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An advisory opinion adopted by AZBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of AZBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training, and supervision to assure the safety of their patient population and or decrease risk.

**OPINION: INTRAVENTRICULAR
IMPLANTED DEVICES-TEMPORARY
INTRACRANIAL CATHETERS**

DATE: APPROVED: 11/92

**REVISED DATE: 11/95; 07/02, 1/05, 9/08, 3/12, 3/15
3/20**

ORIGINATING COMMITTEE:

SCOPE OF PRACTICE COMMITTEE

Within the Scope of Practice of X RN LPN

ADVISORY OPINION INTRAVENTRICULAR IMPLANTED DEVICES TEMPORARY INTRACRANIAL CATHETERS

It is NOT within the scope of practice for a Registered Nurse (RN) to:

- a. Administer therapeutic agents via temporary intracranial devices (e.g. External Ventricular Drains, Cisternal Drains).
- b. Insert, remove, or verify correct placement

It is within the Scope of Practice for a RN to administer therapeutic agents via intraventricular implanted devices (e.g. Ommaya Reservoir). If supported by the facility policy

It is within the scope of practice for a RN to aspirate cerebrospinal fluid from an implanted and temporary intraventricular device (e.g. External Ventricular Drain). If supported by the facility policy

I. GENERAL REQUIREMENTS

- A. Written policy and procedures are maintained by the facility/employer.
- B. Only RNs who have successfully completed an instructional program and, - have had supervised clinical practice, are allowed to aspirate cerebrospinal fluid from implanted and temporary intraventricular devices with an order from a licensed independent provider (LIP)
- C. Only RNs who have successfully completed an instructional program and, -, have had supervised clinical practice, are allowed to administer therapeutic agents via intraventricular implanted devices
- D. Documentation of satisfactory completion of the instructional program, supervised clinical practice, is on file with the employer.

II. COURSE OF INSTRUCTION is to include but not be limited to:

- A. Anatomy and physiology of the brain, central nervous system, and production, circulation, and function of cerebrospinal fluid.
- B. Indications and contraindications of aspiration and instillation of therapeutic agents into ventricular implanted devices.
- C. Indications and contraindications of aspiration of cerebrospinal fluid from implanted and temporary intraventricular devices.
- D. Potential adverse reactions.
- E. Principles of management:
 - 1. Aseptic technique.
 - 2. Techniques of aspiration.
 - 3. Techniques of instillation.
 - 4. Techniques of flushing
 - 5. Pharmacological aspects of therapeutic agents to be instilled.
 - 6. Avoidance and management of complications including infection, malfunction, and displacement.
- F. Nursing Care Responsibilities

III. RATIONALE

The standard of care for a patient with increased intracranial pressure includes draining cerebral spinal fluid (Agency for Health Care Research and Quality). (Sacco, 2019). An RN can safely provide care to patients with intraventricular implanted devices and temporary intracranial devices. Such care includes but is not limited to assessing patients, providing patient and family education, and in some situations, accessing the device to administer medications or obtain CSF for sampling.

IV. REFERENCES

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Camp-Sorrell, D. & Matey, L. (2017). *Access device standards of practice for oncology nurses* (1st ed). Pittsburg, PA: Oncology Nursing Society

Sacco, T.L. (2019) Management of Intercranial Pressure Part II

Nonpharmacological Interventions. *Dimensions of critical care nursing*, 38(2), p. 61-69.
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Thompson, H. J. (Ed.). (2011). *Care of the patient undergoing intracranial pressure monitoring/external ventricular drainage or lumbar drainage: AANN clinical practice guideline series*. - Glenview, IL: American Association of Neuroscience Nurses.

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