

244 CMR 9.00: STANDARDS OF CONDUCT

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9.01: Purpose

244 CMR 9.00 defines the standards of conduct for all nurses licensed by the Board of Registration in Nursing.

9.02: Definitions

Definitions for terms used in 244 CMR 9.00 and throughout 244 CMR are set forth in 244 CMR 10.00: *Definitions and Severability*.

9.03: Standards of Conduct for Nurses

Each nurse licensed by the Board and engaged in the practice of nursing shall have knowledge and understanding of the Standards of Conduct for Nurses set forth in 244 CMR 9.00, all state laws and Board regulations governing the practice of nursing, and all other state and federal laws and regulations related to such practice.

The Board may take disciplinary action against the license of any nurse licensed by the Board or against any APRN authorization, or both, or against the nurse's right to renew such license, upon the nurse's failure to comply with the Standards of Conduct for Nurses or with any other laws and regulations related to the practice of nursing.

(1) Practice Under Valid License. Except as provided by M.G.L. c. 112, §§ 80, 80A and 81, a nurse shall only engage in the practice of nursing in Massachusetts with a valid license.

(2) Practice as Advanced Practice Registered Nurse (APRN). A Registered Nurse may only engage in advanced practice registered nursing in Massachusetts after receiving written authorization from the Board in accordance with 244 CMR 4.00: *Advanced Practice Registered Nursing*.

(3) Practice Following Loss of License. A nurse licensed by the Board shall not engage in the practice of nursing in Massachusetts, or in any way represent himself or herself as a Registered Nurse or Licensed Practical Nurse, after the effective date of:

- (a) license expiration;
- (b) license surrender under the terms and conditions of a written agreement entered into with the Board;
- (c) a license suspension order or license revocation order contained in a final decision and order issued by the Board; and
- (d) a summary suspension order issued by the Board in accordance with 244 CMR 7.05: *Summary Suspension of License, Advanced Practice Nursing Authorization, or Right to Renew License*.

The practice of nursing in Massachusetts, after the occurrence of any of the events set forth in 244 CMR 9.03(3)(a) through (d), shall constitute the unlicensed practice of nursing.

(4) Practice of Nursing in Another Jurisdiction Using Telecommunications Technology. A nurse licensed by the Board who, while physically located *within* Massachusetts, provides a nursing service using telecommunications technology to a person physically located *outside* Massachusetts, shall also be governed by the licensure and practice laws and regulations of the state or jurisdiction in which the recipient of such a service is located.

(5) Adherence to Standards of Nursing Practice. A nurse licensed by the Board shall engage in the practice of nursing in accordance with accepted standards of practice.

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(6) Compliance with Laws and Regulations Related to Nursing.

(a) A nurse who holds a valid license shall comply with M.G.L. c. 112, §§ 74 through 81C, as well as with any other laws and regulations related to licensure and practice. Examples of such laws include, but are not limited to, the following:

1. M.G.L. c. 19A, § 15 (obligation to report elder abuse);
2. M.G.L. c. 19C, § 10 (obligation to report abuse of disabled person);
3. M.G.L. c. 38, § 3 (report of death to medical examiner);
4. M.G.L. c. 46, § 9 (death pronouncement);
5. M.G.L. c. 62C, § 47A(d) (obligation to pay state taxes);
6. M.G.L. c. 71, § 55A (obligation to sick school child);
7. M.G.L. c. 71, § 55B (obligation to file report certifying freedom from tuberculosis in communicable form);
8. M.G.L. 94C (Controlled Substances Act - requirements for possessing, dispensing, administering, and prescribing controlled substances);
9. M.G.L. c. 111, § 70E (Patients' or Residents' Rights);
10. M.G.L. c. 111, § 70F (HTLV-III Tests);
11. M.G.L. c. 111, § 72G (obligation to report abuse of patient or resident);
12. M.G.L. c. 111, § 110 (obligation to report infant with swollen, red, or inflamed eye(s) or with unnatural discharge within two weeks after birth);
13. M.G.L. c. 111, § 110B (obligation to report examination or treatment of child with Reyes syndrome);
14. M.G.L. c. 111, § 191 (obligation to report lead poisoning);
15. M.G.L. c. 112, § 12CC (obligation to provide patient records);
16. M.G.L. c. 112, § 61 (obligation to pay student loans);
17. M.G.L. c. 119, § 51A (obligation to report child abuse);
18. M.G.L. c. 119A, § 16 (obligation to pay child support);
19. M.G.L. c. 123, § 12 (requirements for commitment of mentally ill person);
20. M.G.L. c. 123, § 21 (requirements for use of restraint and seclusion of mentally ill person); and
21. M.G.L. c. 123B, § 8 (requirements for use of restraint and seclusion of mentally retarded person).

(b) A nurse licensed by the Board who no longer holds a valid license shall comply with 244 CMR 9.03(6)(a)5., 16., and 18., as well as with the good moral character requirement contained in M.G.L. c. 112, § 74 (RNs) and § 74A (LPNs).

(7) Aiding Unlawful Activity. A nurse licensed by the Board shall not aid any person in performing any act prohibited by law or regulation.

(8) Identification Badge. A nurse who holds a valid license and who examines, observes, or treats a patient in any practice setting shall wear an identification badge which visibly discloses at a minimum his or her first name, licensure status and, if applicable, advanced practice registered nurse authorization.

(9) Responsibility and Accountability. A nurse licensed by the Board shall be responsible and accountable for his or her nursing judgments, actions, and competency.

(10) Acts within Scope of Practice. A nurse who holds a valid license and is engaged in the practice of nursing in Massachusetts shall only perform acts within the scope of nursing practice as defined in M.G.L. c. 112, § 80B, and 244 CMR 3.00: *Registered Nurse and Licensed Practical Nurse.*

(11) Performance of Techniques and Procedures. A nurse licensed by the Board shall perform nursing techniques and procedures only after appropriate education and demonstrated clinical competency.

(12) Competency. A nurse who holds a valid license shall only assume those duties and responsibilities within his or her scope of practice and for which he or she has acquired and maintained necessary knowledge, skills, and abilities.

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(13) Discrimination. A nurse licensed by the Board shall not withhold or deny nursing care based on age, ancestry, marital status, sex, sexual orientation, gender identity, gender expression, race, color, religious creed, national origin, diagnosis, or mental or physical disability.

(14) Asepsis and Infection Control. A nurse licensed by the Board shall adhere to standard precautions and to principles of asepsis and infection control, and shall not place a patient, himself or herself, or others at risk for the transmission of infectious diseases.

(15) Patient Abuse, Neglect, Mistreatment, Abandonment, or Other Harm. A nurse licensed by the Board shall not abuse, neglect, mistreat, abandon, or otherwise harm a patient.

(16) Patient Confidential Information. A nurse licensed by the Board shall safeguard patient information from any person or entity, or both, not entitled to such information. A nurse licensed by the Board shall share appropriate information only as required by law or for the protection of the patient.

(17) Patient Dignity and Privacy. A nurse licensed by the Board shall safeguard a patient's dignity and right to privacy.

(18) Participation in Research. A nurse licensed by the Board who enrolls subjects in a research study or conducts such a study, or both, shall verify that a board, committee, or other group designated by an institution to ensure the protection of human subjects has approved the study in accordance with accepted standards for the protection of human subjects.

(19) Exercise of Undue Influence. A nurse licensed by the Board shall not exercise undue influence on a patient, including the promotion or sale of services, goods, appliances or drugs, in such a manner as to exploit the patient for financial gain of the nurse or a third-party.

(20) Borrowing from Patients. A nurse licensed by the Board shall not borrow money, materials, or other property from any patient.

(21) Undue Benefit or Gain. A nurse licensed by the Board shall care for, and refer, a patient without undue benefit or gain to the nurse or a third-party.

(22) Advertising. A nurse licensed by the Board shall not engage in false, deceptive, or misleading advertising related to the practice of nursing.

(23) Sexual Contact. A nurse licensed by the Board shall not have sexual contact with any patient with whom he or she has a nurse/patient relationship or with any former patient who may be vulnerable by virtue of emotional status, age, illness, or cognitive ability.

(24) Professional Boundaries. A nurse licensed by the Board shall establish and observe professional boundaries with respect to any patient with whom he or she has a nurse/patient relationship. A licensed nurse shall continue to observe professional boundaries with his or her former patients who may be vulnerable by virtue of emotional status, age, illness, or cognitive ability.

(25) Relationship Affecting Professional Judgment. A nurse licensed by the Board shall not initiate or maintain a nurse/patient relationship that is likely to adversely affect the nurse's professional judgment.

(26) Duty to Report to the Board. A nurse who holds a valid license and who directly observes another nurse engaged in any of the following shall report that nurse to the Board in accordance with Board guidelines:

- (a) abuse of a patient;
- (b) practice of nursing while impaired by substance misuse; and
- (c) diversion of controlled substances.

(27) Change of Personal Data. A nurse who holds a valid license shall inform the Board within 30 days of any change of his or her name, address of record, or Social Security number.

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- (28) Action against Certificate. A nurse who holds a valid license and who holds a certificate issued by a certifying body related to the practice of nursing shall report to the Board in writing within 30 days any action against, or surrender of, his or her certificate issued by such certifying body.
- (29) Examinations. In connection with any examination related to the practice of nursing, an applicant to the Board for licensure or a nurse licensed by the Board shall not:
- (a) impersonate or act as proxy for an applicant for nurse licensure, APRN authorization, or certification;
  - (b) disclose the contents of any examination, or solicit, accept, or compile information regarding the contents of any such examination before, during, or after its administration, or in any other way compromise or attempt to compromise the integrity of any such examination; or
  - (c) in any other way cheat on any examination.
- (30) Practice under a False or Different Name. A nurse who holds a valid license shall engage in the practice of nursing only under the name in which such license has been issued.
- (31) Falsification of Information. A nurse licensed by the Board shall not knowingly falsify, or attempt to falsify, any documentation or information related to any aspect of licensure as a nurse, the practice of nursing, and the delivery of nursing services.
- (32) Fraudulent Practices. A nurse licensed by the Board shall not engage in any fraudulent practice including, but not limited to, billing for services not rendered or submitting false claims for reimbursement.
- (33) Impersonation. A nurse licensed by the Board shall not impersonate another nurse or other health care provider, or knowingly allow or enable another person to impersonate him or her.
- (34) Misrepresentation of Credentials. A nurse licensed by the Board shall not misrepresent his or her credentials related to the practice of nursing including, but not limited to, those indicating education, type of nurse licensure, APRN authorization, or certification related to the practice of nursing.
- (35) Security of Controlled Substances. A nurse licensed by the Board and engaged in the practice of nursing shall maintain the security of controlled substances that are under his or her responsibility and control.
- (36) Practice While Impaired. A nurse licensed by the Board shall not practice nursing while impaired.
- (37) Unlawful Acquisition and Possession of Controlled Substances. A nurse licensed by the Board shall not unlawfully obtain or possess controlled substances.
- (38) Administration of Drugs. A nurse licensed by the Board shall not administer any prescription drug or non-prescription drug to any person in the course of nursing practice except as directed by an authorized prescriber. 244 CMR 9.03(38) shall not apply where a Registered Nurse authorized by the Board to practice as a nurse anesthetist administers anesthesia or peri-operative medications, or both, under protocols required by 244 CMR 4.06(1)(c) and (d).
- (39) Documentation of Controlled Substances. A nurse licensed by the Board shall document the handling, administration, and destruction of controlled substances in accordance with all federal and state laws and regulations and in a manner consistent with accepted standards of nursing practice.
- (40) Circumvention of Law. A nurse licensed by the Board shall not receive from, or offer, give, or promise anything of value or benefit to, any official to circumvent any federal and state laws and regulations related to the practice of nursing.

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(41) Compliance with Board Order. A nurse licensed by the Board shall comply with any order for disciplinary action issued by the Board against his or her license to engage in the practice of nursing or right to renew such license, except as otherwise may be determined by the appropriate court in the course of an appeal of a Board final decision and order.

(42) Compliance with Agreements. A nurse licensed by the Board shall comply with all provisions contained in any agreement he or she has entered into with the Board.

(43) Violence. A nurse licensed by the Board shall not endanger the safety of the public, patients, or coworkers by making actual or implied threats of violence, or carrying out an act of violence.

(44) Documentation. A nurse licensed by the Board shall make complete, accurate, and legible entries in all records required by federal and state laws and regulations and accepted standards of nursing practice. On all documentation requiring a nurse's signature, the nurse shall sign his or her name as it appears on his or her license.

(45) Alteration or Destruction of Records. A nurse licensed by the Board shall not inappropriately destroy or alter any record related to the practice of nursing.

(46) Responsibilities of Nurse in Management Role. A nurse licensed by the Board and employed in a nursing management role shall adhere to accepted standards of practice for that role. The responsibilities of the nurse employed in a nursing management role are to develop and implement the necessary measures to promote and manage the delivery of safe nursing care in accordance with accepted standards of nursing practice.

(47) Other Prohibited Conduct. A nurse licensed by the Board shall not engage in any other conduct that fails to conform to accepted standards of nursing practice or in any behavior that is likely to have an adverse effect upon the health, safety, or welfare of the public.

9.04: Standards of Conduct for Advanced Practice Registered Nurses (APRNs)

In addition to the Standards of Conduct set forth in 244 CMR 9.03(1) through (47), the standards set forth in 244 CMR 9.04(1) through (6) shall govern all nurses granted APRN authorization by the Board.

An APRN's failure to comply with the Standards of Conduct for Advanced Practice Registered Nurses may serve as the basis for disciplinary action against the APRN's authorization in accordance with M.G.L. c. 112, §§ 61 and 74. Such failure may also serve as the basis for disciplinary action against the APRN's Registered Nurse license.

(1) Preparation and Competency. An APRN shall practice only in the category of advanced practice registered nursing for which the Board has authorized him or her. The APRN's clinical practice shall include only those areas of practice for which the APRN has formal, advanced nursing education and documented competency. Such formal, advanced nursing education shall meet the criteria for education in nursing as specified in 244 CMR 4.00: *Advanced Practice Registered Nursing*.

(2) Practice following Loss of Authorization. An APRN shall not engage in advanced practice registered nursing, or in any way represent that he or she is authorized to engage in such practice, after the effective date of the surrender, suspension, or revocation of such authorization by the Board, or after the voluntary relinquishment of such authorization to the Board.

(3) Controlled Substance Registrations. An APRN who is an authorized prescriber shall:  
 (a) comply with 244 CMR 4.00: *Advanced Practice Registered Nursing* governing prescriptive practice by an APRN and with all federal and state laws and regulations governing prescriptive practice and the handling of controlled substances; and

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(b) notify the Board in writing of any surrender, suspension, revocation, or other action affecting the APRN's federal or state controlled substances registrations, or both, within 30 days of such action. In the case of the surrender, suspension, or revocation of either registration, or both, the APRN shall immediately cease all prescriptive practice.

(4) Advanced Practice Certification. In order to maintain APRN authorization and to engage in advanced practice registered nursing, an APRN shall hold current professional advanced practice certification shall comply with 244 CMR 4.00: *Advanced Practice Registered Nursing* governing initial and continued certification requirements of the Board approved certifying organization, and shall submit documentation satisfactory to the Board of current certification with each application for Registered Nurse license renewal.

(5) Full Disclosure. When proposing any diagnostic or therapeutic intervention which is beyond the scope of generic nursing practice, an APRN shall fully disclose to the patient or to the patient's representative the risks and benefits of, and alternatives to, such intervention and shall document such disclosure in the patient's record.

(6) Notice of Charges for Services. An APRN engaged in independent billing for his or her services shall provide access to information regarding charges and methods of payment for services when requested by a patient or the patient's representative.

REGULATORY AUTHORITY

244 CMR 9.00: M.G.L. c. 13, § 14; M.G.L. c. 112, §§ 61, 74, 74A, 79, 80, 80A, 80B and 80F.