

Massachusetts Board of Registration in Nursing

Advisory Ruling on Nursing Practice

Title: *Nursing Practice and Cardiopulmonary Resuscitation*

(Previous title: Cardiopulmonary Resuscitation in Long-term Care Facilities)

Advisory Ruling Number: 0801

Authority:

The Massachusetts Board of Registration in Nursing (Board) is created and authorized by Massachusetts General Laws (M.G.L.) c. 13, §§ 13, 14, 14A, 15 and 15D, and G.L. c. 112, §§ 74 through 81C to protect the health, safety, and welfare of the citizens of the Commonwealth through the regulation of nursing practice and education. In addition, M.G.L. c.30A, § 8 authorizes the Board to make advisory rulings with respect to the applicability to any person, property or state of facts of any statute or regulation enforced or administered by the Board. Board regulation 244CMR 9.03(5) requires each nurse to practice in accordance with accepted standards and scope of practice. Furthermore, each nurse is responsible and accountable for his or her nursing judgments, actions, and competency. The Board's regulation at 244 CMR 9.03(6) requires all nurses to comply with any other law and regulation related to licensure and practice including M.G.L. c.111 § 70E, Patients' or Residents' Rights.

Date Issued: January 9, 2008

Date Revised: March 13, 2013, June 8, 2016, June 13, 2018, December 2018

Scope of Practice: Registered Nurses and Licensed Practical Nurses

Purpose: To guide the decision-making of the nurse regarding cardiopulmonary resuscitation when a patient has been found unresponsive.

Advisory:

Standard of Nursing Practice

The nurse licensed by the Board is expected to engage in the practice of nursing in accordance with accepted standards of practice. It is the Board's position that these standards, in the context of practice in all settings where health care is delivered require initiating cardiopulmonary resuscitation when a patient has been found unresponsive and has not yet been declared dead by a provider authorized pursuant to M.G.L. c. 46, § 9, except when the patient has a current, valid Do Not Resuscitate order/status.

Nursing Documentation

The nurse must make complete, accurate and legible entries in all appropriate patient records required by federal and state laws and regulations, and accepted standards of practice. To demonstrate that the nurse has adhered to the accepted standard of nursing practice, documentation that substantiates the nurse's assessment must include:

- Patient specific medical directives (e.g., directive for full cardiopulmonary resuscitation efforts, specified limited resuscitation efforts, DNR)

- Findings from the nurse’s patient assessment including but not limited to:
 - responsiveness
 - respiratory status
 - cardiac status
 - pupillary responsiveness
 - date and time of assessment
- Collaboration and communication with other health care providers to ensure quality and continuity of care including dates and times of notifications
- Communication with the patient’s family or significant others including dates and times of communication

Nursing Competency Related to Advisory Ruling (AR)

Nurses are responsible and accountable for their nursing judgments, actions and competency with regard to performing cardiopulmonary resuscitation in accordance with accepted standards of practice and in accordance with the employing organization’s policies. Board regulation 244CMR 9.03(5) requires each nurse to practice in accordance with accepted standards of practice. The Board’s regulation at 244 CMR 9.03(6) requires all nurses to comply with any other law and regulation related to licensure and practice including M.G.L. c.111 § 70E, Patients’ or Residents’ Rights.

For the purpose of this Advisory Ruling, the licensed nurse must, at a minimum, attain and maintain the following competencies through successful completion of entry-level nursing education programs or continuing education experiences:

- Standards of nursing practice, including, but not limited to current science and treatment recommendations for cardiopulmonary resuscitation from the *American Heart Association (AHA)*^{1,2}
- Role in obtaining accurate information about the DNR status of all assigned patients
- Related statutes and regulations that pertain to this AR including those related to RN pronouncement at M.G.L. c.46 § 9
- Policy(ies) established by the employing organization relative to cardiopulmonary resuscitation

Pronouncement of Death

The pronouncement of death is separate and distinct from the decision-making of the nurse regarding cardiopulmonary resuscitation when a patient has been found unresponsive. Section 9 of chapter 46 of the Massachusetts General Laws authorizes certain individuals, including nurses in certain circumstances, to pronounce death. For more information, see the full text of the [statute](#).³

Application of Advisory Ruling

This advisory is applicable to the nurse who practices in all settings where health care is delivered in Massachusetts.

References:

1. 2015 American Heart Association (AHA) BLS for Healthcare Professionals
2. Kleinman ME, Goldberger ZD, Rea T, Swor RA, Bobrow BJ, Brennan EE, Terry M, Hemphill R, Gazmuri RJ, Hazinski MF, Travers AH. 2017 American Heart Association focused update on adult basic life support and cardiopulmonary resuscitation quality: an update to the American Heart Association guidelines for cardiopulmonary resuscitation and emergency cardiovascular care. *Circulation*. 2018;137: e7–e13.
3. <https://malegislature.gov/Laws/GeneralLaws/PartI/TitleVII/Chapter46/Section9>