



## Medical Orders

### POSITION STATEMENT

The Mississippi Board of nursing is a consumer protection agency with the authority to regulate the practice of nursing provided for by Mississippi Code of 1972, Annotated, Title 73, Chapter 15.

A position statement is a scope of practice determination made by the Board, as to whether performance of an action by a licensed nurse is within acceptable standards. Position statements are administrative and educational tools that can be used to assist providers, licensed nurses, and other interested parties in scope of practice determinations. Position statements of the Mississippi Board of Nursing are formulated in response to the Board's legally mandated charge to protect the public through safe nursing practice.

### SCOPE OF PRACTICE

It is the position of the Mississippi Board of Nursing that Registered Nurses and Licensed Practical Nurses may not accept telephone orders from unlicensed persons. Registered Nurses and Licensed Practical Nurses may accept orders from the following persons:

- Licensed Physicians
- Licensed Dentist
- Nurse Practitioners, for items specifically addressed by their Board-approved protocol
- Registered Nurses and Licensed Practical Nurses, as directed by a licensed physician or dentist
- Licensed Physician Assistants
- Other health professionals, as directed by a licensed physician or dentist and specifically related to the professional's particular area of practice. This includes, but is not limited to, the following health care professionals:
  - Registered Dieticians
  - Registered Pharmacists
  - Licensed Psychologists
  - Registered Medical Technicians
  - Registered Physical Therapists
  - Registered Radiology Technologists
  - Registered Respiratory Therapists
  - Licensed Social Worker

Any category of health care professional not included on the above list may be submitted to the Board for consideration.

## **Telephone Orders**

The Registered Nurse or Licensed Practical Nurse may accept orders only from those persons whose licensure is active and current, and the nurse must adhere to the following stipulations:

1. The identity of the caller must be established. If there were a question of identity, refusing the order would be appropriate;
2. The licensure status of the caller must be verified. Each agency may establish its own policy for meeting this stipulation;
3. The order must be written on the appropriate form and designated as a telephone order. The nurse must record the name of the physician/dentist/advanced practice registered nurse involved, the name and title of the caller, and the name and title of the nurse receiving the order. To assure accuracy, the nurse should repeat the order to the caller for verification; and
4. Telephone orders must be signed by the appropriate physician/dentist/advanced practice registered nurse within the time specified in the agency's policy. It is recommended that this be done within 24 hours.

## **Written Orders**

The Registered Nurse and Licensed Practical Nurse may accept orders, which have been entered on the patient's record by the same health care professionals, provided the nurse adheres to the following stipulations:

1. The licensure status of the health care professional should be verified. Each agency may establish its own policy for meeting this stipulation;
2. The order must be written on the appropriate form and must include the name of the physician/dentist/advanced practice registered nurse involved and the name and title of the person recording the order; and
3. The order must be signed by the appropriate physician/dentist/advanced practice registered nurse within the time specified in the agency policy. It is recommended that this be done within 24 hours.

Although the determination of medical procedures and the patient's medical status is a medical decision, the Registered Nurse or Licensed Practical Nurse has the right and the obligation to question orders and decisions which are contrary to acceptable standards and to refuse to participate in procedures which may result in harm to the patient.

## **HISTORY**

Original: 4/23/1987

Reviewed: 4/22/1993; 12/6/2024

Revised: 12/3/1997; 4/06/2000; 10/04/2002; 4/8/2005