Individual scopes of practice vary from one APRN to another, even between APRNs within the same role and focus/specialty. It is important to remember that each nurse is responsible and accountable for the care they provide and to practice within their area of education, licensure, competence, and experience.

Licensure
SD licensure allows an advanced practice registered nurse (APRN) to practice within the full scope of the licensee’s RN license and APRN license. An APRN license is issued in a role and population focus/specialty area. There are four licensed APRN roles: certified nurse midwife (CNM), certified nurse practitioner (CNP), certified registered nurse anesthetist (CRNA), and clinical nurse specialist (CNS). Each APRN role is educated in a specific focus/specialty area and is certified within that educational focus area. Focus areas include: Adult/Gero (acute or primary settings), Family (across the lifespan), Neonatal, Pediatrics (acute or primary settings), Psychiatric-Mental Health, and Women’s Health.

Legal Title
- A person licensed by the board as an advanced practice nurse may use the title APRN; and title of their role: CNP, CNM, CRNA, or CNS along with the APRN title.
- APRNs are encouraged to use their licensure titles first after their name on patient related documentation and when advertising services. Examples: Mary Smith, APRN, CNM; or Jane Smith, CRNA; or Tom Smith, CNP, DNP, FNP.

Practice:
APRNs, as advanced clinicians, are expected to practice within their licensed role, focus area, competence, and experience. The scope of their practice, defined as tasks or activities they may perform or provide, vary based on the individual licensee. To determine if a task, intervention or role is within an APRN’s scope, refer to the APRN Scope of Practice Decisioning Algorithm.

Keep in mind that clinical experience and completion of continuing education alone has its limits to expansion of scope. Additional formal education and certification may be needed to add scope that is outside of an APRN’s licensed legal role or focus area.

However, no matter what an APRN’s role or focus area of practice, APRNs are expected to minimally complete a full health assessment, physical examination, and review of systems. While an APRN is not expected to diagnose outside of their area of practice and expertise, they are expected to identify abnormal findings and appropriately collaborate and refer conditions outside of their expertise or area of practice.

For example, a Psych-Mental Health CNP should be capable of performing a physical health assessment and examination, recognize abnormal findings and appropriately refer. Similarly, a Women’s Health CNP is accountable to be capable of assessing a patient’s mental health, recognize abnormal mental health findings and appropriately refer.

Age Parameters:
The Board endorses the following statement by the national APRN Licensure, Accreditation, Certification and Education (LACE) Network:

“Circumstances exist in which a patient, by virtue of age, could fall outside the traditionally defined population focus of an APRN but, by virtue of special need, is best served by that APRN. Such patients may be identified as non-traditional patients for that APRN. In these circumstances, the APRN may manage the patient or provide expert consultation to assure the provision of evidence-based care to these patients.”


The South Dakota Board of Nursing approved these guidelines on February 8, 2018.
APRN Scope of Practice Decisioning Algorithm

Identify, describe or clarify the activity, intervention, or role under consideration.

Is the activity, intervention, or role expressly prohibited in the nurse practice act, other state, or federal law? (Contact the Board of Nursing to assist if needed.)

YES → STOP

NO →

Is performing the activity, intervention, or role consistent with your:
- Graduate APRN role and education?
- National standards of practice?
- Current literature and evidenced based care/research?
- Institution policy/procedure?
- Institution accreditation standards?
- Reimbursement/payer requirements?

NO → STOP

YES →

Is performing the activity, intervention, or role consistent with reasonable and prudent practice?

NO → STOP

YES →

Do you have the necessary knowledge, skill and experience to perform the activity, intervention, or role safely?

NO → STOP

YES →

Will you have the appropriate resources to perform the activity, intervention, or role in this setting?

NO → STOP

YES →

Are you prepared and willing to:
- Manage the results for the activity, intervention, or role?
- Assume accountability and liability for your decisions and outcomes within your clinic or practice setting? Or,
- Are you approved or credentialed to provide in your practice setting?

NO → STOP

YES →

The APRN may perform the activity, intervention, or role to acceptable and prevailing standards of safe care.