



Approved by Board of Nursing 09/278/08

Reviewed: 7/11/19, Revised: 5/19/16, 11/29/12, 11/17/11, 10/31/08

NURSING MANAGEMENT OF INVASIVE DEVICES (CATHETER, LINES AND TUBES)

Cardiovascular System - Registered Nurse (RN)

	Initial Insertion	Intrathe Infusion w/o meds	Intrathe Infusion with meds	Verify Solution	Position or reposition	Monitor Insertion site	Perform Drug Changes	Maintain Patency	Regulate Flow	Take Readings	Collect Specimens	Maintain Infusions	Administer Bolus	Remove	Access/Deaccess
Venous (1)	Y	Y	Y	Y	Y	Y	Y	Y	Y	N/A	Y	Y	Y	Y	Y (8)
External Jugular (4)	Y	Y	Y	Y	Y	Y	Y	Y	Y	N/A	Y	Y	Y	Y	N/A
Arterial (9)	Y	N (7)	N (7)	Y	Y	Y	Y	Y	Y	Y	Y	Y (7)	N	Y	N/A
Arterial sheath (9)	N	Y (7a)	Y (7a)	Y	N	Y	Y	Y	Y	Y	Y	Y (7a)	N	Y (9)	N/A
Central: PICC (9) (AO9a)	Y (2)	Y	Y	Y	Y (2)	Y	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Central Venous Line (1) (AO9a)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N/A
Implanted Catheter with External Port	N	Y	Y	Y	N	Y	Y	Y	Y	N/A	Y	Y	Y	N	Y
Implanted Catheter with Internal Port	N	Y	Y	Y	N/A	Y	Y	Y	Y	N/A	Y	Y	Y	N	Y (5)
Pulmonary Artery (Swan-Ganz)	N	Y	Y	Y	Y (3)	Y	Y	Y	Y	Y	Y	Y	Y	Y (4)	N/A
Umbilical	N (1,6)	N (6,7)	N (6,7)	Y	N	Y	Y	Y	Y	Y	Y	Y	N (1,6)	Y (6)	N/A
Intraosseous (9) (AO24)	Y	Y	Y	Y	Y	Y	Y	Y	Y	N/A	Y	Y	Y	Y	N/A
Temporary Pacing Wires (Epicardial/transvenous) (AO48)	N	N/A	N/A	N/A	N	Y	Y	N/A	N/A	N/A	N/A	N/A	N/A	Y (9)	N/A
Pericardial Drain	N	N/A	N/A	N/A	N	Y	Y	N	N/A	N/A	N (10)	N/A	N	N	N/A

Footnotes for Cardiovascular System - Registered Nurse:

1. RN members of neonatal transport teams who have had appropriate education and are in communication with licensed independent practitioner may cannulate and bolus the umbilical vein and/or umbilical artery.
2. Tip location shall be determined radiographically or by FDA approved technologies prior to initiation of infusion therapy.
3. May pull back only, not advance
4. With special education and training may remove a pulmonary artery catheter after a licensed independent practitioner orders discontinuation of the catheter.
5. The RN with specialized education and training may access or de-access an implanted catheter with internal port.
6. Refers only to umbilical artery catheters by RNs with specialized education and training.
7. May initiate saline or heparin solution for the purpose of maintaining patency according to agency policy. 7a. May initiate and maintain a low-dose thrombolytic into an arterial sheath in a procedural area or critical care unit with dual verification by another licensed practitioner (This does not apply to umbilical artery catheters)
8. With specialized education and training to include validated competencies may access an AV Fistula for IV therapy and blood specimen collection
9. With specialized education and training and annual competency update
10. The RN may NOT ASPIRATE to obtain drainage or specimen

Key:	N	Not within scope of nurse
	Y	Within scope of nurse
	N/A	Non applicable



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NURSING MANAGEMENT OF INVASIVE DEVICES (CATHETER, LINES AND TUBES)

Central Nervous System - Registered Nurse

	Insert	Initiate Infusion	Verify Solution	Position or reposition	Monitor insertion site	Perform drsg changes	Maintain patency (flush)	Regulate flow	Take reading	Collect specimens	Maintain infusions	Bolus Meds (50 ml or less)	Remove
Intracranial	N	N	Y	N	Y	Y	N	N/A	Y	Y (3)	N/A	N	N
Epidural	N	N	Y	N	Y	Y	N	Y	N/A	N/A	Y	Y (1)	Y
Intrathecal	N	N	Y	N	Y	Y	Y	Y	N/A	N/A	Y (2)	Y (1)	N
Peripheral Nerve	N	N	Y	N	Y	Y	Y	Y	N/A	N/A	Y (2)	Y (1)	Y
Lumbar	N	N	Y	N	Y	Y	Y	Y	Y	Y (3)	Y	N	N
Implantable Access Port/Reservoir	N	N	Y	N	Y	Y	N	N	N/A	N	Y	Y	Y (4)

Footnotes for Central Nervous System - Registered Nurse:

1. May administer epidural and intrathecal medications excluding the initial drug bolus or start of the continuous solutions, if no bolus was given. See advisor opinions #5 and #7
2. With specialized education and training and annual updates on competency may administer antineoplastic medications by reservoir (See AO #7)
3. May obtain a specimen from the distal port.
4. Spinal cord stimulator wires may be removed by the RN who has special education and training.

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NURSING MANAGEMENT OF INVASIVE DEVICES (CATHETER, LINES AND TUBES)

Gastrointestinal System - Registered Nurse (RN)

	Initial Insertion	Initiate Infusion	Verify Solution	Replace/Change/Reposition	Monitor Insertion Site	Perform Dressing Changes	Maintain Patency	Regulate Flow	Collect Specimens & Drainage	Manage Infusions	Remove
Upper GI: (Above Pylorus)											
Orogastric/Nasogastric Tube with or without stylet or weights	Y (1)	Y	Y	Y (1)	Y	Y	Y	Y	Y	Y	Y
Percutaneous Endoscopic Gastrostomy Tube/Gastrostomy Tube	N	Y	Y	Y (2)	Y	Y	Y	Y	Y	Y	Y (2)
Lower GI (Below Pylorus)											
Nasointestinal Weighted Tube with or without stylets or weights	Y (1)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y (3)
Biliary Drainage Tube	N	N/A	N/A	N	Y	Y	Y	N/A	Y	N/A	N
Jejunostomy	N	Y	Y	N	Y	Y	Y	Y	Y	Y	Y (2)

Footnotes for Gastrointestinal System - Registered Nurse (RN)

1. Tubes with a stylet may be inserted in a controlled setting where x-ray verification is readily available. A stylet may not be reinserted once the tube is placed in a patient
2. RNs may replace, change, reposition and remove tubes for the purpose of changing tubes through well-established stomas (3-4 weeks old) when done by the licensed independent
3. RNs may remove a weighted tube only when inserted for conditions other than gastrointestinal hemorrhage.

NOTE: For additional information on gastrointestinal tubes refer to Advisory Option #6

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	Y	Within scope of nurse
	N/A	Non applicable



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NURSING MANAGEMENT OF INVASIVE DEVICES (CATHETER, LINES AND TUBES)

Genitourinary System - Registered Nurse (RN)

	Insertion	Initiate Infusion	Verify Solution	Position/Reposition	Monitor Insertion Site	Perform Dressing Changes	Maintain Patency	Regulate Flow Rate	Collect Specimens & Drainage	Manage Infusions	Remove
Indwelling	Y	Y	Y	Y (1)	Y	N/A	Y	Y	Y	Y	Y
Suprapubic	N	Y (3)	Y	Y (2)	Y	Y	Y	Y	Y	Y	Y (2)
Nephrostomy	N	N/A	N/A	N	Y	Y	Y	N/A	Y	N/A	N
Coude' without stylet (4)	Y	Y	Y	Y	Y	N/A	Y	Y	Y	Y	Y

Footnotes for Genitourinary System - Registered Nurse (RN)

1. May apply traction to a Foley catheter following TUR surgery if ordered by a licensed independent practitioner
2. May reinsert and remove suprapubic catheters in a well established tract (3 weeks) with a licensed independent practitioner's order
3. May initiate bladder infusion with medications in a well established surgical site at least three weeks old
4. With specialized education and training

Scrivener's Error Corrected 4/12/10, Revised 4/22/11

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	N/A	Non applicable



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NURSING MANAGEMENT OF INVASIVE DEVICES (CATHETER, LINES AND TUBES)

Integumentary System - Registered Nurse (RN)

	Insert	Initiate & Manage Irrigation	Verify Solution	Position or reposition	Monitor insertion site	Perform dressing changes	Maintain patency	Regulate flow rate	Collect specimens/drainage	Manage Infusions	Remove
Collapsible Drain (eg. Penrose)	N	Y	Y	Y	Y	Y	Y	N/A	Y	N/A	Y
Rigid Drain (eg. Jackson Pratt, Hemovac)	N	Y	Y	N	Y	Y	Y	N/A	Y	N/A	Y

[Footnotes for Genitourinary System - Registered Nurse \(RN\)](#)

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NURSING MANAGEMENT OF INVASIVE DEVICES (CATHETER, LINES AND TUBES)

Respiratory System - Registered Nurse (RN)

	Initial Insertion	Inhale Oxygen	Instill Medication	Position/Reposition	Monitor Insertion	Perform dressing changes	Maintain Patency	Regulate O2 Flow Rate	Collect Specimens	Permanently Remove
Upper Airway:										
Naso-oral	Y	Y	N/A	Y	Y	N/A	Y	Y	Y	Y
Lower Airway:										
Endotracheal	Y (1)	Y	Y (2)	Y (2)	Y	Y	Y	Y	Y	Y (3)
Tracheostomy	Y (1)	Y	Y (2)	Y (4)	Y	Y	Y	Y	Y	Y (3)
Chest Tubes	N	N/A	N/A	N	Y	Y	Y (5)	N/A	Y	Y (6)
Laryngeal Mask Airway	Y (1)	Y	Y	Y (1)	Y	N/A	Y	Y	Y	Y
Needle Decompression	Y (7)	N/A	N/A	N/A	Y	N/A	Y	N/A	N/A	Y

Footnotes for Respiratory System - Registered Nurse:

1. With special education and training may intubate in an emergency or as a member of transport teams when in communication with a physician
2. Who have completed special education and training may perform these functions
3. With special education and training may extubate a patient with a doctor's order
4. RNs with special education and training may remove, reinsert or reposition a tracheostomy tube in a patient with a well-established stoma
5. "Milking" chest tubes may be done to maintain patency
6. Refer to Advisory Option #2 on the role of the RN in removing chest tubes
7. With special education and training in emergent situations may perform needle decompression for tension pneumothorax in accordance with Advisory Option #38
8. RNs may not inject, instill or otherwise administer any medications including thrombolytics into any tube, drain or catheter within the pleural cavity

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