the surface of a mucous membrane or in or below the surface of the cornea."*

This statement is broad, which means it includes a range of activities that a nurse may perform involving care below the dermis, mucous membranes, or cornea, without specifying particular activities such as "take a blood glucose reading".

While having a list of specific activities may seem beneficial, it is not practical given the rapid evolution of health care. Such lists could quickly become outdated or restrict the scope of nursing practice.

If you are ever uncertain about the regulations, it is advisable to contact your professional practice office or BCCNM's standards' support for clarification.



Reflection

What does "scope of practice" mean in your own words, and why is it important to understand your own scope as a nurse?

How does B.C.'s health-care legislation set the foundation for your nursing practice?

Regulatory terms to know

The following terms are used in legislation and BCCNM documents, so it is important to understand what they mean. Click on each tab to learn more.

RESTRICTED ACTIVITY | REGULATED AND UNREGULATED HEALTH PROFESSIONAL | AUTHORIZING MECHANISMS | AUTHORIZED HEALTH PROFESSIONAL

Restricted activity is a term used in the nursing regulations and in BCCNM documents.

A restricted activity is a higher-risk activity that can only be done by regulated health professionals who have the proper training. It doesn't mean the activity is "off-limits"—just that it must be done by someone qualified.

For example: Starting an IV or giving an injection is a restricted activity whereas bathing a client is a non-restricted activity.

RESTRICTED ACTIVITY | **REGULATED AND UNREGULATED HEALTH PROFESSIONAL** | AUTHORIZING MECHANISMS | AUTHORIZED HEALTH PROFESSIONAL

A regulated health professional is licensed by a regulatory body (like BCCNM) and has legal authority to perform specific health-care activities.

Unregulated providers are not licensed by a regulatory body and don't have a regulated scope of practice or the authority to perform restricted activities.

For example: Nurses, doctors, pharmacists, physiotherapists are regulated health professionals whereas care aides and lab technicians are unregulated health professionals.

RESTRICTED ACTIVITY	REGULATED AND UNREGULATED HEALTH PROFESSIONAL	**AUTHORIZING MECHANISMS**	AUTHORIZED HEALTH PROFESSIONAL

The nursing regulations authorize (“permit”, “allow”) nurses to:

- practice nursing, and
- perform certain restricted activities without an order (autonomously) or with an order.

Authorization or "permission" is required before a nurse can perform a restricted activity that requires an order. This permission is given through an authorizing mechanism. An “order” is an example of an authorizing mechanism.

For example: A client-specific order from a physician to administer a opioid medication is an authorizing mechanism. A recommendation or suggestion by a health care professional is not an authorizing mechanism.

RESTRICTED ACTIVITY	REGULATED AND UNREGULATED HEALTH PROFESSIONAL	AUTHORIZING MECHANISMS	**AUTHORIZED HEALTH PROFESSIONAL**

An authorized health professional is a health professional listed in the nursing regulations who can give an order for certain restricted activities. Each nursing designation has its own list of authorized health professionals.

For example: A nurse may act on an order from a physician (an authorized professional), but not from a massage therapist (a non-listed professional).

Check your understanding

Match each term with its correct definition. You can find the answer key at end of the module.

Regulated health professional	Someone who is licensed or registered with a professional regulatory body in the province.
Authorizing mechanism	Provincial legislation that regulates the majority of B.C.'s health professions.
Scope of practice	Higher risk activities that may cause harm if performed by an unqualified person.
Restricted activity	Activities that a nurse is educated, competent, and authorized to perform.
Health Professions Act	A way to obtain the authority (be permitted) to perform a restricted activity.

What is the purpose of nursing regulations?

a) To set the scope of nursing practice

b) To replace the need for professional judgment in nursing practice

c) To create a universal list of procedures all nurses must follow

d) To outline the specific activities nurses must perform daily

In the next lesson, we'll look at the three types of nursing activities outlined in the nursing regulations and who is authorized to perform them.

Lesson 4 of 8

Nursing activities

Non-restricted vs. restricted activities

Nursing practice involves a wide range of activities and responsibilities aimed at promoting health and well-being. These activities include non-restricted and restricted activities such as administering medications, monitoring vital signs, and providing emotional support.

In the nursing regulations, nursing activities common to all nurses fall into two general categories:

Non-restricted activities

Non-restricted activities include activities not listed in the restricted activities sections of the nursing regulations. These activities are a core part of nursing practice. They are not reserved for nurses alone and may be performed by other regulated health professionals and unregulated care providers.

Restricted activities

Restricted activities include higher risk activities that are reserved for regulated health professionals, like nurses. There are two categories of restricted activities in general nursing practice:

- Restricted activities that do not require an order (section 6 in nursing regulations)
- Restricted activities that require an order (Section 7 in nursing regulations)

Activities overview

This table provides a detailed overview of various nursing activity types, categorized by their level of restriction and the corresponding regulation sections. Each category outlines the scope of practice, authorization requirements, and specific details relevant to nurses and other health-care professionals. Use this information to understand the distinctions between non-restricted activities, restricted activities, and specialized practices within the nursing regulations.

NURSING ACTIVITIES OVERVIEW			
Activity type	**Descripti on**	**Regulatio n section**	**Examples**
Non-restricted Activities	Core nursing activities not listed as restricted. May be performed by nurses, other health professionals, or unregulated care providers.	Covered by the general scope or practice statement.	Perform a nursing assessment; educate clients.
Restricted Without Order	Nurses may perform these tasks independently (autonomously) without requiring authorization from another professional when expectations outlined in standards are met.	Section 6 of all nursing regulations	Make a nursing diagnosis; treat anaphylaxis; perform wound care.
Restricted Requiring Order	Nurses need authorization from an authorized health professional to perform these higher-risk tasks.	Section 7 of all nursing regulations	Give an intramuscular injection; administer an antibiotic medication.
RN and RPN Certified Practice	Specific restricted tasks authorized for nurses with certified practice designation.	Section 7.1 of RPN regulation and section 8 of RN/NP regulation.	Prescribe medications for Opioid Use Disorder following certified practice decision support tools.
NP Activities	Restricted tasks specific to Nurse Practitioners.	Section 9 of RN/NP regulation.	Diagnose a medical disease or disorder; prescribe medications.

Standards Consultants are available if you have questions about understanding or applying the standards to practice. To connect with a Standards Consultant, fill out our Standards Support Intake Form.

Check your understanding

Check your understanding of the types of nursing activities with a couple of questions.

Teonna teaches a client how to manage their new diabetes diagnosis. What type of activity is this?

a) Restricted

b) Non-restricted

c) Delegated

d) Unauthorized

Which of the following is an example of a restricted activity that requires an order under nursing regulations?

a) Treating anaphylaxis autonomously

b) Giving an intramuscular injection

c) Monitoring vital signs

d) Educating clients about health management

Understanding your scope of practice is essential for effective nursing. It is important to know when you can act independently (autonomously) without an order and when you must obtain an order before proceeding.

Next, we'll explore the similarities and differences between regulated and authorized health professionals.

Lesson 5 of 8

Regulated and authorized health professionals

Imagine this

Ffion, a new nurse on a medical-surgical unit, is reviewing a client's chart when she sees an order written by a podiatrist. She pauses—can I act with an order from a podiatrist? She knows the podiatrist is a regulated health professional but is not sure if she is allowed to act with an order they have given.

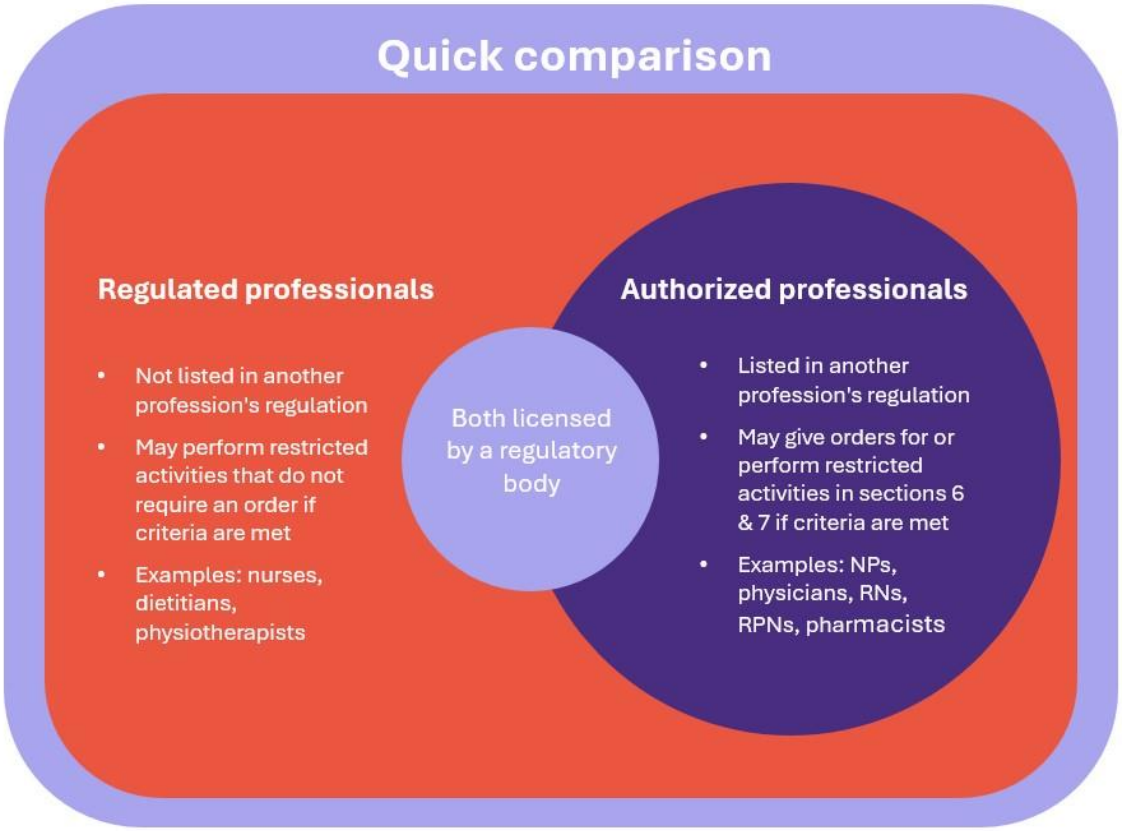
Later that day, during handover, a colleague refers to "authorized" professionals as the ones allowed to give certain orders. Ffion starts to wonder: What's the real difference between regulated and authorized health professionals?

In this lesson, you'll explore the similarities and differences between regulated and authorized health professionals. You'll learn who is authorized to give orders that nurses are allowed to act with, and how nurses get the permission to act with those orders.

Regulated and authorized

Ffion's scenario highlights an important distinction between regulated and authorized health professionals. A regulated health professional is someone who has met specific educational and licensing requirements to practice in their field, such as a podiatrist or a nurse. However, being authorized means that as a regulated health professional, they also have the legal right to perform the activities outlined in their regulation, which may include giving orders for activities that require an order. Only certain regulated health professionals are authorized to give orders for activities that require an order that nurses can follow.

Think of it like this: authorized professionals who can give orders that a nurse can follow are a specific group within the broader category of regulated professionals. Both groups can perform certain restricted activities, since they are regulated an authorized, but authorized professionals who are allowed to give orders have additional responsibilities. Simply, all regulated health professionals are authorized to perform the activities within their regulations, but not all regulated health professionals are authorized to give orders that can be followed by nurses.



How do I know who is authorized?

Each nursing regulation defines who is considered a "health professional" under that regulation. This definition specifies which professions are permitted to give orders that nurses under that nursing regulation may act with.

These definitions vary across the nursing regulations. For instance, nursing is included in the definition of health professional for LPNs, but not for RNs or RPNs. Consequently, LPNs are legally authorized to act with orders from RNs or RPNs. If a profession is not included in the definition of health professional, those practitioners are not permitted to issue orders for any activities that require an order (i.e., in section 7).

Authorizing mechanism – A closer look

Authorized health professionals are permitted to give orders for activities that require an order under section 7 of the nursing regulations. But how does this authorization occur? An authorizing mechanism is a structured process that grants nurses the permission to perform specific restricted activities.

Before a nurse can perform a restricted activity that requires an order—such as administering narcotic or antibiotic medications—they must first obtain authorization. This authorization typically takes the form of a client-specific order.

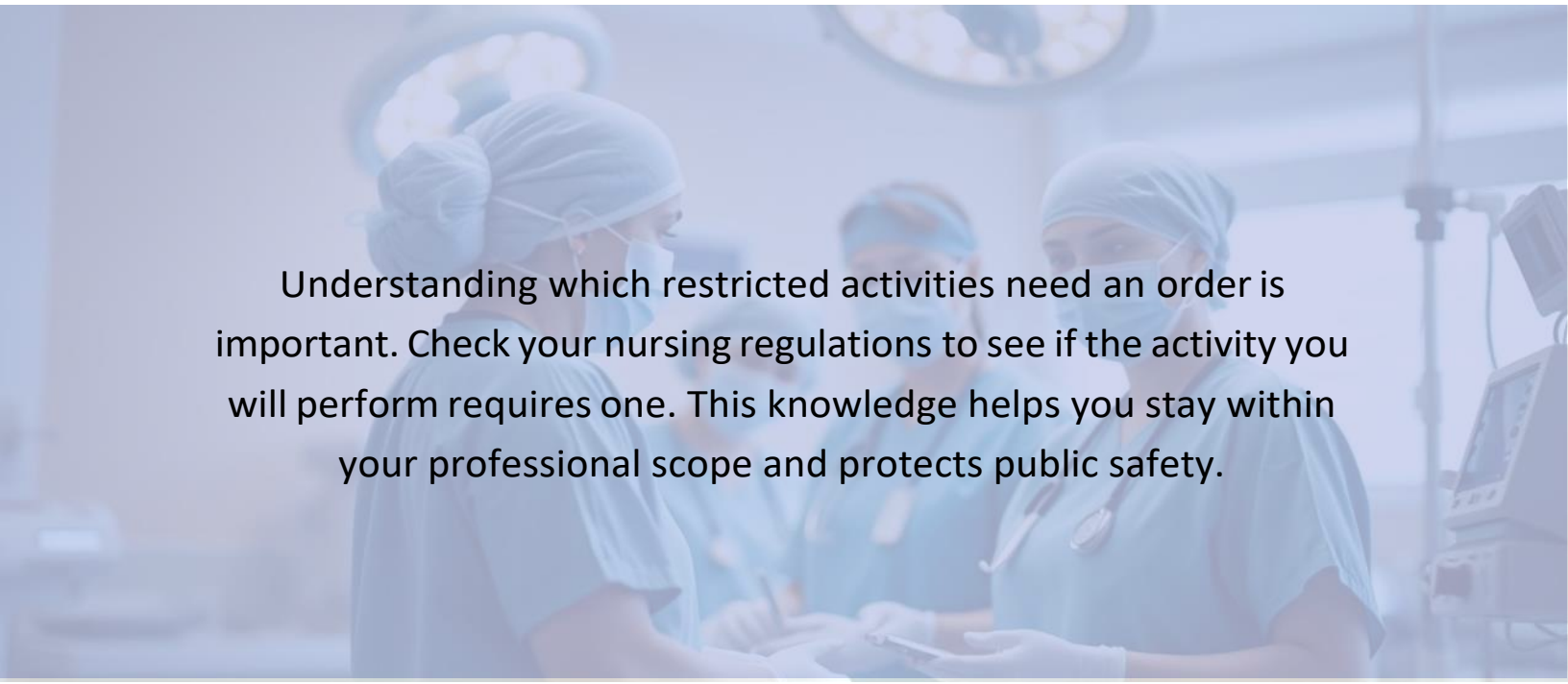
Client-specific order

A client-specific order is an instruction or authorization given by a regulated health professional for a nurse to provide care for a specific client. Care or services may include restricted activities that do or do not require an order, or a non-restricted activity. A consultation, referral or professional recommendation is not an order.

What makes a client-specific order valid?

For an order to be valid and safe, it must be:

- Client-specific. The order must be client-specific and recorded in the client's permanent record.
- Documented. The order must be legible, dated, and signed with a written or electronic signature.
- Detailed. It should be clear and complete, providing all necessary details for safe execution, including timing, frequency, and dosage. Example: Metoprolol 25 mg PO BID.
- Signed. The order must be validated with a written or electronic signature from the issuing health professional.



Check your understanding

You receive a written order from a nurse practitioner (NP) that states: "Start fluticasone 100 mcg via inhaler BID." The order is documented in the chart and signed. What should you do?

a) Refuse the order because only doctors can prescribe medication

b) Accept and follow the order, as all criteria for a valid order are met

c) Call the NP to confirm the dosage

d) Wait for a pharmacist to co-sign

A physiotherapist gives an order for you to administer a PRN muscle relaxant to a client. The recommendation is made verbally but not written down. What is the best action to take?

a) Proceed with the medication because the client agrees

b) Call the pharmacy to verify the prescription

c) Decline to give the medication because physiotherapists are not authorized to order this restricted activity

d) Ask the physiotherapist to provide a written order

A consulting physician recommends that a client's medication be discontinued. What should the nurse do?

a) Discontinue the medication based on the physician's recommendation

b) Wait for a pharmacist to confirm the recommendation

c) Request a client-specific order from the physician before discontinuing the medication

d) Ask the client if they agree to stop the medication

Reflection

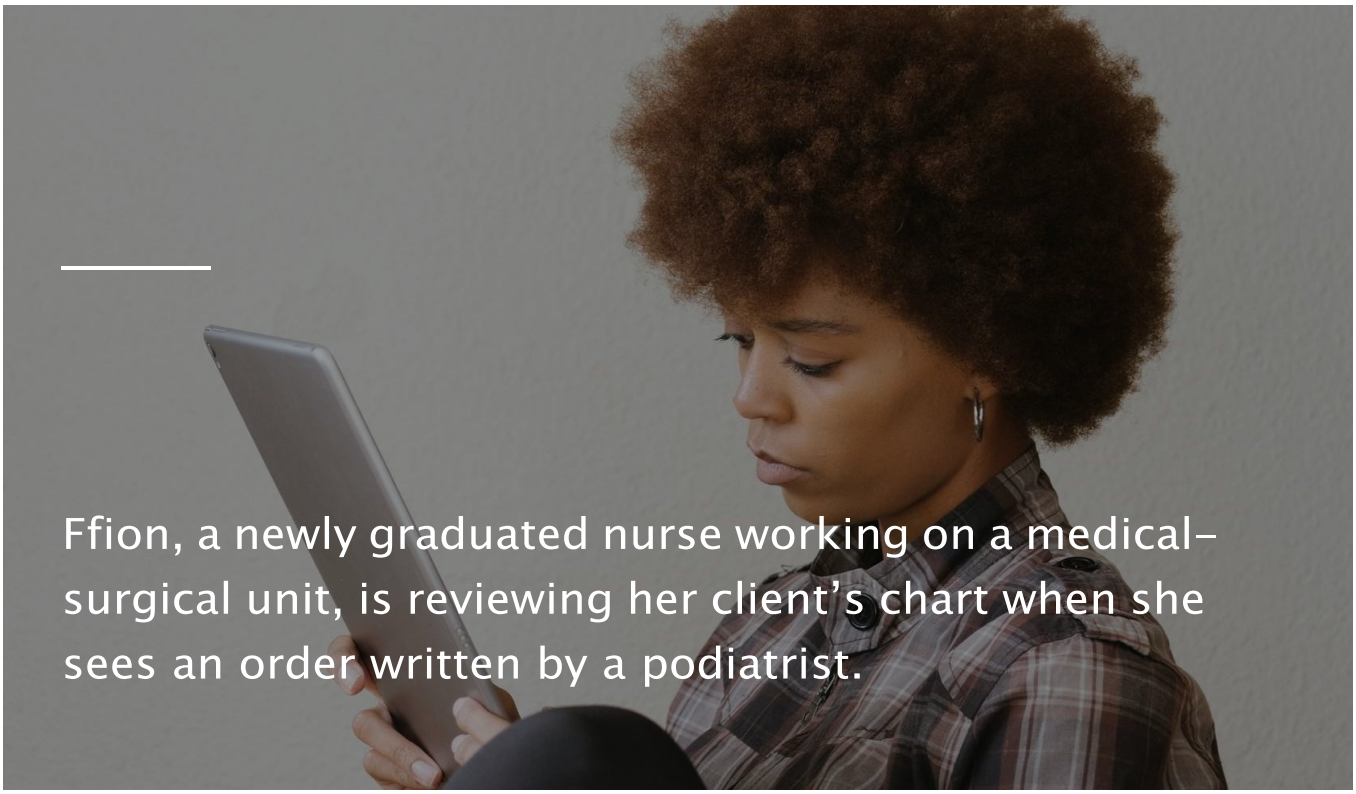
Have you ever been in a situation where an order felt unclear? How did you handle it, or how would you handle it now?

How might you advocate for clear and complete orders in a setting where recommendations are common?

Proceed to the next lesson for a real-life example of a nurse determining whether an order is valid and authorized.

Lesson 6 of 8

Case Study: Ffion



Ffion's dilemma: Can I act with this order?

The order is documented in the client's record, includes the necessary details, and is electronically signed.

Ffion pauses. She knows podiatrists are **regulated health professionals**, but during orientation, someone mentioned that **only authorized professionals** can give certain types of orders to nurses—particularly for restricted activities. Is this order valid?

Ffion seeks guidance from her charge nurse, Anita.

“You’re right to think it through,” Anita says. “A podiatrist is **both a regulated and an authorized health professional**. That means they are legally allowed to give orders for restricted activities under **Section 7**—if the order is valid. Let me show you in the nursing regulation."

Anita pulls up the nursing regulation on the unit computer. Together, they confirm that under the applicable **nursing regulation**, podiatrists **are included** in the definition of "health professional" authorized to give orders under Section 7.

Next, they review the order. It’s:

- **Documented** in the client record and is client-specific
- **Detailed**, including sufficient information for safe execution of the order
- **Signed** electronically by the podiatrist

“Looks good,” Anita confirms. “You can act with this order.”

Ffion now understands that **authorized professionals** are a subset of regulated professionals who are **legally permitted** to give nurses client-specific orders for restricted activities that require an order. She feels more confident knowing how to assess whether an order is valid and who it's appropriate to accept it from.

Check your understanding

Now that you've seen how Ffion determined who is an authorized health professional, let's see if you can do the same. This activity may require you to review your nursing regulation. Write 'A' for authorized or 'R' for regulated but not authorized beside each health professional.

Health professional	Authorized?	Health professional	Authorized?
Midwife		Pharmacist	
Dietitian		Physiotherapist	
Dentist		Podiatrist	
Physician		Nurse Practitioner	
Registered massage therapist		Social worker	
Psychologist		Chiropractor	

Great job! Continue to the final quiz and a quick module recap.

Quiz

Welcome to the quiz section. This is an opportunity to assess your understanding of the key concepts covered throughout the module. There are five questions designed to evaluate your knowledge. To successfully complete the quiz, aim for a score of 80% or higher.

Question

01/05

What does "scope of practice" refer to in nursing?

a) The specific skills a nurse learns in school

b) The activities a nurse is educated, competent, and authorized to perform

c) The personal preferences of individual nurses

d) The daily tasks assigned by a health-care facility

Question

02/05

What is a "restricted activity" in nursing regulations?

a) Activities that nurses are not allowed to perform

b) Higher risk activities that are limited to regulated health professionals

c) Routine tasks that all health-care workers can perform

d) Optional procedures that nurses may choose to do

Question

03/05

Which of the following statements is true regarding authorized health professionals?

a) All nursing regulations have the same list of authorized health professionals

b) Only authorized health professionals can give orders for activities that require an order

c) An authorized health professional can be an unregulated health professional

d) Only physicians are considered authorized health professionals

Question

04/05

A client is complaining of significant pain despite receiving regular narcotic pain medication. What type of authorizing mechanism if any is needed for a nurse to legally administer an increased dose?

a) No authorizing mechanism is needed

b) Client-specific order

c) Consultation with a physician

d) Verbal instruction from the charge nurse

Question

05/05

Which of the following are criteria for a valid client-specific order? Select all that apply.

a) The order must be documented in the client's permanent record.

b) The order must include all necessary details for safe execution, such as timing and dosage.

c) The order must be verbally communicated to the nurse by the health professional.

d) The order must be co-signed by a pharmacist to be valid.

e) The order must be signed with a written or electronic signature.

Lesson 8 of 8

Summary

This module focused on the nursing profession's scope of practice and the regulations that guide it. It highlighted the distinction between non-restricted activities and restricted activities and who is authorized to give orders that nurses can act with. Here are some key takeaways:

- **A nursing profession's scope of practice** is determined by law and defines what nurses are allowed to do.
- **The legal scope** of nursing practice defines what nurses are educated, competent, and authorized to perform.
- **Nursing regulations** categorize nursing activities into non- restricted, restricted without orders, and those needing orders.
- Only **authorized health professionals** may give orders for activities that require an order (section 7).
- An **authorizing mechanism**, such as a client-specific order, is required to allow a nurse to perform a restricted activity that requires an order.

Your thoughts, please!

To help us create resources that meet your needs, please complete the 2-minute survey below to let us know what you think. Your feedback will help us improve this and future resources we create for our learners. Thanks in advance!

Take the survey

Answer key

Match each term with its correct definition. You can find the answer key at end of the module.

Regulated health professional	Someone who is licensed or registered with a professional regulatory body in the province.
Authorizing mechanism	A way to obtain the authority (be permitted) to perform a restricted activity.
Scope of practice	Activities that a nurse is educated, competent, and authorized to perform.
Restricted activity	Higher risk activities that may cause harm if performed by an unqualified person.
Health Professions Act	Provincial legislation that regulates the majority of B.C.'s health professions.

What is the purpose of nursing regulations?

a) To set the scope of nursing practice - Nursing regulations set the scope of practice.

b) To replace the need for professional judgment in nursing practice

c) To create a universal list of procedures all nurses must follow

d) To outline the specific activities nurses must perform daily

Teonna teaches a client how to manage their new diabetes diagnosis. What type of activity is this?

a) Restricted

b) Non-restricted - Client education is a non-restricted activity that still requires nursing judgment.

c) Delegated

d) Unauthorized

Which of the following is an example of a restricted activity that requires an order under nursing regulations?

a) Treating anaphylaxis autonomously

b) Giving an intramuscular injection - Giving an intramuscular injection is a restricted activity that requires an order, as outlined in Section 7 of the nursing regulations.

c) Monitoring vital signs

d) Educating clients about health management

You receive a written order from a nurse practitioner (NP) that states: "Start fluticasone 100 mcg via inhaler BID." The order is documented in the chart and signed. What should you do?

a) Refuse the order because only doctors can prescribe medication

b) Accept and follow the order, as all criteria for a valid order are met - The NP is an authorized health professional who can issue client-specific orders. The order is valid—documented, detailed, and signed.

c) Call the NP to confirm the dosage

d) Wait for a pharmacist to co-sign

A physiotherapist gives an order for you to administer a PRN muscle relaxant to a client. The recommendation is made verbally but not written down. What is the best action to take?

a) Proceed with the medication because the client agrees

b) Call the pharmacy to verify the prescription

c) Decline to give the medication because physiotherapists are not authorized to order this restricted activity - Decline to give the medication because physiotherapists are not authorized to order this restricted activity

d) Ask the physiotherapist to provide a written order

A consulting physician recommends that a client's medication be discontinued. What should the nurse do?

a) Discontinue the medication based on the physician's recommendation

b) Wait for a pharmacist to confirm the recommendation

c) Request a client-specific order from the physician before discontinuing the medication - A recommendation is not a valid order. A nurse needs a documented and signed client-specific order from an authorized health professional before discontinuing a medication, as this is a restricted activity.

d) Ask the client if they agree to stop the medication

Now that you've seen how Ffion determined who is an authorized health professional, let's see if you can do the same. This activity may require you to review your nursing regulation.

Health professional	Authorized?	Health professional	Authorized?
Midwife	A	Pharmacist	A
Dietitian	R	Physiotherapist	R
Dentist	A	Podiatrist	A
Physician	A	Nurse Practitioner	A
Registered massage therapist	R	Social worker	R
Psychologist	R	Chiropractor	R

01/05

What does "scope of practice" refer to in nursing?

a) The specific skills a nurse learns in school

b) The activities a nurse is educated, competent, and authorized to perform - Scope of practice is the activities a nurse is educated, competent, and authorized to perform.

c) The personal preferences of individual nurses

d) The daily tasks assigned by a health-care facility

02/05

What is a "restricted activity" in nursing regulations?

a) Activities that nurses are not allowed to perform

b) Higher risk activities that are limited to regulated health professionals - Higher risk activities that are limited to regulated health professionals due to potential harm if done by unqualified individuals.

c) Routine tasks that all health-care workers can perform

d) Optional procedures that nurses may choose to do

03/05

Which of the following statements is true regarding authorized health professionals?

a) All nursing regulations have the same list of authorized health professionals

b) Only authorized health professionals can give orders for activities that require an order that nurses can follow - Authorized health professionals are different in each nursing regulation and include a variety of regulated health professionals.

c) An authorized health professional can be an unregulated health professional

d) Only physicians are considered authorized health professionals

04/05

A client is complaining of significant pain despite receiving regular narcotic pain medication. What type of authorizing mechanism if any is needed for a nurse to legally administer an increased dose?

a) No authorizing mechanism is needed

b) Client-specific order - A client-specific order from an authorized health professional is needed as administering narcotic medications is a restricted activity that requires an order.

c) Consultation with a physician

d) Verbal instruction from the charge nurse

05/05

Which of the following are criteria for a valid client-specific order? Select all that apply.

a) The order must be documented in the client's permanent record.

b) The order must include all necessary details for safe execution, such as timing and dosage.

c) The order must be verbally communicated to the nurse by the health professional.

d) The order must be co-signed by a pharmacist to be valid.

e) The order must be signed with a written or electronic signature.

A valid client-specific order must be documented in the client's permanent record, include all necessary details for safe execution, and be signed with a written or electronic signature.

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