



Registered Nurse (RN) Prescribing



COLLEGE OF NURSES
OF ONTARIO
ORDRE DES INFIRMIÈRES
ET INFIRMIERS DE L'ONTARIO

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The College of Nurses of Ontario (CNO) protects the public by promoting safe nursing practice. One way we do this is by developing standards of practice for nurses in Ontario.

The purpose of this practice standard is to outline the legislated scope of practice and the accountabilities for Registered Nurses (RNs) who have the authority to prescribe certain medications¹. CNO refers to this authority as “RN prescribing”.

RN prescribing includes assessing, diagnosing and administering medication to treat certain non-complex medical conditions. RNs with prescribing authority can prescribe certain medications and communicate a diagnosis they made for the purpose of prescribing.

RN prescribing competencies are not part of the entry-level competencies obtained in undergraduate RN education. To obtain the authority to prescribe, RNs must successfully complete a continuing education program approved by CNO’s Council². CNO’s public registry, Find A Nurse, will indicate when a nurse is authorized to prescribe.

The regulation³ under the *Nursing Act, 1991*, specifies the medications and categories of medications an RN is authorized to prescribe. For a list of the medications and categories of medications, see [Appendix A: Medications that may be prescribed by RNs with prescribing authority](#).

¹ In this document, the term medication is used and has the same meaning as the term “drugs” which is used in O. Reg. 275/94

² Registered Nurses enrolled in an RN prescribing education program may prescribe medication from Appendix A and/or communicate a diagnosis they made for the purpose of prescribing, under the supervision of an individual who is authorized to prescribe and communicate a diagnosis under a health profession Act as defined in the *Regulated Health Professions Act, 1991* (RHPA). See subsections 16.1(4) and 16.1(5) of O. Reg. 275/94

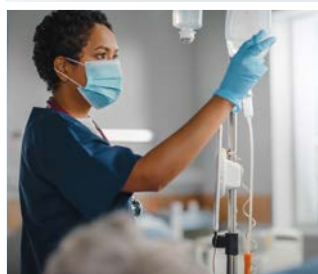
³ See O. Reg. 275/94

To meet the expectations of this practice standard, an RN with prescribing authority must consider the following key principles:



Authority

Nurses must practice in compliance with their legislated scope of practice and employer policies.



Competence

Nurses must ensure they have the knowledge, skill and judgment to prescribe a medication and/or communicate a diagnosis they made for the purpose of prescribing medication.



Safety

Nurses promote safe care and must ensure their prescribing practices are in the client's best interests and contribute to a culture of safety.

This practice standard expands on the accountabilities found in the *Code of Conduct* and all other practice standards. RNs with prescribing authority are expected to practice in compliance with all relevant legislation, the standards of practice of the profession and applicable employer policies. Failing to comply with legislation or meet the standards of practice of the profession could amount to **professional misconduct**.

Bolded terms are defined in the glossary at the end of the document.



Under the *Nursing Act, 1991*⁴, RNs with prescribing authority, who meet specified conditions, are authorized to:



- i) prescribe a medication, or a drug from within a category of medications, set out in the regulation⁵ ([see Appendix A: Medications that may be prescribed by RNs with prescribing authority](#))



- ii) communicate to a client or their representative a diagnosis made by the RN where the purpose of that communication is for prescribing the medication



- iii) dispense or administer by injection or inhalation (without an order from another authorized provider), a medication that they have prescribed

⁴ See Section 4.1 of the *Nursing Act, 1991*, and subsections 16.1(1)-(5), 18 (2)-(4) and 20(2)-(4) of O. Reg 275/94

⁵ See O. Reg. 275/94

AUTHORITY

RNs with prescribing authority must:

- have completed CNO Council-approved education for RN prescribing
- have a [therapeutic nurse-client relationship](#) with the client
 - ✓ for whom they are prescribing a medication
 - ✓ for whom they are communicating a diagnosis that they made, for the purpose of prescribing a medication
- prescribe the medication for therapeutic purposes only
- ensure all required information is on the prescription and retain that information in the client's health record ([See Appendix B: Medication Practices: Requirements for medication prescriptions](#))

- only prescribe a medication in compliance with the route of administration or other specification indicated for that medication⁶
- only communicate a diagnosis they made to their client or their representative and only for the purpose of prescribing the medication
- comply with all relevant legislation, the standards of practice of the profession and applicable employer policies. For example, the *Public Hospitals Act* does not permit RN prescribing.

Also, RNs with prescribing authority are only authorized to provide medication orders to other RNs or RPNs for the purposes of dispensing or administering by injection or inhalation the medications specified in [Appendix A: Medications that may be prescribed by RNs with prescribing authority](#).

Restrictions

- RNs with prescribing authority are not permitted to **delegate** the controlled acts of:
 - ✗ prescribing a medication
 - ✗ communicating a diagnosis they made to a client or their representative for the purposes of prescribing
- RNs with prescribing authority are not permitted to prescribe medications that are not included in [Appendix A: Medications that may be prescribed by RNs with prescribing authority](#)
- Provincial laws do not permit RNs:
 - ✗ to order lab or diagnostic tests⁷
 - ✗ to sell or compound medications⁸

⁶ See subsection 16.1(3) of O. Reg 275/94

⁷ For example, the *Laboratory and Specimen Collection Centre Licensing Act* does not allow RNs or RPNs to order lab tests

⁸ The *Nursing Act, 1991* and the regulations O. Reg 275/94 do not allow RNs or RPNs to sell or compound medications



RNs with prescribing authority also must ensure they have the knowledge, skill and judgment to safely, effectively and ethically prescribe a medication from [Appendix A: Medications that may be prescribed by RNs with prescribing authority](#). Competence to prescribe includes being able to perform a health assessment, formulate a diagnosis and provide therapeutic management appropriate to the diagnosis.

Health Assessment

RNs with prescribing authority perform and document an evidence-informed health assessment to obtain the necessary information to formulate a diagnosis and plan of care.

RNs with prescribing authority:

- obtain and consider the necessary information for the health assessment including relevant subjective and objective data
- review the best possible medication history before prescribing
- apply critical inquiry and diagnostic reasoning
- anticipate actual and potential health risks and contraindications
- manage outcomes

COMPETENCE

Diagnosis

RNs with prescribing authority may communicate a diagnosis to a client or their representative only if:

- i) they are the person who made the diagnosis
- ii) they are prescribing a medication that is appropriate to treat the disease or condition that is diagnosed

RNs with prescribing authority:

- analyze and interpret data from a variety of sources including information obtained from the health assessment to form a diagnosis
- ensure that the best available treatment option is within the RN's individual competence and prescribing authority
- discuss the proposed treatment plan and expected outcomes with the client
- verify that the client understands the treatment plan and their diagnosis, if applicable
- document their diagnosis in the client's health record

Therapeutic Management

Based on their assessment and diagnosis, RNs with prescribing authority formulate the most appropriate plan of care for the client and implement evidence-informed therapeutic intervention in partnership with the client to optimize health.

RNs with prescribing authority:

- collaborate with the client in making decisions about the plan of care in relation to best medication practices
- provide education to the client regarding their medication
- counsel the client on medications, including rationale, cost, potential adverse effects, interactions, contraindications and precautions as well as risk and benefits of adhering to the prescribed regimen
- develop and implement appropriate follow-up in collaboration with the client and the health care team
- obtain [informed consent](#)
- monitor and [document](#) the client's response to medication therapy, and continue, adjust or discontinue a medication based on their assessment of the client's response



RNs with prescribing authority ensure their prescribing practices comply with all relevant legislation, the standards of practice of the profession and applicable employer policies which contribute to a culture of safety within their practice environments.

Collaboration, Consultation and Transfer of Client Care

RNs with prescribing authority are accountable to identify when collaboration, consultation and referral are necessary for safe, competent and comprehensive care.

RNs with prescribing authority:

- provide consultation, respond to questions and clarify their prescription orders and the plan of care to other members of the **health care team**
- only prescribe medication from [Appendix A: Medications that may be prescribed by RNs with prescribing authority](#) that is safe and supported by evidence, and, in the client's best interest
- have access to the necessary resources, for example, environmental, human or physical resources, to prescribe safely
- consult or transfer care to another care provider as necessary for safe client care
- collaborate in the development, implementation and evaluation of system approaches to support safe medication practices within the health care team

SAFETY

Conflict of Interest

RNs with prescribing authority recognize and ethically manage actual, potential and perceived conflicts of interest.

RNs with prescribing authority:

- must not engage in conduct that results, directly or indirectly, in a personal or financial benefit that conflicts with their professional or ethical duty to a client⁹
- do not use their professional designation to promote one treatment option over another if it is not in the client's best interest
- do not prescribe medication to themselves
- only prescribe medication to family members, partners, friends or acquaintances when there are no other providers available in circumstances outlined in the *Professional Boundaries and Nurse-Client Relationships* practice standard and until other arrangements can be made
- do not allow their interactions with industry¹⁰ to interfere with evidence-informed decision-making

⁹ See subsection 16(1) of O. Reg. 275/94

¹⁰ Includes pharmaceutical, medical device and technology companies

Authority: When a nurse is authorized to perform an activity by the *Regulated Health Professionals Act, 1991*, the *Nursing Act, 1991*, and the regulations under those acts, and is permitted to perform the activity by practice-specific legislation and employer policies, and the required authorizing mechanisms are in place.

Client: Individuals, families, communities or populations.

Competence: The knowledge, skill and judgment required to perform an activity safely and manage outcomes within a nurse's role and practice setting.

Controlled Acts: Acts that could cause harm if performed by those who do not have the knowledge, skill and judgment to perform them, as defined in the *Regulated Health Professionals Act, 1991*, and the *Nursing Act, 1991*.

Delegate: A formal process through which a regulated health professional (delegator), who has the authority and competence to perform a procedure under one of the controlled acts, delegates the performance of that procedure to another individual (delegatee).

Diagnosis: A clinical judgment based on a health assessment of the most likely cause of a client's mental or physical symptoms or condition.

Dispensing: To select, prepare and transfer stock medication for prescribed medication doses to a client or their representative for administration later.

Health Care Team: Members of the intraprofessional and/or interprofessional team and/or community supporting client care, including students, new learners, Indigenous and traditional healers.

Professional Misconduct: An act or omission that contravenes nurses' legislated obligations and/or the standards of practice and ethics of the profession. Professional misconduct is defined in section 51(1) of the Health Professions Procedural Code, which is Schedule 2 to the *Regulated Health Professionals Act, 1991*, and further described in the Professional Misconduct regulation (O.Reg, 799/93) under the *Nursing Act, 1991*.

APPENDIX A: MEDICATIONS THAT MAY BE PRESCRIBED BY RNS WITH PRESCRIBING AUTHORITY

Immunization

- any vaccines for prevention of bacterial and viral disease

Contraception

(excludes intra-uterine devices/contraceptives and contraceptive implants)

- any hormonal contraceptives for systemic use
- any intravaginal contraceptives

Travel Health

- for the purposes of malaria prevention, any of the following drugs:
 - ✓ aminoquinolines
 - ✓ biguanides
 - ✓ bethanolquinolines
 - ✓ doxycycline
- for the prevention and/or treatment of traveller's diarrhea, any of the following drugs:
 - ✓ norfloxacin
 - ✓ ciprofloxacin
 - ✓ levofloxacin
 - ✓ azithromycin
 - ✓ rifaximin

Topical Wound Care

- for cracked nipple care, a combination of all three of the following:
 - ✓ betamethasone 0.1%
 - ✓ mupirocin 2% ointment
 - ✓ miconazole powder to a final concentration of 2%

- metronidazole for topical use for symptom management of odorous wounds
- any antibiotics for topical use

Smoking Cessation

- for the purpose of smoking cessation, any of the following drugs:
 - ✓ bupropion hydrochloride
 - ✓ varenicline tartrate

Anesthetics

- for the purpose of pain relief related to immunization and/or topical wound care, the following drugs:
 - ✓ any anesthetics used topically

Allergic Reaction

- for the purpose of treating anaphylaxis, the following drug:
 - ✓ epinephrine

Over-The-Counter Medication

- any drug or substance that may lawfully be purchased or acquired without a prescription and is available for self-selection in a pharmacy

APPENDIX B: MEDICATION PRACTICES: REQUIREMENTS FOR PRESCRIPTIONS

Information required on a medication prescription:

- Name and address of the person for whom the medication is prescribed
- Name of the medication, strength (where applicable) and quantity of the medication that is prescribed
- Directions for use, including dose, route of administration, frequency and if applicable the duration of therapy
- Prescribing RN's name, business address and telephone number, title and registration number
- Prescribing RN's signature (may be an electronic signature)
- Date on which the medication is prescribed
- Number of refills, if applicable

The prescribing RN must retain a copy of the information recorded on the prescription as part of the client's health record.

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Registered Nurse (RN) Prescribing

Practice Standard

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