## NEVADA STATE BOARD OF NURSING

## **Ouestion:**

Can a Registered Nurse insert an Interuterine Pressure Catheter to assist with the evaluation and management of labor?

## **History:**

The question was formally presented to the NSBN Nursing Practice Committee b Sunrise Hospital and Medical Center in September, 1997. The Nursing Practice Committee reviewed the proposal at the regularly scheduled meetings in September and again in November, 1997. A survey of certain states accompanied the question. The NSBN conducted a survey of all nursing boards in reference to this practice.

## **Recommendations:**

The NSBN Nursing Practice Committee recommends that a Registered Nurse may insert an Interuterine Pressure (IUPC) Catheter to assist with the evaluation and management of labor, if the following guidelines have been met:

- 1. Cesarean section and emergency resuscitation services are on site and readily available.
- 2. Closed IUPC systems are the systems of choice (versus open port systems).
- 3. Education Requirements:
  - a. Minimum of one (1) year of current experience in Labor and Delivery prior to facility specific certification program.
  - b. The facility provide an approved certification program for insertion of IUPC's which includes both didactic and clinical portions.
  - c. Training must include at least three successful demonstrations supervised by an Advanced Practitioner of Nursing (APN), a Physician, or a Registered Nurse currently certified in the procedure.
  - d. Certification must be renewed annually including didactic and clinical review with successful return demonstration.
  - e. All education and training must also include the risks, alternatives, benefits and practices of ammioinfusion.
- 4. A physician or APN order must be obtained prior to insertion of an IUPC. Documentation should include estimated placement and position of the catheter, fetal and maternal responses, fetal heart rate patterns, increase in vaginal bleeding, vasovagal response and interventions.
- 5. Manufacturer recommendations should be followed regarding insertion, placement and technique employed for insertion.

6. Outcome data for this procedure must be collected and evaluated for safety of practice.

Adopted 9/97