Guidance for APRNs and APRNs Who Provide Patient Care as an RN

COVID-19

Nurses are vital to the current COVID-19 public health emergency. This document is provided as guidance regarding the current law and rules related to APRNs and APRNs providing patient care as an RN.

APRNs provide diagnoses and/or medical management of patients, and/or anesthesia care consistent with the APRN designation (CNP, CNS, CNM or CRNA). The scope of practice for APRNs is established in Section 4723.43, ORC, and remains in effect during the COVID-19 event. The law can only be modified by legislative action or Executive Order.

APRNs, as RNs, are authorized to practice in accordance with Section 4723.01(B), ORC. The statutory definition of RN practice is not determined by patient age, gender or condition. Thus, an APRN can provide care across the lifespan while working within the RN scope of practice set forth in Section 4723.01(B), ORC, and the standards of practice in Chapter 4723-4, OAC.

Therefore, APRNs may still contribute their valuable clinical knowledge, skills and abilities as RNs to patients for whom they are not currently qualified to provide diagnoses or medical management. For example, this includes performing physical examinations and assessments for purposes of triage based on established criteria and communication to other health care team members, administering medications or treatments, and implementing a medical regimen, which may include skilled procedures, pursuant to a physician or qualified APRN’s order consistent with Section 4723.01(B)(5), ORC. Note that an APRN, working with a population not within their certification, in a RN capacity, may need an order, depending on the care being provided, from an APRN who is certified to work with that population or from a physician.