



Arizona State Board of Nursing

4747 N. 7th Street, Suite 200
Phoenix, AZ 85014-3655
Phone (602) 771-7800 Fax (602) 771-7888
E-Mail: arizona@azbn.gov
Home Page: www.azbn.gov

An advisory opinion adopted by AZBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of AZBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training, and supervision to assure the safety of their patient population and or decrease risk.

**OPINION: ORDERS: ACCEPTING,
TRANSCRIBING, REVIEWING ORDERS**
DATE APPROVED: 03/87
REVISED DATE: 07/02, 3/06, 3/09, 9/12
ORIGINATING COMMITTEE:
SCOPE OF PRACTICE COMMITTEE

Within the Scope of Practice of RN LPN

ADVISORY OPINION ORDERS: ACCEPTING, TRANSCRIBING, REVIEWING ORDERS

It is within the scope of practice of the registered nurse (RN) and licensed practical nurse (LPN) to accept orders from a Prescriber to prescribe diagnostic tests, medications and treatments. A Prescriber is identified as a Licensed Independent Practitioner or a Physician's Assistant. The RN or LPN may accept written, verbal or computerized physician order entry (CPOE) orders provided the following standards are met:

I. GENERAL REQUIREMENTS

1. Each agency has a written policy for the acceptance of orders including the responsibilities of the RN, LPN and Licensed Independent Practitioner (LIP).
2. The Prescriber must be identified and known to have a relationship with the patient, even if the order is delivered by an agent (i.e. NP or PA) of the provider.
3. The RN or LPN accepting the order retains the responsibility for knowing the accuracy and appropriateness of the order to maintain patient safety and must clarify any concerns with the Prescriber issuing the order. If the nurse perceives an order to be incorrect or inappropriate, it must be verified with the Prescriber prior to implementation.
4. The RN or LPN must review and verify orders within a specified timeframe per their agency policy.

ACCEPTING

Diagnostic tests, medication and treatment orders will be accepted handwritten, verbal, or computerized physician order entry (CPOE) orders to nursing units. These orders shall be accepted only by registered nurses or licensed practical nurses.

- a. In acute hospital settings, if such orders are taken by a LPN, they shall be reviewed by an RN prior to implementation, per facility policy.
- b. In non-hospital settings, licensed practical nurses may take orders consistent with their facility policy. It is ultimately the responsibility of the supervising RN to assure that the LPN accepting orders and carrying out such does so in a safe and correct manner.
- c. In non-hospital settings, when, in the judgment of the RN, the client's state is stable/predictable and rapid change is not anticipated, oversight of the LPN may be achieved without the physical presence of the RN or Physician.

- d. When receiving verbal or telephone orders, the RN or LPN shall read back the order to the Licensed Independent Practitioner (LIP) to verify accuracy.
- e. Orders can be accepted from individuals whom the Licensed Independent Provider (LIP) has authorized to relay these orders. Individual facility policy will specify who is authorized to relay orders on behalf of the LIP.
- f. The Licensed Independent Practitioner (LIP) initiating the order is required to sign the order according to a timeframe as specified per facility policy.
- g. Orders received via –non-encrypted cell phones are not acceptable per facility policy. Orders received from an encrypted cell phone must have valid patient identification which would require two patient identifiers and a process must be in place to validate that the orders have been received.
- h. When taking orders for high risk situations such as code status, a second signature may be required per facility policy.

TRANSCRIBING AND SIGN-OFF

- a. Transcribing is the recording of orders by clerical personnel and shall not be construed as accepting written, electronic, fax, verbal or telephone orders. Only an RN or LPN may accept an order.
- b. Signing off/acknowledging a review of orders must be completed prior to implementation.
- c. In hospital settings, transcription of orders written, verbal, electronic, fax and telephone orders can be performed by clerical personnel, but must be reviewed and signed by a RN.
- d. In non-hospital settings, orders transcribed by clerical personnel shall be reviewed and signed by either a RN or LPN.

II. RATIONALE

Each nurse must exercise professional responsibility and prudent judgment when accepting, transcribing and reviewing orders. However, in the expanding world of electronic communications including, but not limited to, computerized physician order entry (CPOE), smart phone technology, telephone, email and fax, it is important to have specific guidelines for accepting, transcribing and signing off on orders received electronically. This advisory opinion is expected to be used in concert with the policies developed by the health care agencies regarding the roles and responsibilities the Licensed Independent Practitioner (LIP) and the RN or LPN who will be accepting, transcribing and signing off on all orders.

III. REFERENCES

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