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Position Statement:

Registered Nurses Performing Physical Examinations

Formulated: July 2016

The State Board of Nursing for South Carolina recognizes that confusion exists regarding the terms **physical assessment**, **physical examination**, and **nursing assessment**. The Board seeks to clarify the boundaries and limitations of nursing practice regarding these terms within our state. While there are many similar and shared components or interventions with each of these activities, there are distinct differences of intent when defined.

A **physical examination or assessment** is an evaluation of the body and its functions using inspection, palpation, percussion and auscultation.

A complete health assessment includes gathering information about a person's medical history and lifestyle, doing lab tests and screening for disease. (http://medical-dictionary.thefreedictionary.com/physical+examination). **Physical examination or physical assessment** is one component of a complete health assessment that represents a synthesis of information obtained in a physical examination.

A **nursing assessment** is the identification by a registered nurse of the needs, preferences, and abilities of a patient. Nursing assessment includes an interview with and observation of a patient by the nurse and considers the symptoms and signs of the condition, the patient's verbal and nonverbal communication, the patient's medical and social history, and any other information available. Among the physical aspects assessed are vital signs, skin color and condition, motor and sensory nerve function, nutrition, rest, sleep, activity, elimination, and consciousness. Among the social and emotional factors included in assessment are religion, occupation, attitude toward hospital and health care, mood, emotional tone, and family ties and responsibilities. **Assessment is extremely important because it provides the scientific basis for a complete nursing care plan.** (Mosby's Medical Dictionary, 9th edition. © 2009, Elsevier.)

The Nurse Practice Act for the South Carolina provides clear boundaries for nursing practice:

"(48) Practice of registered nursing means the performance of health care acts in the nursing process that involve assessment, analysis, intervention, and evaluation. This practice requires specialized independent judgment and skill and is based on knowledge and application of the principles of biophysical and social sciences. The practice of registered nursing includes, but is not limited to:

- (a) assessing the health status of persons and groups;
- (b) analyzing the health status of persons and groups;
- (c) establishing outcomes to meet identified health care needs of persons and groups;
- (d) prescribing nursing interventions to achieve outcomes;
- (e) implementing nursing interventions to achieve outcomes"

Each of the above elements are based on **nursing interventions** and do not include formulating any type of medical diagnosis or determining medical clearance based on a state of wellness.

Therefore the Board, based on the foundation of nursing education and the legal limitations of nursing practice in our state, recognizes that it is NOT within the scope of the registered nurse to perform a medical physical examination for the purpose of clearance for a designated activity. While it is within the scope of a registered nurse to assess and obtain data for components of a physical examination, it is NOT within the scope of the registered nurse to make a medical diagnosis, identify medical problems, develop medical treatment plans, or declare someone "free" of illness.