It is within the scope of practice of the registered nurse (RN) and licensed practical nurse (LPN) to accept orders from an appropriate healthcare provider (provider) to prescribe diagnostic tests, medications and treatments. The RN or LPN may accept written, verbal or computerized provider 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 provider.
   2. The provider must be identified and known to have a relationship with the patient, even if the order is delivered by another 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 provider issuing the order. If the nurse perceives an order to be incorrect or inappropriate, it must be verified with the provider prior to implementation.
   4. The RN or LPN must review and verify orders within a specified timeframe per their facility policy.

ACCEPTING
Diagnostic tests, medication and treatment orders will be accepted handwritten, verbal, or CPOE orders to nursing units. These orders shall be accepted only by RNs or LPNs.

a. LPNs may take orders consistent with their agency policy. It is ultimately the responsibility of the supervising RN/Provider to assure that the LPN accepting and carrying out orders does so in a safe and correct manner.

b. 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 provider.

c. When receiving verbal or telephone orders, the RN or LPN shall read back the order to the provider to verify accuracy.
d. Orders can be accepted from individuals whom the provider has authorized to relay these orders. Individual agency policy will specify who is authorized to relay orders on behalf of the provider.

e. The provider initiating the order is required to sign the order according to a timeframe as specified per agency policy.

f. Electronically received orders are expected to be received in a manner protecting patient health information per agency policy.

g. When taking orders for high risk situations such as code status, a second signature may be required per agency policy.

**TRANSCRIBING AND SIGN-OFF**

a. Only RN or LPN may accept an order. Transcribing is the recording of orders by clerical personnel and should not be construed as accepting written, electronic, fax, verbal or telephone orders.

b. Signing off and 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 should 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. In the expanding world of electronic communications including, but not limited to, CPOE, smart phone technology, telephone, email and fax, it is important to have specific guidelines for accepting, transcribing and signing off electronic orders. This advisory opinion is expected to be used in concert with the policies developed by the health care agencies regarding the roles and responsibilities of the provider and the RN or LPN who will be accepting, transcribing and signing off electronically acknowledged orders.

**III. REFERENCES**


Kentucky Board of Nursing, (2012). Advisory opinion statement: Role of the nurses in the implementation of patient care orders:

Massachusetts Board of Health and Human Services, (2014).
