

The Florida

# Board of Nursing

## LPN Rules Conference Call Meeting Minutes

January 30, 2023

**Meet Me #:**

888-585-9008 (US)  
888-299-2873 (Canada)

**Participation Code:**

275-112-502



Jose D. Castillo III, PhD, MSNA, CRNA, APRN  
Chair

Deborah Becker, DNP, RN, CNE  
Vice Chair

Joe Baker, Jr.  
Executive Director



## Florida Board of Nursing Meeting Agenda January 30, 2023

**Participants in these public meetings should be aware that these proceedings are being recorded and that an audio file of the meetings will be posted to the board's website.**

### **Board Members:**

Jose D. Castillo III, PhD, MSNA, CRNA, APRN – Chair  
Deborah Becker, DNP, RN, CNE – Vice Chair  
Deborah McKeen, BS, CD-LPN  
Christine Mueller, DNP, RN, PCCN-K  
Fidelia Roster, MSN, RN, CCRN, CNRN  
Jody Rain, MBA-HM, BSN, RN, CEN  
Robert Macdonald, MS, Consumer  
Diana Orantes Forst, BA, RNC, PCCN, MSBC, OCN  
Jennifer Wages, LPN, PASC  
Judy Frum, RRT, BSN, MBA, RN,  
Jeneé Peters, Consumer  
Vacant, Consumer  
Vacant, LPN

### **Attorneys:**

Deborah Loucks, Senior Assistant Attorney General

### **Board Staff:**

Joe Baker, Jr., Executive Director  
Melissa Passett, Program Operations Administrator  
Sherri Sutton-Johnson, DrPH, MSN, RN, CCHW, Director of Nursing Education  
Zoë McCook, Regulatory Specialist III

# LPN Rules Discussion

Monday, January 30, 2023, at 9:00 AM

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## Call to Order

The meeting was called to order by the Executive Director, Joe Baker, Jr., at 9:03 a.m.

## Roll Call

### Board Members:

Deborah Becker, DNP, RN, CNE – Vice Chair  
Deborah McKeen, BS, CD-LPN  
Jody Rain, MBA-HM, BSN, RN, CEN  
Jennifer Wages, LPN, PASC

### Attorneys:

Deborah Loucks, Senior Assistant Attorney General

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## A. Discussion of LPN Rules

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By consensus, the Board Members agreed to the below draft language to be presented to the full board at the February Board Meeting.

### 1. Rule 64B9-12.002, FAC- Definitions

(1) “Administration of Intravenous Therapy” is the therapeutic infusion and/or injection of substances through the venous peripheral system, consisting of activity which includes: observing, initiating, monitoring, discontinuing, maintaining, regulating, adjusting, documenting, planning, intervening and evaluating.

(2) “Under the direction of a registered ~~professional~~ nurse” means that the registered ~~professional~~ nurse has delegated intravenous therapy functions to a qualified licensed practical nurse. The registered ~~professional~~ nurse does not in all instances have to be on the premises in order for the licensed practical nurse to perform the delegated functions.

(3) “Direct supervision” means on the premises and immediately physically available.

(4) “Health care practitioner” means a physician or physician assistant licensed pursuant to Chapter 458 or 459, F.S.; a dentist licensed pursuant to Chapter 466, F.S.; or a Florida licensed Advanced Practice Registered Nurse (APRN).

## 2. Rule 64B9-12.003, FAC- Aspects of Intravenous Therapy Outside the Scope of Practice of the LPN

(1) Aspects of intravenous therapy which are outside the scope of practice of an IV certified ~~the~~ licensed practical nurse unless under the direct supervision of the registered ~~professional~~ nurse or ~~physician~~ health care practitioner and which shall not be performed or initiated by an IV certified licensed practical nurses without direct supervision include the following:

- (a) Initiation of blood and blood products;
- (b) Initiation or administration of cancer chemotherapy;
- (c) Initiation of plasma expanders;
- (d) Initiation or administration of investigational drugs;
- ~~(e) Mixing IV solution;~~
- ~~(f) IV pushes, except heparin flushes and saline flushes.~~

(2) Although this rule limits the scope of an IV certified licensed practical nurse practice, it is appropriate for an IV certified licensed practical nurses to care for patients receiving such therapy.

## 3. Rule 64B9-12.004, FAC- Authority for the LPN to Administer Limited Forms of Intravenous Therapy

(1) With the exception of those aspects of intravenous therapy deemed outside the scope of practice of the IV certified licensed practical nurse by Rule 64B9-12.003, F.A.C., above, and subject to the approval of the institution at which the licensed practical nurse is employed, any licensed practical nurse who meets the competency knowledge requirements of Rule 64B9-12.005, F.A.C., below, is authorized to administer intravenous therapy under the direction of a registered ~~professional~~ nurse or other health care practitioner.

(2) Individuals who have completed a Board approved prelicensure practical nursing education program, professional nursing students who qualify as graduate practical nurses, or licensed practical nurses who have not completed the specified course under Rule 64B9-12.005, F.A.C., may engage in a limited scope of intravenous therapy under the direction of a registered ~~professional~~ nurse, or other health care practitioner~~physician or dentist~~. This scope includes:

- (a) Perform calculation and adjust flow rate;
- (b) Observe and report subjective and objective signs of adverse reactions to IV administration;
- (c) Inspect insertion site, change dressing, and remove intravenous needle or catheter from peripheral veins;
- (d) Hanging bags or bottles of hydrating fluid.

## 4. Rule 64B9-12.005, FAC- Competency and Knowledge Requirements Necessary to Qualify the LPN to Administer IV Therapy

(1) ~~Contents. The board endorses the Intravenous Therapy Course Guidelines issued by the Education Department of the National Federation of Licensed Practical Nurses, November, 1983. The course necessary to qualify a licensed practical nurse or graduate practical nurse to administer IV therapy shall be not less than a thirty (30) hour post-graduate level course teaching aspects of IV therapy. The didactic intravenous therapy education must contain the following components:~~

(a) Policies and procedures of both the Nurse Practice Act and the employing agency in regard to intravenous therapy. This includes legalities of both the Licensed Practical Nurse role and the administration of safe care. Principles of charting are also included.

(b) Psychological preparation and support for the patient receiving IV therapy as well as the appropriate family members/significant others.

(c) Site and function of the peripheral veins used for veinpuncture.

(d) Procedure for veinpuncture, including physical and psychological preparation, site selection, skin preparation, palpation of veins, and collection of equipment.

(e) Relationship between intravenous therapy and the body's homeostatic and regulatory functions, with attention to the clinical manifestations of fluid and electrolyte imbalance.

(f) Signs and symptoms of local and systemic complications in the delivery of fluids and medications and the preventive and treatment measures for these complications.

(g) Identification of various types of equipment used in administering intravenous therapy with content related to criteria for use of each and means of troubleshooting for malfunction.

(h) Formulas used to calculate fluid and drug administration rate.

(i) Methods of administering drugs intravenously and advantages and disadvantages of each.

(j) Principles of compatibility and incompatibility of drugs and solutions.

(k) Nursing management of the patient receiving drug therapy, including principles of chemotherapy, protocols, actions, and side effects.

(l) Nursing management of the patient receiving blood and blood components, following institutional protocol. Include indications and contraindications for use; identification of adverse reactions.

(m) Nursing management of the patient receiving parenteral nutrition, including principles of metabolism, potential complications, and physical and psychological measures to ensure the desired therapeutic effect.

(n) Principles of infection control in IV therapy, including aseptic technique and prevention and treatment of iatrogenic infection.

(o) Nursing management of special IV therapy procedures that are commonly used in the clinical setting, such as heparin lock, central lines, and arterial lines.

(p) Glossary of common terminology pertinent to IV fluid therapy.

(q) Performance check list by which to evaluate clinical application of knowledge and skills.

(2) Clinical Competence. The course must be followed by supervised clinical practice in intravenous therapy as needed to demonstrate clinical competence. Verification of clinical competence shall be the responsibility of each institution employing a licensed practical nurse based on institutional protocol. Such verification shall be given through a signed statement of a licensed registered nurse.

(32) Central venous line (CVL) and Peripherally inserted central catheter (PICC) Lines. The Board recognizes that through appropriate education and training, a Licensed Practical Nurse is capable of performing intravenous therapy via central and PICC lines under the direction of a registered ~~professional~~ nurse or other health care practitioner as defined in subsection 64B9-12.002(2), F.A.C. Appropriate education and training requires a minimum of four (4) hours of instruction. The requisite four (4) hours of instruction may be included as part of the thirty (30) hours required for intravenous therapy education specified in subsection (4), of this rule. The education and training required in this subsection shall include, at a minimum, didactic and clinical practicum instruction in the following areas:

(a) Central venous anatomy and physiology;

(b) CVL and PICC site assessment;

(c) CVL and PICC dressing and cap changes;

(d) CVL and PICC flushing;

(e) CVL and PICC medication and fluid administration;

(f) CVL and PICC blood drawing; and,

(g) CVL and PICC complications and remedial measures.

Upon completion of the intravenous therapy training via central and PICC lines, the Licensed Practical Nurse shall be assessed on both theoretical knowledge and practice, as well as clinical practice and competence. The clinical practice assessment must be witnessed by a Registered Nurse who shall file a proficiency statement regarding the Licensed Practical Nurse's ability to perform intravenous therapy via central lines. The proficiency statement shall be kept in the

Licensed Practical Nurse's personnel file.

~~(43) Providers: The LPN/IV education must be sponsored by a provider of continuing education courses approved by the Board pursuant to Rule 64B9-5.005, F.A.C. To be qualified to teach any such course, the instructor must be a currently licensed registered nurse in good standing in this state, have teaching experience, and have professional nursing experience, including IV therapy. The provider will be responsible for issuing a certificate verifying completion of the requisite number of hours and course content.~~

~~(4) Educational Alternatives. The cognitive training shall include one or more of the following:~~

~~(a) Post graduate Level Course. In recognition that the curriculum requirements mandated by Sections 464.019(1)(b), 464.019(1)(f), and 464.019(1)(g), F.S., for practical nursing programs are extensive and that every licensed practical nurse will not administer IV Therapy, the course necessary to qualify a licensed practical nurse or graduate practical nurse to administer IV therapy shall be not less than a thirty (30) hour post graduate level course teaching aspects of IV therapy containing the components enumerated in subsection 64B9 12.005(1), F.A.C.~~

~~(b) Credit for Previous Education. The continuing education provider may credit the licensed practical nurse or graduate practical nurse for previous IV therapy education on a post graduate level, providing each component of the course content of subsection 64B9 12.005(1), F.A.C., is tested by and competency demonstrated to the provider.~~

~~(c) Nontraditional Education. Continuing education providers may select nontraditional education alternatives for acquisition of cognitive content outlined in Rule 64B9 12.005, F.A.C. Such alternatives include:~~

~~1. Interactive videos,~~

~~2. Self study,~~

~~3. Other nontraditional education that may be submitted to the Board for consideration and possible approval. Any continuing education providers using nontraditional education must make provisions for demonstration of and verification of knowledge.~~

~~(5) Clinical Competence. The course must be followed by supervised clinical practice in intravenous therapy as needed to demonstrate clinical competence. Verification of clinical competence shall be the responsibility of each institution employing a licensed practical nurse based on institutional protocol. Such verification shall be given through a signed statement of a Florida licensed registered nurse.~~

## 5. JAPC Correspondence- informational

The meeting adjourned at 10:28 a.m.