



## **MEMBER ALERT**

November 28, 2018

### **CORRECTION ANTICIPATED FROM JOINT COMMISSION ON NOTE REGARDING RN CIRCULATORS *AORN recommends hospitals continue following CMS guidelines***

In an AORN review of the latest Joint Commission standards, now available in electronic form and due for print release in January 2019, the association observed a misleading new Note regarding RN circulators in hospital operating rooms. The new Note reads as follows:

#### **January 2019**

PC.03.01.01: The hospital plans operative or other high-risk procedures, including those that require the administration of moderate or deep sedation or anesthesia.

EP 5: A registered nurse supervises perioperative nursing care.

**New: A qualified registered nurse who is immediately available to respond to emergencies may delegate circulatory duties to licensed practical nurses and surgical technologists in accordance with law and regulation and hospital policy.**

After hearing AORN's concerns that this new language conflicts with CMS guidelines and accepted best practices, the Joint Commission has informed AORN of its intention to revise and update the Note to accurately reflect CMS guidelines in both electronic and print standards. The update will not be available online or in print until July 2019.

#### **In July, 2019, the revised Note will read:**

**Note:** PC.03.01.01, EP 5: Note: Qualified registered nurses may perform circulating duties in the operating room. In accordance with state law and regulation and hospital policy, licensed practical nurses and surgical technologists may assist the circulating registered nurse in performing circulatory duties as long as the registered nurse supervises these staff and is immediately available to respond to emergencies.

#### **In the interim, AORN advises hospitals to continue following clear CMS guidelines requiring the circulating nurse in hospital ORs to be an RN.**

#### **Background**

This new Note regarding operating room circulators was first published without public comment on September 24, 2018 in a Joint Commission *Prepublication Requirements* bulletin, available [here](#).

As written, the new EP 5 Note implies that the circulating RN may delegate his/her circulating duties to an LPN or ST, inaccurately paraphrasing the CMS interpretive guidelines regarding circulating duties in

the operating room. The CMS interpretive guidelines for hospitals for §482.51(a)(3) are clear: **“The circulating nurse must be an RN.”**

CMS does allow for LPNs and STs to *assist* the circulating RN in circulating duties. But, full delegation of circulating duties by an RN to a non-RN contravenes AORN guidelines, the standard of care nationwide, and many states’ nurse practice act provisions on delegation.

### **RN Circulator – Every Patient. Every Time.**

34 states address the registered nurse circulator in hospital laws and regulations in a manner more stringent than CMS. Familiarize yourself with the law in your state [here](#). If your state does not currently address RN circulators, now is the perfect time to adopt and implement a hospital-wide policy clearly requiring a registered nurse circulator to be present for the duration of each procedure for every patient, every time.

### **Full text of CMS hospital regulation and surveyor instructions:**

Following is the full text of the CMS regulation and surveyor instructions on the topic of RN circulators and operating room safety.

**42 CFR §482.51(a)(3) - Qualified registered nurses may perform circulating duties in the operating room. In accordance with applicable State laws and approved medical staff policies and procedures, LPNs and surgical technologists may assist in circulatory duties under the supervision of a qualified registered nurse who is immediately available to respond to emergencies.**

CMS Instructions to Surveyors: Interpretive Guidelines §482.51(a)(3): The circulating nurse **must** be an RN. An LPN or surgical technologist may assist an RN in carrying out circulatory duties (in accordance with applicable State laws and medical-staff approved hospital policy) but the LPN or surgical technologist must be under the supervision of the circulating RN who is in the operating suite and who is available to immediately and physically respond/intervene to provide necessary interventions in emergencies. The supervising RN would not be considered immediately available if the RN was located outside the operating suite or engaged in other activities/duties which prevent the RN from immediately intervening and assuming whatever circulating activities/duties that were being provided by the LPN or surgical technologist. The hospital, in accordance with State law and acceptable standards of practice, must establish the qualifications required for RNs who perform circulating duties and LPNs and surgical technologists who assist with circulating duties.

*If you experience issues surrounding this topic during a Joint Commission survey or otherwise need to add clarification to the operating room safety policies and procedures in your hospital, please reach out to AORN General Counsel and Director of Government Affairs, Amy Hader, at [ahader@aorn.org](mailto:ahader@aorn.org) or (303) 338-4891.*