



Air & Surface Transport Nurses Association Position Statement

Role of the Registered Nurse in the Out-of-Hospital Environment

Background

Registered Nurses (RNs) have long provided patient care in the out-of-hospital transport environment, and their role as providers of patient care during air or ground transport has been well documented. RNs also have a long and effective history of providing education to prehospital care providers throughout the United States.

Historically, in the absence of specific nursing education or comprehensive practice standards for nurses to work in the out-of-hospital environment, the nursing community often turned to the knowledge base and standards for the various levels of emergency medical technician (EMT) practice. Many states still mandate that RNs who practice in the out-of-hospital environment hold a prehospital provider credential such as EMT, Paramedic, or similar certification.

These circumstances resulted in the following challenges:

1. Many state EMS agencies regulate RN practice in the out-of-hospital environment.
2. In some states, RNs who practice in the out-of-hospital environment are legally required to function under a prehospital provider credential rather than under a nursing license, which causes both a legal and ethical conflict.
3. States differ regarding whether out-of-hospital practice by RNs is regulated by state boards of nursing, state EMS offices, or both, even though RNs are held accountable to their higher care license.
4. In some states, emergency department and critical care transport nurses are not permitted to teach in training programs for prehospital care providers without also holding a prehospital provider credential such as EMT, Paramedic, or similar certification.

Rationale

The specialty practice of nursing in the out-of-hospital environment depends on independent judgment, analytical thinking, decision making, and prioritization. Critical care transport RNs must also possess advanced assessment and intervention skills to recognize subtle or latent symptoms, and they must be able to initiate care independently and with local medical direction

in collaboration with their colleagues under conditions that may make optimal patient care difficult.

RNs practicing in an out-of-hospital environment are held accountable to a standard of care that is commensurate with their knowledge, education, experience, and licensure.

Critical care transport RNs have the educational background and experience that prepares them to assess, formulate a plan of care, implement care, and evaluate the care of acutely ill or injured patients. They also have the leadership, collaborative, and interpersonal skills needed to coordinate the multidisciplinary teams often required to care for these patients. A critical care transport RN's scope of practice is enhanced with experience and education, appropriate to the specialty of out-of-hospital care. This scope of practice and expert knowledge of the out-of-hospital environment qualifies critical care transport RNs to participate in the education of other prehospital care providers.

ASTNA Position

- ASTNA holds that critical care transport nursing is a specialty within the scope of nursing practice; therefore, qualified RNs practicing in an out-of-hospital environment should not be required to hold a prehospital provider credential, at any level, before assuming a nursing role in the out-of-hospital environment provided that the following three requirements are met:
 1. They have obtained the appropriate knowledge specific to the nursing specialty of out-of-hospital air and ground transport.
 2. They have demonstrated and maintained proficiency in the unique skills required to deliver care in an out-of-hospital environment.
 3. They are neither designated as first responders nor provide search and rescue.
- ASTNA endorses the need for specialized education requirements for RNs practicing in an out-of-hospital environment. Focused education and subsequent maintenance of specifically identified and recognized out-of-hospital knowledge and skills must be a prerequisite for RNs who practice in this environment. RNs should possess critical thinking skills, leadership qualities, independence, the ability to handle stressful situations, the ability to organize and prioritize care, and flexibility and adaptability in the event that a patient's condition changes during transport.
- ASTNA supports state boards of nursing as the regulatory agencies for the profession of nursing. The practice of nursing in an out-of-hospital environment is identified as a specialty area within nursing; thus, state boards of nursing are the definitive authority for regulating this specialty practice.
- ASTNA recognizes that EMS personnel possess a specialized body of knowledge and skills and recognizes the need for collaboration and communication with the US Department of Transportation National Highway Traffic Safety Administration

(NHTSA), various national EMS organizations, state offices of EMS, and local EMS agencies regarding all aspects of the out-of-hospital role.

- ASTNA seeks recognition by NHTSA, various national EMS organizations, state offices of EMS, and local EMS agencies for RNs in the unique position as a provider of emergency and critical care in the out-of-hospital environment.
- ASTNA endorses a collaborative role for RNs specifically prepared in the delivery of out-of-hospital care with other out-of-hospital providers and health care professionals in the transport environment.
- ASTNA supports the use of resources such as *Critical Care Transport Nursing Core Curriculum*, *Standards for Specialty and Critical Care Transport*, *Patient Transport: Principles and Practice*, *Critical Care Patient Transport: Principles and Practice*, and *Guidelines for Air Medical Crew Education*. These resources serve as the foundation for training and education for RNs who practice in an out-of-hospital environment and should be used in the design of initial orientation programs, as well as for ongoing training that meets the needs of individual programs or systems, exceeds legislative requirements, and meets national standards.
- ASTNA endorses the accreditation standards of the Commission on Accreditation of Medical Transport System (CAMTS) and the Commission on Accreditation of Ambulance Services (CAAS) as evidence of meeting or exceeding national standards related to transport nurse pre-hire requirements, initial critical care transport nurse orientation, continuing critical care transport nurse education, competencies, quality management, and safety.
- ASTNA endorses the Certified Flight Registered Nurse (CFRN) and the Certified Transport Registered Nurse (CTRN) certifications as validation of mastery of the knowledge base required for out-of-hospital nursing practice, as well as a means for promoting quality patient care, as outlined in ASTNA's position paper *Transport Nurse Certification*.
- ASTNA believes that it is the role of the RN to deliver out-of-hospital care by initiating the nursing process, which includes the following steps:
 1. Conducting a physical assessment appropriate to the situation, including pertinent history of present illness and injury
 2. Formulating a focused and specific plan of care appropriate for the patient's condition complete with expected outcomes, which reflects the synthesis and application of knowledge, assessment data, and available resources
 3. Implementing appropriate out-of-hospital interventions based on a focused plan of care, as well as patient priorities commensurate with established national standards for out-of-hospital practice, emergency air and ground nursing transport, local

standards and protocols, local on-line and off-line medical control, and program or department policies

4. Evaluating the efficacy and outcome of nursing and medical interventions throughout the treatment and transfer process with continued reassessment of the plan of care based on patient responses and medical direction
 5. Collaborating and coordinating with other personnel in the prehospital and interhospital settings to facilitate optimum patient care
 6. Communicating all relevant data to the designated facility
 7. Delivering a thorough, accurate report, in both written and verbal formats, of patient information to the receiving health care team upon delivery of the patient
- ASTNA also believes that RNs in an out-of-hospital environment are also responsible and accountable for implementing the following roles as they relate to out-of-hospital care:
 1. A research role that involves describing and investigating phenomena, problems or ideas pertinent to out-of-hospital nursing practice, developing data bases, contributing to the scientific knowledge base for out-of-hospital care, and integrating research findings to affect patient outcomes and assist in illness and injury prevention
 2. A safety role that includes support for and participation in establishing and maintaining a safety culture and acknowledgement that safety is the responsibility of all team members
 3. An educational role that includes participating in patient, community, prehospital provider, and other health care provider education
 4. A responsibility to acquire and maintain knowledge and skills commensurate with their scope of practice
 5. A management role that may include aspects of scene control, mass-casualty triage and allocation of resources but is considered collaborative and requires authorization from the local EMS agency and medical direction.
 6. A consultation role that involves enhancing communication between personnel of various agencies and facilities
 7. A collaborative role that seeks to improve and enhance patient care delivered within the EMS system
 8. An advocacy role that involves protecting patient rights, facilitating patient entry into the EMS system, and promoting recovery and wellness to the community at large

9. An administrative role that may include program and personnel administration of continuous quality improvement

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Reviewed 2010, 2012, 2015, 2018

Published 2018 Air & Surface Transport Nurses Association.

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