



ANBLPN

Association of New Brunswick Licensed
Practical Nurses

AIAANB

L'Association des Infirmier(ère)s Auxiliaires
Autorisé(e)s du Nouveau-Brunswick

Medical Directives

Direct Order vs. Directive

A *direct order* is client specific and is a prescription for a procedure, medication, or treatment for one individual. It is written by an authorized prescriber for a specific intervention, for a certain time. They may be written or verbal (telephone order) and appear on the client's chart.

A *medical directive* can be used for multiple clients when certain conditions are met and under specific circumstances. Directives are always written and do not appear on a client's chart.

Directives are developed and approved by both the authorized prescriber and an organization. An organizational policy is then developed pertaining to the directive. The organizational policy details the implementation of the intervention for multiple clients in the presence of identified health conditions and specific circumstances.

Authorized Prescriber

In New Brunswick, authorized prescribers include physicians, nurse practitioners, optometrists, dentists, pharmacists, physician assistants, and midwives. LPNs may accept medical directives and orders from any of the listed authorized prescribers.

Directive Requirements

Directives:

- cannot fall outside of the legislated scope of practice of nursing professionals or contradict nursing standards or employer policy;
- contain the name and description of the intervention;
- state the specific clinical conditions and circumstances required before implementing the directive;
- clearly identify any contraindications for implementing the directive;
- are supported by employer policy (including any necessary education required for nursing professionals);
- contain the name and signature of the authorizing prescriber; and
- the date and signature of the administrative authority approving the directive (i.e., Medical Officer of Health for seasonal influenza programs).

Regardless of the requirements of a medical directive, no direct order or medical directive should be automatically implemented. Nursing professionals must always use their knowledge, skill, and judgement to determine the appropriateness of orders and medical directives.

LPN Implementation

Medical directives must be within the nursing professionals' scope of practice. Therefore, LPNs who have the competence for the stated intervention may implement approved and authorized organizational directives when the clients' needs are known, and the intervention is part of an established plan of care.

Collaborative Practice

When a client's needs are unknown, the intervention is not part of an established care plan, and the client's response to the intervention is unknown or unpredictable, the LPN may determine the appropriateness of the directive in collaboration with a RN.

This collaboration can occur either directly or through remote collaboration (telephone or other approved electronic means).

Responsibilities of the Authorizing Prescriber

The authorizing prescriber who provides the medical directive is responsible for:

- being aware of any client risks for implementing the directive;
- knowing the expected outcomes associated with the directive;
- ensuring that proper resources and equipment are available as required (i.e., anaphylaxis kit when providing immunizations); and
- ensuring that informed consent is obtained.

Responsibilities of the Nursing Professional

Nursing professionals who implement a medical directive are responsible for:

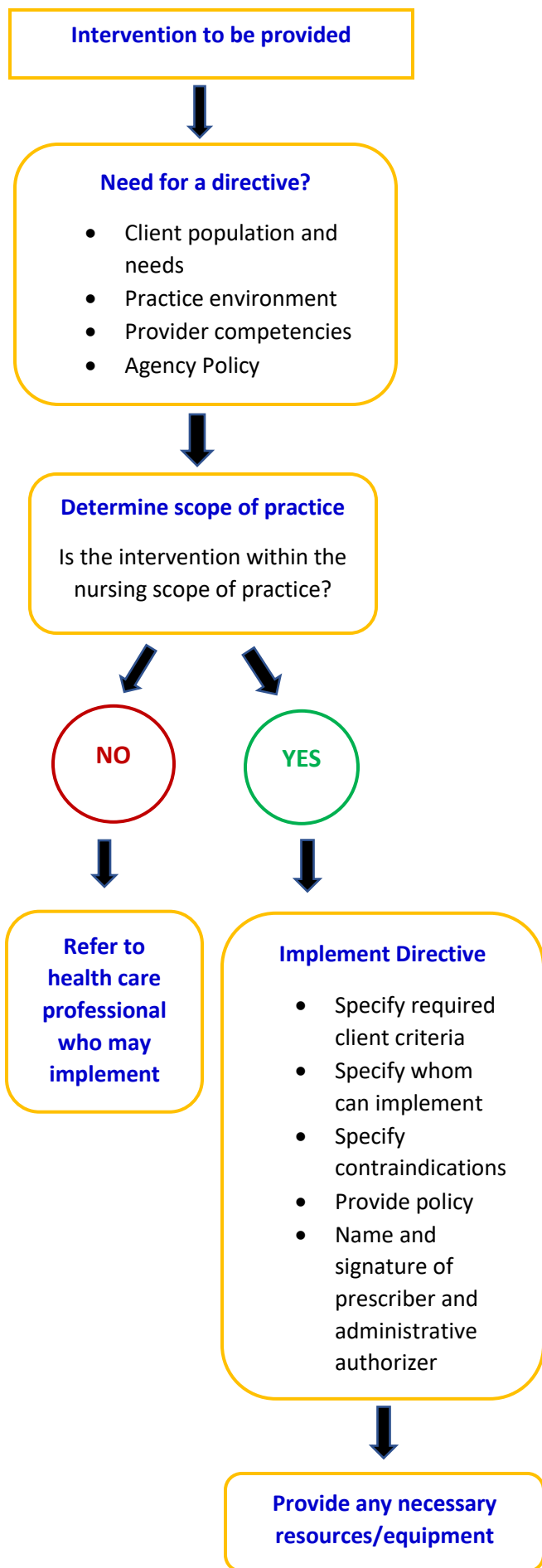
- clarifying that informed consent has been obtained;
- assessing the client to determine their health condition and situational circumstances stated in the directive are met;
- being aware of any risks to the client due to implementing the directive;
- having the required knowledge, skill, and judgement to implement the directive safely;
- knowing the expected outcomes associated with the directive;
- determining whether possible interventions required for adverse events is within their scope of practice and that they have the competence to implement these interventions; and
- knowing how to contact the authorizing prescriber if required.

When directives are used correctly, they can provide timely, effective, and efficient care to clients. The accountability to initiate and implement a medical directive is shared by nursing professionals, authorizing prescribers, and employers.

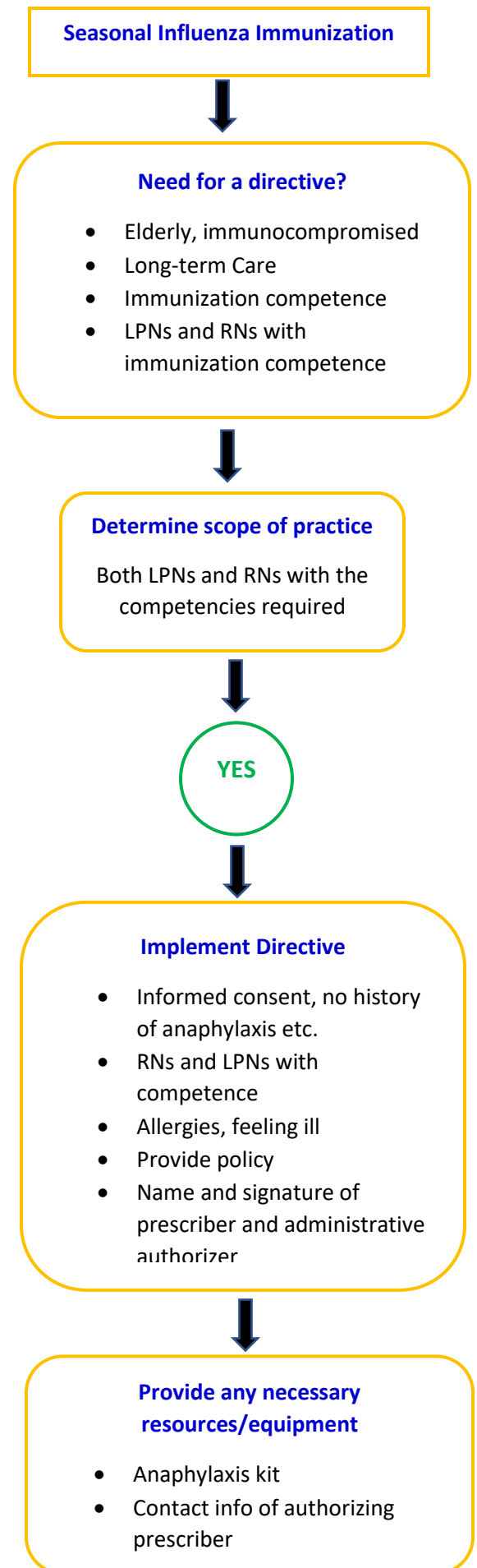
Please view Appendix A which provides an example of developing and implementing a medical directive.

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APPENDIX A: IMPLEMENTATION OF A MEDICAL DIRECTIVE



EXAMPLE OF IMPLEMENTING A DIRECTIVE



Resources:

College of Nurses of Ontario. (2020). *Directives*. Toronto: Ontario. Retrieved from:
https://www.cno.org/globalassets/docs/prac/41019_medicaldirectives.pdf

Nova Scotia College of Nursing. (2022). *Care Directives*. Bedford: Nova Scotia. Retrieved from:
<https://cdn3.nscn.ca/sites/default/files/documents/resources/CareDirectives.pdf>