



Arizona State Board of Nursing

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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: INTRAUTERINE PRESSURE
CATHETERS**
APPROVED: X
DATE: 11/02
REVISED DATE: 3/03, 3/06, 11/09, 1/13
**ORIGINATING COMMITTEE:
SCOPE OF PRACTICE COMMITTEE**

Within the Scope of Practice of RN LPN

ADVISORY OPINION INTRAUTERINE PRESSURE CATHETERS (IUPC)

It is within the scope of practice for a Registered Nurse (RN) to insert an intrauterine pressure catheter (IUPC) if the following requirements are met:

I. GENERAL REQUIREMENTS

- A. Written policy and procedures are maintained by the agency/employer.
- B. Only RNs who have satisfactorily completed an agency's instructional program, and have had supervised clinical practice are allowed to insert IUPCS.
- C. Documentation of satisfactory completion of the instructional program and demonstrated clinical proficiency is on file with the employer.

II. COURSE OF INSTRUCTION includes but is not limited to:

- A. Anatomy and physiology of the pregnant woman, including the placenta, membranes, and fetal presentation.
- B. Indications for direct measurement of uterine contractions.
- C. Relative and absolute contraindications to direct, invasive intrauterine contraction monitoring.
- D. Recognition of and evaluation for extra ovular catheter placement.
- E. Potential adverse reactions.
- F. Technique for safe insertion of an intrauterine pressure catheter.
- G. Documentation.
- H. Post IUPC insertion nursing care responsibilities.

III. RATIONALE

The IUPC provides a direct method for measurement of uterine activity during labor and is the only objective method for measuring uterine intensity. This procedure can be performed by RNs with validated competency in order to provide assessment data on which to base interpretation and appropriate nursing actions.

IV. REFERENCES

Gilbert, E. (2011). *Manual of High Risk Pregnancy & Delivery* (5th Ed). Philadelphia: Mosby.

Miller, L., Miller, D., & Tucker, S. (2013). *Mosby's Pocket Guide to Fetal Monitoring* (7th Ed). St. Louis: Elsevier Mosby.

Murray, M. (2007). *Antepartal and intrapartal fetal monitoring*. (3rd Ed.). New York: Springer Publishing Company.

Other state boards with advisory opinions/position statements that support this advisory opinion:

Nebraska board of nursing, Advisory opinion. Reaffirmed May 2000.

Nevada board of nursing, Practice decision. Adopted September 1997.

South Carolina board of nursing, Advisory opinion. Revised July 2007.

South Dakota board of nursing. Advisory opinion. November 1993.