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**South Carolina Board of Nursing**  
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## **ADVISORY OPINION # 30**

**FORMULATED:** July 1996

**REVISED:** May 2025, July 2007, July 2001

**REVIEWED:** July 2021, January 2018, March 2011, May 2006, July 2005, February 2001, May 1998, May 1997

**QUESTION:** May the selected licensed practical nurse (LPN) administer IV push medications to patients in a dialysis center?

The Board of Nursing for South Carolina acknowledges that the laws governing nursing provide that the selected LPN may perform additional acts requiring special education and training. The Board of Nursing acknowledges that the administration of medications intravenously is considered an expanded role for the selected LPN, and has formulated an advisory opinion describing the scope of responsibilities of the LPN in the administration of peripheral and central intravenous therapies and procedures (see Advisory Opinion #9b). Nothing in this opinion is intended to alter that position. This Advisory opinion addresses the scope of responsibility of the selected LPN practicing in the dialysis center.

The selected LPN may administer the following IV push medications to only those patients who have been diagnosed with End Stage Renal Disease (ESRD). The Registered Nurse (RN) is responsible for providing the initial dose of intravenous medications for patients referred to the dialysis center and must be present and responsible for the supervision of the LPN at all times.

- Medications which stimulate production of Red Blood Cells (e.g., erythropoietin) □ Calcium Replacement Medications (e.g., calcitriol)
- Heparin
- Mannitol utilized as a volume expander for Blood Pressure support
- Hypertonic Sodium as a Blood Pressure support & for muscle cramping
- Vitamin D analogs
- Iron Preparations
- Carnitine

Prior to the selected LPN being authorized to perform IV push medication therapy, the employer must document the following in the personnel file:

1. Successful completion of an IV therapy course to include didactic and skill competency verification as required by state and federal regulations;
2. Documentation of completion of an orientation to the facility and care of the End Stage Renal Disease patient;
3. Annual documentation of competency to include, but not limited to:
  - a. administration of set prescribed dose of routine and chronic medications;
  - b. lab value parameters;
  - c. technical administration process monitoring;
  - d. emergency plan according to facility policy and procedures; and,
  - e. all medications to be administered, to include appropriate dosage, actions, side effects and contraindications.

The dialysis center which employs the LPN in this role must have evidence of staffing levels that meet the requirements of state and federal regulations governing ESRD facilities. Appropriate written policies and procedures must be readily available to the staff outlining the criteria for selection of the LPN and procedures to be followed in the administration of the IV medications.

*This statement is an advisory opinion of the Board of Nursing as to what constitutes competent and safe nursing practice.*