

Massachusetts Board of Registration in Nursing
Advisory Ruling on Nursing Practice

Title: Registered Nurses Performing Long-Acting Reversible Contraception (LARC) Procedures

Advisory Ruling Number: 23-03

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: November 8, 2023

Date Revised:

Scope of Practice: Registered Nurse

Purpose: To guide the practice of registered nurses (RNs) who perform procedures associated with LARC.

Advisory: The RN, licensed by the Board, will engage in the practice of nursing in accordance with accepted professional standards. The nurse must acquire and maintain necessary knowledge, skills, and abilities before assuming duties and responsibilities for performing procedures associated with LARC.

The RN, upon the order of an authorized prescriber, and consistent with organizational policies and procedures, may perform LARC procedures that include, but are not limited to, hormonal contraceptive implants, and intrauterine device (IUD) placement as well as removal.

It is the Board's position that RNs who have attained the required knowledge and competencies may perform procedures associated with LARC, including removal. RNs, upon competency attainment, may place and remove sutures related to hormonal contraceptive implants.

Definitions:

- **LARC**- means a long-lasting and easily reversible birth control. LARC includes hormonal contraceptive implants and intrauterine devices (IUDs), which are more than 99% effective in preventing unintended pregnancy. Although LARC devices should not be placed in currently pregnant individuals, they can be inserted shortly after giving birth because LARC is safe while breastfeeding. The LARC device can be removed on request, and pregnancy can occur right after LARC device removal.¹
- **Authorized prescriber** means a person who holds current and valid controlled substances registrations issued by the United States Drug Enforcement Administration (DEA) and the Drug Control Program of the Massachusetts Department of Public Health (MCSR).²

Competence Acquisition

Registered nurses whose practice includes placement or implantation of LARC must:

- Assume only those responsibilities for which they have education, experience, and current clinical competency to perform, and that are in compliance with established standards of nursing practice and organizational policy and procedure.
- Possess initial and ongoing competence as evidenced by documented completion of didactic and clinical continuing education programs, employing agency education programs, and/or certification by a recognized body experts in the following:
 - Didactic and clinical training in the insertion and removal of IUDs and the implantation, suturing and removal of hormonal contraceptive implants.
 - Pre-insertion assessment including a pregnancy test and vaginal exam.
 - Identification of contraindications to placement and/or insertion.
 - Infection prevention and standard precautions including hand hygiene and the use of appropriate personal protective equipment (PPE).
 - Identification, prevention, and management of complications.
 - Patient /caregiver education including the prescribed therapy, the plan of care, the goals of treatment, self-monitoring for signs and symptoms of related complications and how to access health care services as needed. Education must include procedures for the patient to take if testing positive for pregnancy including the necessity of device removal.
 - Use of technical and medical equipment required for the procedure, including suturing.
 - Removal of implanted and/or inserted device.
 - Documentation of assessment, insertion, response to treatment and removal, as applicable.
 - Documentation of device identification and storage of records in the event of a recall including implant cards, if applicable.

¹ Stark E. L., Garipey A. M., & Son. M. What is long-acting reversible contraception? August 12, 2022. *JAMA Patient Page*. Retrieved at [What Is Long-Acting Reversible Contraception? | Adolescent Medicine | JAMA | JAMA Network](#)

² Massachusetts Board of Registration in Nursing. 244 CMR 10.00 Definitions and Severability. Retrieved at <https://www.mass.gov/doc/244-cmr-1000-definitions-and-severability/download>

- Surveillance/quality improvement/outcome measure participation and contribution

Practice

Registered nurses practice within their scope, are responsible and accountable for their nursing judgement, actions, and competency. They do not perform activities outside their scope of practice.

The performance of insertion or implantation of LARC is pursuant to:

- The orders of a duly authorized prescriber. The RN must verify the orders from a duly authorized prescriber including the patient's name, valid order date, medication or device name, dosage, route, specific administration/insertion directions and prescriber signature or.
- Standing orders or protocol that meet the criteria found in Advisory Ruling 93-24: Accepting, Verifying, Transcribing and Implementing Prescriber Orders: <https://www.mass.gov/doc/ar-9324-accepting-verifying-transcribing-and-implementing-medication-orders/download>

It is the Board's position that RNs whose practice includes the placement or insertion of LARC may only practice in settings that have organizational policies and procedures that include:

- Exclusion criteria
- A standing order for a same-day pregnancy test to be obtained prior to performing the LARC procedure, including notification of the authorized prescriber if the pregnancy test is positive.
- A requirement for informed consent.
- A requirement for a comprehensive, documented assessment by the registered nurse, including allergies.
- Recommendations for self-care.
- Follow-up recommendations.
- Situations that require referral or escalation to the authorized prescriber.
- A requirement for patient education including follow up recommendations inclusive of instructions for the patient to implement if becoming pregnant with LARC in place including the importance of device removal.
- Provisions for emergent care.
- Management of side effects.
- A requirement for documentation including response to treatment that is current, complete, accurate and legible in all records required by federal and state law.
- Product evaluation, integrity, and defect reporting as well as record keeping in the event of a device recall.
- Record keeping standards that ensure client confidentiality and record retention that is in compliance with medical records obligations.
(<https://www.mass.gov/service-details/medical-records-obligations>)

Documentation

Documentation criteria must include

- Review and verification of informed consent that clearly informs the patient of the operator's qualifications, licensure and expected outcomes of the procedure.
- Assessment data inclusive of past medical, surgical, allergy and pregnancy(s), medical, surgical, allergy and medication histories.
- Exclusions from treatment criteria.
- Specifics of the procedure performed and patient response.
- Directions for referral back to or consultation with the duly authorized prescriber.

The Nurse in the Management Role

The nurse in a management role must ensure the availability of sufficient resources to provide for safe implementation, including, but not limited to organizational policies that provide for:

- Protocols for requiring and providing appropriate competency attainment education which includes didactic and clinical pertaining to LARC procedures.
- Protocols for assessing and documenting the education received and validation for registered nurses' initial and continued competency for each procedure
- Nursing care responsibilities, including, but not limited to, hand hygiene, aseptic technique, patient assessment, monitoring, procedural, medication administration, potential complications, documentation criteria and patient education.
- A method and time frame of authenticating authorized prescriber orders and their evaluation.
- Methods to verify the device name, and if applicable, dosage.
- Emergency protocols including, but not limited to, immediate, on-site availability of emergency equipment, medications, and personnel.
- Methods to ensure documentation of device's serial number to ensure identification of recalled devices.

References

Kemeny, F., Digiusto, E. and Bateson, D. Insertion of Intrauterine contraceptive devices by registered nurses in Australia. Australia New Zealand Journal of Obstetrics and Gynaecology. 2016. Feb; 56 (1): 92-96. Accessed at [Insertion of intrauterine contraceptive devices by registered nurses in Australia - Kemeny - 2016 - Australian and New Zealand Journal of Obstetrics and Gynaecology - Wiley Online Library](#)

Massachusetts Board of Registration in Nursing. Advisory Ruling 93-24 Accepting, Verifying, Transcribing and Implementing Medication Orders. Accessed at: <https://www.mass.gov/doc/ar-9324-accepting-verifying-transcribing-and-implementing-medication-orders/download>

Washington State Board of Nursing. FAQs Commonly Asked Questions – Registered

Nurse. Category Reproductive and Gynecologic Care. "Can the registered nurse use standing orders to provide birth control or to screen for and treat sexually transmitted diseases?". Accessed at <https://nursing.wa.gov/support-practicing-nurses/practice-information/registered-nurse>