**Massachusetts Board of Registration in Nursing**

Advisory Ruling on Nursing Practice

**Title:** The Use of a Vagus Nerve Stimulator Magnet

**Advisory Ruling Number:** 0802

**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.  Each nurse is required to practice in accordance with accepted standards of practice and 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.

**Date Issued:** May 14, 2008

**Date Revised:** June 10, 2009; November 14, 2012; September 9, 2015

**Scope of Practice:** Registered Nurses and Licensed Practical Nurses.

**Purpose:** The purpose of this Advisory Ruling is to guide the practice of the Registered Nurse and Licensed Practical Nurse (nurse) training of unlicensed persons when managing the care of an individual with a Vagus Nerve Stimulator (VNS) device who requires the use of a hand-held magnet to activate the generator transcutaneously if the individual experiences an aura or if an observer witnesses the individual having a seizure. An appropriately-trained unlicensed person can use a hand-held magnet to activate the VNS generator. The use of a VNS magnet is not the practice of nursing.

**Advisory:** The nurse licensed by the Massachusetts Board of Registration in Nursing (Board) will engage in the practice of nursing in accordance with accepted standards. It is the Board's position that these standards, in the context of training unlicensed persons to use a VNS magnet when managing of the care of an individual with a VNS, recognize the licensed nurse as responsible and accountable for:

* Ensuring a valid health care provider prescription for the use of the VNS magnet
* Acquiring and maintaining competencies related to the VNS device and the use of the hand-held magnet
* Assessing and developing a plan of care that includes at minimum:
	+ the individual's seizure prevention needs
	+ signs and symptoms of the seizure pattern in the particular individual
	+ presentation and description of the aura if applicable
	+ location of the VNS in the body
	+ direction and duration of the magnet while swiping
	+ policies for immediate notification of defined staff
	+ circumstances that require notification of emergency personnel when the magnet has been used to deploy the VNS
* Collaborating and communicating about development, implementation, monitoring and evaluation of training and performance of unlicensed persons who may use the hand-held magnet to activate the generator transcutaneously. Such training, monitoring, and performance evaluation **does not** constitute delegation or supervision by the licensed nurse because the use of the VNS magnet is not the practice of nursing
* Communicating with the patient and/or responsible party, providers, and other healthcare personnel in a timely and appropriate manner
* Documenting complete, accurate and legible entries in any and all records required by federal and state laws, regulations, and accepted standards of nursing practice

*Nurse in a Management Role*

The nurse in a management role must ensure the availability of sufficient resources to provide for VNS magnet use training sessions, including, but not limited to organizational evidence-based policies and procedures consistent with current nursing standards that provide for:

* protocols for assessing, validating and documenting competency acquisition and maintenance for VNS magnet use
* nursing care responsibilities, including, but not limited to patient assessment, monitoring, education principles, response to potential complications and/or emergency situations, and documentation criteria