

NH Board of Nursing

Position Statement and Clinical Practice Advisories Regarding the Role of the RN in Diagnostic Imaging and Ultrasound Use

Pursuant to Nur 405.01, appropriate training and competency is required for performing nursing care.

The following grid contains responses to specific frequently asked questions pertaining to this topic.

Clinical Practice Advisory Summary – Diagnostic Imaging/Ultrasound Use FAQ

Activity/Question	Within RN Scope of Practice?	Comments	Date of Last Review
C-arm activation/operation/compression of pedal	No	Activation of the C-arm or compression of pedal is not within the RN scope of practice. Initial placement and setting of C-arm must be done by radiology technician. C-arm repositioning and shielding can be done by competently trained RN under supervision of surgeon. C-arm documentation can be done by RN	6/2015
Verification of chest x-ray to confirm PICC line placement	Yes	If done by a Qualified RN and reviewed and confirmed by a physician within 24 hours	6/2015
Contrast dye, IV push administration in preparation for diagnostic examination	Yes	Nurse can administer the contrast dye under the direct supervision of a radiologist or his or her physician designee	6/2015
Radiation equipment: • Moving, connecting, turning on, entering MR information, or exporting radiographic data to PACS. • Move the tube head or table under the direct supervision of attending MD • Manipulate settings as directed by attending MD with repeat back and visual confirmation	No		01/2019
Ultrasound, use of technology for bladder scanning	Yes		6/2015
Ultrasound, use of technology for deep vein location in PICC line placement	Yes		6/2015

<p>Ultrasound, use of technology for OB</p>	<p>Yes</p>	<p>RN's can perform limited OB ultrasounds with proper education/certification and follows the statutory language set by the Board of Medical Imaging that states the following:</p> <p>328-J:25 Exemptions. – VI. A person licensed under the laws of the state of New Hampshire performing a sonography procedure within his or her scope of practice, education, training, and competence, that is used to assess specific and limited information about a patient's immediate medical condition, is limited to a focused imaging target and does not generate a recorded diagnostic medical image. A focused imaging target includes, but is not limited to:</p> <p>(a) Assessment of fetal presentation or heartbeat; (b) Assessment of fluid in a body cavity; (c) Assessment of foreign body position or location; (d) Fetal monitoring during active labor; or (e) Identification of an anatomical landmark or blood vessel for vascular access or administration of anesthesia.</p>	<p>4/2019</p>
<p>X-ray, performance of <i>in office setting</i></p>	<p>No</p>		<p>6/2015</p>

References:

Radiology Nursing: Scope and Standards of Practice (ANA, 2013)

Specialty Organizations:

1. Associate for Radiologic and Imaging Nursing-
<http://www.arinursing.org/practice-guidelines/>
2. American College of Radiology-
<http://www.acr.org/Quality-Safety/Standards-Guidelines>
3. Infusion Nurses Society-
<http://www.ins1.org/i4a/pages/index.cfm?pageid=3412>