RNFA Scope and Qualifications to Practice
Last update: April 2015

STATE	Scope of Practice	Qualifications to Practice	Qualifications for APRNs **
Alabama	**ALA. ADMIN. CODE § 610-X-7-.04:** (3) When directed by the attending surgeon, the RNFA intraoperative functions include but are not limited to: (a) Positioning the patient, preparing and draping the surgical site. (b) Providing exposure, retraction, and hemostasis. (c) Use and handling of surgical instrumentation. (d) Tissue handling, dissection, suturing, and stapling. (e) Making the skin nick or stab wound for laparoscopic surgery or drains excluding placement of trocar for laparoscopic access. (f) Securing drains. (g) Closing of wounds external to the fascia. (h) Harvesting extremity veins and closure of the resulting wounds. (4) Functions for the RNFA that are not listed in these rules shall be defined in standardized procedures. Approval by the Board is required prior to implementation of RNFA standardized procedures for all practice settings. (6) The RNFA shall not function as a scrub nurse concurrently with responsibility as a surgical assistant.	**ALA. ADMIN. CODE § 610-X-7-.04:** (1) The registered nurse may function as a surgical first assistant according to standardized procedures as defined in 610-X-6-.12. The registered nurse first assistant has the duty to verify that standardized procedures are in effect before performing the functions of a surgical first assistant. (2) Performing intraoperative functions as a RNFA is limited to the direct supervision of the attending surgeon physically present in the surgical suite where the case is being performed. (5) Standardized procedures for the RNFA shall include a statement of clinical privileges for additional technical functions that are permitted in a hospital.	APRNs follow RN requirements.

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Alaska	**ALASKA BOARD OF NURSING, SCOPE OF PRACTICE ADVISORY OPINIONS, REGISTERED NURSE** January 1992: A registered nurse may practice as a first assistant to a surgeon. The practice must be done in accordance with the Board's position statement "Registered Nurse and Advanced Nurse Practitioner Scopes of Practice" and the "AORN Official Statement on RN First Assistants." The surgeon must directly supervise the nurse. A nurse may not practice under standing orders or protocols that require the nurse to make medical judgments outside the nurse's scope of practice. August 1993: Approved the Association of Operating Room Nurses statement on RN as First Assistant as guidance to nurses on this issue.	**ALASKA BOARD OF NURSING, SCOPE OF PRACTICE ADVISORY OPINIONS, REGISTERED NURSE** Qualifications for RNFAs will be as recommended in the AORN RNFA position statement (based on the approval by the Alaska Board of Nursing in January 1992 and August 1993).* * Confirmed by email with Alaska Board of Nursing (Feb. 1, 2012).	APRNs follow RN requirements.
Arizona	**ARIZONA STATE BOARD OF NURSING, ADVISORY OPINION, REGISTERED NURSE FIRST ASSISTANT – RNFA, LAST REVISED MARCH 2011** It is within the scope of practice of a Registered Nurse who can demonstrate the necessary education, knowledge, judgment, certification, and skills, to practice as a RNFA, assisting the surgeon during surgical procedures. The RNFA is not authorized to independently perform a surgical procedure which is the primary purpose of a surgery, or to perform organ transplants.	**ARIZONA STATE BOARD OF NURSING, ADVISORY OPINION, REGISTERED NURSE FIRST ASSISTANT – RNFA, LAST REVISED MARCH 2011** II. Qualifications: The minimum qualifications to practice as an RNFA are: A. Certification as a Certified Nurse of the Operating Room (CNOR) B. Successful completion of an approved RNFA program that meets the Association of periOperative Registered Nurses (AORN, 2010) criteria	APRNs follow RN requirements.

	The Board of Nursing endorses the March 2010 AORN official statement on RNFAs.	C. Compliance with all statutes, regulations, and institutional policies related to the role of the RNFA (AORN, 2010).	
Arkansas	Arkansas' Nurse Practice Act and board of nursing regulations are silent on RNFAs. Inquires to the Board of Nursing regarding RNFA scope are referred to the board's Decision Making Model.* * Confirmed by email with Arkansas Board of Nursing (Feb. 1, 2012).	N/A	APRNs would also be referred to the Board's Decision Making Model.
California	**STATE OF CALIFORNIA, STATE AND CONSUMER SERVICES AGENCY, BOARD OF REGISTERED NURSING, NPR-B-18, THE RN AS FIRST ASSISTANT TO THE SURGEON, LAST REVISED 06/16/2011** The role of RN first assistant to the surgeon requires the performance of a combination of nursing and medical functions. The RN first assistant directly assists the surgeon by controlling bleeding, providing wound exposure, suturing and other surgical tasks. The RN first assistant may provide other advanced assistance, such as mobilization of tissue, patient positions and directing other surgical team members with specific individual tasks. The RN first assistant, practices perioperative nursing and must have acquired the necessary specific knowledge, skills and judgment. The RN first assistant practices under the supervision of the surgeon during the intraoperative phase of	**STATE OF CALIFORNIA, STATE AND CONSUMER SERVICES AGENCY, BOARD OF REGISTERED NURSING, NPR-B-18, THE RN AS FIRST ASSISTANT TO THE SURGEON, LAST REVISED 06/16/2011** Guidelines for Developing Standardized Procedures Standardized procedures are not subject to prior approval by the boards that regulate nursing and medicine, however, they must be developed according to the following guidelines which were jointly promulgated by the Board of Registered Nursing and the Medical Board of California… (a) Standardized procedures shall include a written description of the method used in developing and approving them and any revision thereof. (b) Each standardized procedure shall:	APRNs would also fall under the Board's *The RN as First Assistant to the Surgeon* statement.

	the perioperative experience. In order to perform those functions considered to be first assistant to the surgeon, the RN must adhere to standardized procedures. The RNFA may not perform the function of the scrub nurse while functioning as the RNFA. * This Advisory Opinion links to AORN's Standards for RN first assistant education programs.	1) Be in writing, dated and signed by the organized health care system personnel authorized to approve it, 2) Specify which standardized procedure functions registered nurses may perform and under what circumstances. 3) State any specific requirements which are to be followed by registered nurses in performing particular standardized procedure functions. 4) Specify any experience, training and/or education requirements for performance of standardized procedure functions. 5) Establish a method for initial and continuing evaluation of the competence of those registered nurses authorized to perform standardized procedure functions. 6) Provide for a method of maintaining a written record of those persons authorized to perform standardized procedure functions. 7) Specify the scope of supervision required for performance of standardized procedure functions, for example, telephone contact with a physician. 8) Set forth any specialized circumstances under which the registered nurse is to immediately communicate with a patient's physician concerning the patient's condition.	

		9) State the limitations on settings, if any, in which standardized procedure functions may be performed. 10) Specify patient record-keeping requirements. 11) Provide for a method of periodic review of the standardized procedures.	
Colorado	Colorado's Nurse Practice Act and board of nursing regulations are silent on RNFAs. Colorado's board of nursing provides statements to determine your scope of practice. In 2004, Colorado's Department of Regulatory Agencies Office of Policy, Research and Regulatory Reform released a report recommending that the General Assembly should not regulate the practice of surgical assistants. This report recognized that health professionals who perform the functions of surgical assistants include registered nurses, nurse practitioners, clinical nurse specialists, and certified registered nurse first assistants.	N/A	N/A
Connecticut	**DEPARTMENT OF HEALTH SERVICES, STATE OF CONNECTICUT, BUREAU OF HEALTH SYSTEM REGULATION, DIVISION OF MEDICAL QUALITY ASSURANCE, DECLARATORY RULING ON REGISTERED NURSES AS FIRST ASSISTANT IN THE OPERATING ROOM, NOVEMBER 7, 1988** …the Department adopts the standards espoused by the Association of Operating Room Nurses. *AORN Journal*, December 1980, Vol.32,	**DEPARTMENT OF HEALTH SERVICES, STATE OF CONNECTICUT, BUREAU OF HEALTH SYSTEM REGULATION, DIVISION OF MEDICAL QUALITY ASSURANCE, DECLARATORY RULING ON REGISTERED NURSES AS FIRST ASSISTANT IN THE OPERATING ROOM, NOVEMBER 7, 1988** Qualifications 1. Certification in perioperative nursing,	APRNs follow RN requirements.

	No. 6; September 1984, Vol. 40, No. 3; and May 1987, Vol. 45, No. 5 (Exhibit No. 11). Should the standards as espoused by the association of operating room nurses be modified by that association, this declaratory ruling should be read to incorporate the standards as so modified by that association. Scope of Practice Under the direct and constant supervision of the operating physician: 1. Tissue handling, 2. Providing exposure, 3. Using instruments, 4. Suturing, 5. Providing hemostasis.	2. Knowledge and skill in principles of asepsis and infection control, 3. Knowledge of anatomy, physiology and operative technique, 4. Ability to perform CPR.	
Delaware	**STATE OF DELAWARE, DEPARTMENT OF STATE, DIVISION OF PROFESSIONAL REGULATION, BOARD OF NURSING MEETING MINUTES, JANUARY 11, 2012** RN First Assistant Position Statement It is recommended that RNFAs follow the national standards from their professional organization AORN.	**STATE OF DELAWARE, DEPARTMENT OF STATE, DIVISION OF PROFESSIONAL REGULATION, BOARD OF NURSING MEETING MINUTES, JANUARY 11, 2012** RN First Assistant Position Statement It is recommended that RNFAs follow the national standards from their professional organization AORN.	APRNs follow RN requirements.
Florida	**FLA. STAT. § 464.027 – REGISTERED NURSE FIRST ASSISTANT** (4) INSTITUTIONAL POWERS. –Each health care institution must establish specific procedures for the appointment and reappointment of registered nurse first assistant staff members	**FLA. STAT. § 464.027 – REGISTERED NURSE FIRST ASSISTANT** (3) QUALIFICATIONS. –A registered nurse first assistant is any person who: (a) Is licensed as a registered nurse under this part; (b) Is certified in perioperative nursing; and	APRNs follow RN requirements.

	and for granting, renewing, and revising their clinical privileges.	(c) Holds a certificate from, and has successfully completed, a recognized program. (2) DEFINITIONS. –As used in this section, the term: (a) "Perioperative nursing" means a practice of nursing in which the nurse provides preoperative, intraoperative, and postoperative nursing care to surgical patients. (b) "Recognized program" means a program that: 1. Addresses all content of the Association of Operating Room Nurses, Inc. Core Curriculum for the Registered Nurse First Assistant, and 2. Includes 1 academic year, defined as 45 hours of didactic instruction and 120 hours of clinical internship or its equivalent of 2 college semesters.	
Georgia	Georgia's Nurse Practice Act and board of nursing regulations are silent on RNFAs. Georgia's board of nursing provides a RN Scope of Practice Decision Tree to assist Georgia RNs with scope of practice questions.	N/A	N/A
Hawaii	N/A	A registered nurse assisting in surgery must have the knowledge, skills, and competency to do the tasks required. HAW. REV. STAT. §457.2.* * Confirmed by email with Hawaii Board of Nursing (Feb. 13, 2012).	N/A

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Idaho	IDAHO ADMINISTRATIVE CODE, 23.01.01 – RULES OF THE IDAHO BOARD OF NURSING, § 23.01.01.401.02(b) b. Surgical First Assistants. A surgical first assistant is a licensed professional nurse who, under direct supervision, assists the operating surgeon. i. Nurses acting as surgical first assistants may not concurrently serve as scrub or instrument nurses. ii. A licensed professional nurse surgical first assistant in cardiovascular surgery may harvest saphenous veins after completing additional educational instruction acceptable to the Board and supervised practice under direct supervision of the operating physician.	IDAHO BOARD OF NURSING, FREQUENTLY ASKED QUESTIONS, 2005 – 2007 Question: Can a licensed advanced practice professional nurse function as a surgical first assistant? Response: Registered nurses, including licensed advanced practice professional nurses, may function as surgical first assistants if they meet conditions established in administrative rules of the Board. The nurse functioning as a surgical first assistant: • Must successfully complete specific education, training and supervised practice in an organized program of study and must demonstrate competence in the functions to be performed. • Must conform to recognized standards for practice of the surgical first assistant. • Must follow written protocols approved by medical staff, nursing administration and the employing agency. • May not concurrently serve as scrub or instrument nurse. • May harvest saphenous veins after completing additional education acceptable to the Board, including supervised practice under direct supervision of the operating physician.	APRNs follow RN requirements.
Illinois	Illinois' Nurse Practice Act and the Board of Nursing rules do not address RNFA scope of	N/A	N/A

	practice or qualifications. Language in the Hospital Licensing Act affirms that first assisting is within the RN scope of practice in Illinois: 210 ILCS 85/10.7(2) – A licensed physician, dentist or podiatrist may be assisted by a physician licensed to practice medicine in all its branches, dentist, dental assistant, podiatrist, licensed advanced practice nurse, licensed physician assistant, licensed registered nurse, licensed practical nurse, surgical assistant, surgical technician, or other individuals granted clinical privileges to assist in surgery at the hospital.		
Indiana	N/A	N/A	N/A
Iowa	**IOWA BOARD OF NURSING, REGISTERED NURSE FIRST ASSISTANTS, LAST REVISED 2006** RN first assistant behaviors in the perioperative arena may include: * preoperative patient management with other health care providers, including but not limited to, - performing preoperative evaluation focused nursing assessment, - communicating/collaborating with other health care providers regarding the patient plan of care, and - writing preoperative orders according to established protocols of the physician and/or facility	**IOWA BOARD OF NURSING, REGISTERED NURSE FIRST ASSISTANTS, LAST REVISED 2006** The education and development of the RN first assistant builds upon the educational preparation leading to licensure as an RN. The RN first assistant must then acquire the necessary knowledge, judgment and skills specific to the expanded role through a formal RN first assistant education program. The Iowa Board of Nursing has adopted the qualifications for entry into RNFA practice as defined by the Association of Operating Room Nurses (AORN).	APRNs follow RN requirements.

	* intraoperative surgical first-assisting, including but not limited to, - using instruments/medical devices, - providing exposure, - handling and/or cutting tissue, - suturing; and - harvesting veins * postoperative patient management with other health care providers in the immediate postoperative period and beyond, including but not limited to, - writing postoperative orders/operative notes according to established protocols of the physician and/or facility, - participating in postoperative rounds, and - assisting with discharge planning and identifying appropriate community resources as needed.	When education and clinical requirements have been met, the RNFA is encouraged to obtain and maintain certification (CRNFA).	
Kansas	N/A	Kansas Board of Nursing encourages certification but does not rule out on the job training.* * Confirmed by email with Kansas Board of Nursing (Feb. 7, 2012).	N/A
Kentucky	**KENTUCKY BOARD OF NURSING, ADVISORY OPINION STATEMENT #08, ROLE OF THE REGISTERED NURSE FIRST ASSISTANT, LAST REVISED 4/2007.** 1) It is within the scope of registered nursing practice for a registered nurse who possesses substantial, specialized knowledge and technical	**KENTUCKY BOARD OF NURSING, ADVISORY OPINION STATEMENT #08, ROLE OF THE REGISTERED NURSE FIRST ASSISTANT, LAST REVISED 4/2007.** 3) Registered nurses who perform first assistant acts should:	APRNs follow RN requirements.

	skill to act as an RN first assistant to the physician who is immediately available and onsite during surgical procedures. 2) In no event should the RN first assistant be expected to replace or assume the responsibilities of the physician performing the surgical procedure, but may accept appropriate responsibility if the physician becomes incapacitated by protecting the surgical wound, maintaining homeostasis, and maintaining sterility of the operative field until the replacement physician accepts responsibilities for procedure's completion. Further, it was the advisory opinion of the Board that handling and/or tissue cutting for performance of small skin lesion excision and punch biopsy are within the scope of registered nursing practice for the registered nurse who possesses substantial, specialized knowledge and current clinical competency in the performance of the procedures. The procedures should be performed under the supervision of a physician who is onsite and immediately available to the nurse.	A. Possess an in-depth knowledge of perioperative and intraoperative nursing practice; B. Be knowledgeable of the potential complications and adverse reactions and to take appropriate action as directed by the physician; C. Possess the knowledge and skill to recognize adverse reactions and to take appropriate action as directed by the physician; D. Perform acts which are in accordance with: 1) the established written agency policies and procedures, 2) the definition of "registered nursing practice" as stated in KRS 314.011(6), 3) evidence-based practice, and 4) the scope of practice of RN First Assistants as established by Association of Operating Room Nurses. 4) Registered nurses who perform first assistant acts should maintain documentation of their educational preparation that provides for clinical practice and demonstration of competency in the performance of such acts. The Board encourages certification via a national nursing organization and recognizes it as one mechanism for demonstrating knowledge and competency.	
Louisiana	**LOUISIANA STATE BOARD OF NURSING, DECLARATORY STATEMENT FOR REGISTERED NURSE FIRST ASSISTANTS, LAST REVISED 8/27/14** The APRN practicing as a first assistant in surgery functions in an expanded perioperative nursing role. Perioperative nursing is considered	**LOUISIANA STATE BOARD OF NURSING, DECLARATORY STATEMENT FOR REGISTERED NURSE FIRST ASSISTANTS, LAST REVISED 8/27/14** APRNs seeking to function as first assistants in surgery must meet the requirements and qualifications for practice as a Registered Nurse	APRNs must follow AORN requirements ***Exception to the requirement for completion of an RNFA educational

	a specialized area of practice for the APRN. The activities included in first assisting in surgery as an APRN are further refinements of perioperative nursing practice which are executed within the context of advanced practice nursing. The assistant in surgery collaborates with the surgeon to promote optimal patient outcomes and does not concurrently function as a scrub nurse or circulator. Intraoperative nursing behaviors are based on an extensive body of scientific knowledge. Additionally, intraoperative first assistant techniques include but are not limited to: -handling and/or cutting tissue; -providing surgical site exposure; -providing hemostasis. -using instruments or medical devices; -suturing; and -surgical wound management. These behaviors may vary depending on patient populations, practice environments, services provided, accessibility of human and fiscal resources, agency policy, and the Law Governing the Practice of Nursing.	First Assistant/RNFA as set forth by the Association of periOperative Registered Nurses/AORN including but not limited to: A. completion of an RNFA educational program that meets the "AORN Standards for RN First Assistant Education Programs": 1. "AORN Standards for RN First Assistant Education Programs" are programs that: a. are at a minimum equivalent to six (6) semester credit hours of formal, post-basic RN education; b. award college credits and degrees or certificates of completion upon satisfactory completion of all requirements; c. are associated with 1.) a college or university that is accredited by an institutional accrediting agency that is recognized by the US Department of Education; 2.) a nursing program (eg, school, college, department of nursing) that is accredited by a national nursing accrediting agency that is recognized by the US Department of Education, if eligible; and 3.) a nursing program that is approved/recognized/accredited by a state board of nursing; d. adheres to the current version of the "AORN Position Statement on RN First Assistants" and the "AORN Position	program that meets the "AORN Standards for RN First Assistant Education Programs" applies only to APRNs who are privileged and practicing as first assistants in surgery prior to August, 2014.

		Statement on the Perioperative Advanced Practice Nurse"; and e. incorporate all of the content in the current edition of the Core Curriculum for the RN First Assistant. B. maintenance of current licensure in Louisiana as an APRN; and E. demonstration of compliance with statutes, regulations, and institutional policies relevant to RNFAs.	
Maine	**MAINE STATE BOARD OF NURSING, QUESTIONS RELATED TO REGISTERED NURSE- FIRST ASSISTANT (RNFA)** The Board at its February 16 – 17, 1994 meeting reiterated its position with respect to RN First Assistants and percutaneous endoscopic gastrostomy. The RN First Assist may assist during surgery, but may NOT perform this procedure. The Board at its June 15 – 16, 1993 meeting determined that it is not within the scope of practice of RN First Assistants to (1) take histories and perform physical exams; (2) make patient rounds; and (3) write medical orders. The Board at its February 16 – 17, 1994 meeting clarified that the intent of the Board was to disallow the RN First Assistant in the O.R. from being utilized as a physician extender, i.e., performing the history and physical examination that is clearly the physician's responsibility.	**MAINE STATE BOARD OF NURSING, QUESTIONS RELATED TO REGISTERED NURSE- FIRST ASSISTANT (RNFA)** At its December, 1995 meeting, the Board adopted the Association of Operating Room Nurses (AORN) Recommended Education Standards for RN First Assistant Programs, and determined that an advanced practice registered nurse does not automatically qualify as a registered nurse first assistant in the operating room, but must meet the same requirements as set forth in AORN's recommended standards.	APRNs must meet AORN standards.
Maryland	N/A	N/A	N/A

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Massachusetts	**MASSACHUSETTS BOARD OF REGISTRATION IN NURSING, ADVISORY RULING ON NURSING PRACTICE, REGISTERED NURSES AS FIRST ASSISTANTS AT SURGERY, LAST REVISED JUNE 2014** The RN First Assistant (RNFA) is a Registered Nurse with specialized education and documented competency in perioperative nursing practice consistent with the RNFA Standards of Practice established by the Association of periOperative Registered Nurses (AORN) through successful completion of a post-basic nursing education program whose intent is the preparation of registered nurses to practice as first assistants at surgery. The RNFA scope of practice includes the: *Pre-operative phase, including but not limited to: •Perform focused preoperative assessments; •Provide patient and family education •Review and analyze patient data •Communicate with other health care providers about the patient's plan of care. * Intra-operative phase, including but not limited to: •Use instruments and medical devices •Perform surgical site exposure •Handle tissue •Cut tissue •Provide hemostasis •Suture, and Wound management.	**MASSACHUSETTS BOARD OF REGISTRATION IN NURSING, ADVISORY RULING ON NURSING PRACTICE, REGISTERED NURSES AS FIRST ASSISTANTS AT SURGERY, LAST REVISED JUNE 2014** Current Massachusetts registered nurse license in addition to documented competency in perioperative nursing practice is required. *Competencies include but are not limited to: •Knowledge of surgical anatomy, physiology, and pathophysiology •Knowledge of operative techniques related to the procedures in which the RNFA assists •Perform CPR •Perform effectively in stressful & emergency situations •Recognize safety hazards and initiate appropriate preventive and corrective action •Adhere to standard precautions and to principles of asepsis and infection control and would not place self, patient or others at risk for infectious disease transmission •Ensure documentation is complete, accurate and legible in all records required by federal and state law.	APRNs follow RN requirements.

	* Post-operative phase, including but not limited to: •Participate in or perform postoperative rounds (may include wound management, dressing changes, suture and/or drain removal, other type of catheter & IV removal and as ordered by the duly authorized prescriber) •Communicate with other health care providers about the patient's plan of care •Assist with or arrange discharge plan and identify appropriate community resources as needed.		
Michigan	N/A	Qualification and credentialing requirements for RNFAs will be determined by individual facilities.* * Confirmed by telephone with Michigan Board of Nursing (Feb. 8, 2012).	N/A
Minnesota	N/A	N/A	N/A
Mississippi	**MISSISSIPPI BOARD OF NURSING, POSITION STATEMENT, REGISTERED NURSE FIRST ASSISTANT (RNFA), 10/2/2009** The appropriately prepared registered nurse may function in the role of RNFA according to the position statement adopted by the Association of Peri-operative Registered Nurses (AORN). The title RNFA should only be used by persons prepared/educated according to	**MISSISSIPPI BOARD OF NURSING, POSITION STATEMENT, REGISTERED NURSE FIRST ASSISTANT (RNFA), 10/2/2009** The RNFA must have acquired the necessary knowledge, judgment, and skills specific to the expanded role of RNFA clinical practice. Advanced surgical assisting skills may be performed by the registered nurse who has been appropriately educated in the expanded	APRNs follow RN requirements.

	AORN's requirements for RNFAs and functioning in the capacity for which they were educated. The Board has determined two tasks, suturing and procurement of the saphenous vein, belong solely to the RNFA. Along with other operative nursing behaviors, the RNFA practices under the direct supervision of the surgeon and does not concurrently function as the scrub nurse. As additional education and experience are required to obtain the necessary technical skills and knowledge to function as the assistant to the surgeon during an operating, advanced surgical assisting skills are outside the scope of practice of the registered nurse. Such expanded perioperative nursing concepts and perioperative nursing behaviors using the nursing process as the basis for providing nursing care to patient experiencing surgical intervention may be assumed only by the RNFA.	role of first assisting and who has met the criteria for using the title RNFA in accordance with AORN requirements. Information regarding educational requirements and the RNFA role can be obtained from AORN, 2170 South Parker Road, Denver, Colorado 80231.	
Missouri	N/A	N/A	N/A
Montana	**MONTANA BOARD OF NURSING, DECLARATORY RULING: FIRST ASSISTANTS IN SURGERY, MAY 28, 1992** The role of an RN first assistant in preoperative preparation, intraoperative assistance and postoperative duties comes within the statute as administration of treatments authorized by physicians. An RN first assistant is specifically educate and trained for the role and acts under the direction of the surgeon. An institutional	**MONTANA BOARD OF NURSING, DECLARATORY RULING: FIRST ASSISTANTS IN SURGERY, MAY 28, 1992** The registered nurse is practicing within the scope of practice defined in section 37-8-102(3)(a), MCA, when performing as a first assistant in surgery under the following conditions: a. The nurse has the training, knowledge, skill and ability to perform this function in	APRNs follow RN requirements.

	policy should specify the qualifications and training necessary and the tasks which the RN is authorized to perform. The Association of Operating Room Nurses and other credentialing entities set standards for education and training.	accordance with the Association of Operating Room Nurses' standards or equivalent standards; b. The surgeon is in attendance providing direct supervision and is responsible for the patient; and c. The institution employing the RN as first assistant has a specific written policy regarding the circumstances in which registered professional nurses may perform as first assistants and specifying the qualifications and training necessary to perform as first assistants.	
Nebraska	**NEBRASKA BOARD OF NURSING, ADVISORY OPINION, RN FIRST ASSISTANTS, LAST REAFFIRMED 2000** The Nebraska Board of Nursing supports the AORN Official Statement on RN First Assistants. The board supports the Scope of Practice statement that includes the intraoperative nursing behaviors of a) handling tissue, b) providing exposure, c) using instruments, d) suturing, and e) providing hemostasis.	**NEBRASKA BOARD OF NURSING, ADVISORY OPINION, RN FIRST ASSISTANTS, LAST REAFFIRMED 2000** The board also encourages the Qualifications of the RN First Assistant statement and Preparation For the RN First Assistant statement as one method for attaining competency to practice in the RN First Assistant role.	APRNs follow RN requirements.
Nevada	**NEV. ADMIN. CODE § 632.216(2)(a)** (2) A registered nurse may perform: (a) The duties of a circulating nurse or surgical first assistant in an operating room. **NEVADA STATE BOARD OF NURSING, PRACTICE DECISION, VEIN HARVESTING, LAST REVISED 3/16/05**	Qualification and credentialing requirements for RNFAs will be determined by individual facilities.* * Confirmed by email with Nevada Board of Nursing (Feb. 10, 2012). **NEVADA STATE BOARD OF NURSING, PRACTICE DECISION, VEIN HARVESTING, LAST REVISED 3/16/05**	APRNs follow RN requirements.

	If the RN is a Registered Nurse First Assistant, prepare/harvest a saphenous vein for coronary artery bypass grafting. This procedure is within the scope of nursing for a Registered Nurse First Assistant (RNFA) and a Certified Nurse First Assistant (CRNFA) provided the following guidelines are followed. (The nurse in the following text refers to either the RNFA or the CRNFA): 1. The nurse must have successfully completed an RN First Assistant program that meets the Association of Operating Room Nurse (AORN) Education Standards for RN First Assistant Programs and a clinical preceptorship devoted to the application of knowledge and clinical skills associated with the process of harvesting a coronary conduit/saphenous vein. The nurse must maintain documentation of competency and maintain current CNOR certification. 2. The nurse will use surgical instruments to perform dissection or manipulate tissue as directed by the surgeon to accomplish preparation/harvest of a saphenous vein. 3. As part of informed consent, the patient or responsible party is informed that a nurse will be performing the procedure. 4. The nurse is competent to perform the procedure and has the documented and demonstrated knowledge, skill, and ability to perform the procedure pursuant to NAC 632.071, 632.224, and 632.225. 5. There are agency policies and procedures, a provision for privileging, and any required	If the RN is a Registered Nurse First Assistant, prepare/harvest a saphenous vein for coronary artery bypass grafting. This procedure is within the scope of nursing for a Registered Nurse First Assistant (RNFA) and a Certified Nurse First Assistant (CRNFA) provided the following guidelines are followed. (The nurse in the following text refers to either the RNFA or the CRNFA): 1. The nurse must have successfully completed an RN First Assistant program that meets the Association of Operating Room Nurse (AORN) Education Standards for RN First Assistant Programs and a clinical preceptorship devoted to the application of knowledge and clinical skills associated with the process of harvesting a coronary conduit/saphenous vein. The nurse must maintain documentation of competency and maintain current CNOR certification. 2. The nurse will use surgical instruments to perform dissection or manipulate tissue as directed by the surgeon to accomplish preparation/harvest of a saphenous vein. 3. As part of informed consent, the patient or responsible party is informed that a nurse will be performing the procedure. 4. The nurse is competent to perform the procedure and has the documented and demonstrated knowledge, skill, and ability to perform the procedure pursuant to NAC 632.071, 632.224, and 632.225. 5. There are agency policies and procedures, a provision for privileging, and any required	

	protocols in place for the nurse to perform the procedure. 6. The nurse maintains accountability and responsibility for nursing care related to post-operative follow up for the procedure and follows the accepted standard of care which would be provided by a reasonable and prudent nurse. 7. The procedure is performed interdependently by the surgeon and the nurse. The surgeon must be in attendance while the nurse performs this procedure.	protocols in place for the nurse to perform the procedure. 6. The nurse maintains accountability and responsibility for nursing care related to post-operative follow up for the procedure and follows the accepted standard of care which would be provided by a reasonable and prudent nurse. 7. The procedure is performed interdependently by the surgeon and the nurse. The surgeon must be in attendance while the nurse performs this procedure.	
New Hampshire	**NEW HAMPSHIRE BOARD OF NURSING, RN FIRST ASSIST ROLE (RNFA)** The RNFA is a licensed RN who has acquired the necessary qualifications including the knowledge, skills and judgment necessary to serve in this capacity. The RNFA practices in collaboration with, and as directed by the surgeon during the intraoperative phase of the perioperative experience. The decision by a RN to practice as an RNFA must be voluntary and deliberated with an understanding of the professional accountability the role entails. The intraoperative nursing behaviors of the RNFA may include: • Handling tissue, • Providing exposure, • Using instruments, • Suturing, and	**NEW HAMPSHIRE BOARD OF NURSING, RN FIRST ASSIST ROLE (RNFA)** What are the Qualifications of the RN First Assistant? * Current licensure as a registered nurse in New Hampshire * Successful completion of a post basic nursing education program whose intent is the preparation of registered nurses to practice as first assistants at surgery * Documentation of proficiency in perioperative nursing practice as both a scrub and circulating nurse * Ability to apply principles of asepsis and infection control; * Knowledge of surgical anatomy, physiology, pathophysiology, and operative technique related to the operative procedures in which the RN assists	APRNs follow RN requirements.

	• Providing hemostasis. An RNFA should not concurrently function as a scrub nurse.	* Ability to perform cardiopulmonary resuscitation * Ability to perform effectively in stressful and emergency situations * Ability to recognize safety hazards and initiate appropriate preventive and corrective action * Ability to perform effectively and harmoniously as a member of the operative team * Ability to demonstrate skill in behaviors unique to the RNFA The RNFA scope of practice is a further refinement of perioperative nursing practice and is included within the nursing practice governed by the RN licensure. Additional credentialing establishing the RN's qualifications, competency and proficiency should be done by the institution or agency granting this clinical privilege to the RNFA. There are educational programs to prepare experienced RNs who have achieved proficiency in the O.R. Formal RNFA education is provided in many colleges throughout the country which involves the equivalent of one academic year of both classroom and supervised clinical education with oversight by a surgeon preceptor. For additional information regarding this nursing specialty, contact AORN.	
New Jersey	New Jersey's Nurse Practice Act and board of nursing regulations are silent on RNFAs. New Jersey's board of nursing provides a RN Scope of	N/A	N/A

	Practice Decision-Making Model to assist New Jersey RNs with scope of practice questions. In addition, New Jersey recognizes the role of the RNFA in its Board of Medical Examiners regulations: **N.J. ADMIN. CODE § 13:35-4.1(c) MAJOR SURGERY; QUALIFIED FIRST ASSISTANT** (c) In addition to those individuals listed in (b) above who may act as qualified first assistants, in a health care facility licensed by the Department of Health and Senior Services, a duly qualified registered nurse first assistant (RNFA), a duly qualified physician assistant or a licensed podiatric physician may so act.		
New Mexico	New Mexico's Nurse Practice Act and board of nursing regulations are silent on RNFAs. RNFA practice would fall under the board of nursing's standards of nursing practice.* **N.M. ADMIN. CODE § 16.12.2.12(H)** H. Standards for professional registered nursing practice. Registered nurses practice in accordance with the definition of professional registered nursing in the NPA. [61-3-3, J. NMSA 1978]. (1) RNs may assume specific functions and perform specific procedures which are beyond	**N.M. ADMIN. CODE § 16.12.2.12(H)** H. (2) When assuming specific functions and performing specific procedures, which are beyond the nurse's basic educational preparation, the RN is responsible for obtaining the appropriate knowledge, skills and supervision to assure he/she can perform the function/procedure safely and competently.	N/A

	basic nursing preparation for professional registered nursing [61-3-3, J. NMSA 1978] provided the knowledge and skills required to perform the function and procedures emanates from a recognized body of knowledge and practice of nursing, and the function or procedure is not prohibited by any law or statute. * Confirmed with the New Mexico Board of Nursing by telephone (Feb. 28, 2012)		
New York	**NEW YORK STATE EDUCATION DEPARTMENT, OFFICE OF THE PROFESSIONS, NURSING GUIDE TO PRACTICE, LAST REVISED 4/09** 36. Can a Nurse Practitioner also practice as a Registered Nurse First Assistant (RNFA)? It is within the scope of practice of any registered professional nurse (RN), including a Nurse Practitioner (NP), to function as a first assistant in surgery following completion of additional education and training that meets the Association of Operating Room Nurses' Recommended Education Standards for RN First Assistant programs. RN First Assistants in the Operating Room are credentialed by the education community and must establish privileges to First Assist from the Medical Staff Office credentialing/privileging department of each facility in which they intend to practice. Since surgery is not part of the scope of practice	**NEW YORK STATE EDUCATION DEPARTMENT, OFFICE OF THE PROFESSIONS, NURSING GUIDE TO PRACTICE, LAST REVISED 4/09** 36. Can a Nurse Practitioner also practice as a Registered Nurse First Assistant (RNFA)? It is within the scope of practice of any registered professional nurse (RN), including a Nurse Practitioner (NP), to function as a first assistant in surgery following completion of additional education and training that meets the Association of Operating Room Nurses' Recommended Education Standards for RN First Assistant programs. RN First Assistants in the Operating Room are credentialed by the education community and must establish privileges to First Assist from the Medical Staff Office credentialing/privileging department of each facility in which they intend to practice. Since surgery is not part of the scope of practice	APRNs follow RN requirements.

	of the NP role, NPs must clearly differentiate between RNFA duties and NP practice.	of the NP role, NPs must clearly differentiate between RNFA duties and NP practice.	
North Carolina	**NORTH CAROLINA BOARD OF NURSING, PRACTICE FREQUENTLY ASKED QUESTIONS** 16. Is the Surgical First Assist role within the scope of practice of licensed nurses in North Carolina? The Surgical First Assist role is within the scope of practice for the Registered Nurse in NC and is commonly titled Registered Nurse First Assistant (RNFA). Performance of first assistant activities in the perioperative arena, consistent with agency policy, procedures, and client informed consent, includes but is not limited to preoperative interview for a comprehensive health history, completion of a nursing physical assessment, wound exposure, retraction, hemostasis, tissue handling, dissection, harvesting veins, suturing, stapling, participating in post-op rounds, and discharge teaching.	**NORTH CAROLINA BOARD OF NURSING, PRACTICE FREQUENTLY ASKED QUESTIONS** Prior to the RNFA performing these activities, the RN must receive formal education or training in the activities; demonstrate competency in the activities; and the responsible RN manager or administrator must validate competency (this can be direct validation or the assurance that a validation process is in place and is effective). Note: Resources available to RNs and employers considering establishing the RNFA role include the Association of Operating Room Nurses (AORN) position statement on specific qualifications, educational preparation, and certification of the RNFA.	APRNs follow RN requirements.
North Dakota	N/A	N/A	N/A
Ohio	Ohio's Nurse Practice Act and board of nursing regulations are silent on RNFAs. Ohio's board of nursing uses a Decision Making Model to assist Ohio RNs with scope of practice questions.	**OHIO ADMIN. CODE § 4723-4-03** (D) A registered nurse may provide nursing care which is beyond basic nursing preparation for a registered nurse, provided:	APRNs follow RN requirements.

		1) The nurse obtains education which emanates from a recognized body of knowledge relative to the nursing care provided; 2) The nurse demonstrates knowledge, skills and abilities necessary to provide the nursing care; 3) The nurse maintains documentation satisfactory to the board of meeting the requirements set forth in paragraphs (D)(1) and (D)(2) of this rule; (4) When the nursing care to be provided is in accordance with (B)(5) of section 4723.01 of the Revised Code, the nurse has a specific current order from an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice; and (5) The nursing care does not involve a function or procedure which is prohibited by any other law or rule.* * Confirmed applicability to RNFA practice by email with Ohio Board of Nursing (Feb. 08, 2012).	
Oklahoma	**OKLAHOMA BOARD OF NURSING, SECOND AMENDED DECLARATORY RULING, MAY 23, 2006 (PERTAINING TO THE PERFORMANCE BY A REGISTERED NURSE OF THE DUTIES OF A REGISTERED NURSE FIRST ASSISTANT)** The role and scope of responsibilities of the Registered Nurse to perform the duties of the Registered Nurse First Assistant shall be in compliance with the AORN Official Statement on RN First Assistants as established by the	**OKLAHOMA BOARD OF NURSING, SECOND AMENDED DECLARATORY RULING, MAY 23, 2006 (PERTAINING TO THE PERFORMANCE BY A REGISTERED NURSE OF THE DUTIES OF A REGISTERED NURSE FIRST ASSISTANT)** The role and scope of responsibilities of the Registered Nurse to perform the duties of the Registered Nurse First Assistant shall be in compliance with the AORN Official Statement on RN First Assistants as established by the	APRNs follow RN requirements.

	Association of periOperative Registered Nurses ("AORN"), Inc., and shall meet AORN *Standards for RN First Assistant Education Programs*. The performance of the duties of a Registered Nurse First Assistant must be under the supervision and in the physical presence of the supervising physician.	Association of periOperative Registered Nurses ("AORN"), Inc., and shall meet AORN *Standards for RN First Assistant Education Programs*. The Registered Nurse First Assistant's responsibility is an additional function of the Registered Nurse which requires documented didactic and clinical education and training.	
Oregon	**OREGON STATE BOARD OF NURSING, POLICY STATEMENT, REGISTERED NURSES AS FIRST ASSISTANTS IN SURGERY, LAST REAFFIRMED 2/99** The Oregon State Board of Nursing acknowledges that it is within the role and the scope of practice for a registered nurse to perform the duties of first assistant in surgery. A registered nurse who functions as a first assistant to a surgeon during surgical procedures, must be under the continuous, direct and on site supervision of the physician performing the surgical procedure. The registered nurse first assistant shall not be expected to replace or assume the responsibilities of the physician performing the surgical procedure. In the role of first assistant, the registered nurse may perform such functions as handling tissue, providing exposure using instruments, suturing, providing hemostasis, applying clamps, tying knots, suturing skin and subcutaneous tissue.	**OREGON STATE BOARD OF NURSING, POLICY STATEMENT, REGISTERED NURSES AS FIRST ASSISTANTS IN SURGERY, LAST REAFFIRMED 2/99** The registered nurse, before offering his/her services as a first assistant, must have demonstrated competency through specialized preparation and experience to function in this role. It is the Board's belief that the specialized preparation should include completion of a formal education or training program which includes both theory related to the first assistant role, as well as supervised clinical experience in the first assistant role. Prior to pursing the specialized preparation for the role of the first assistant at surgery, the Board recommends that the registered nurse have demonstrated proficiency in the roles of the scrub and circulating nurse. A registered nurse who functions as a first assistant must:	APRNs follow RN requirements.

	While in the role of first assistant, the registered nurse may not concurrently serve as a scrub or circulating nurse.	1) Understand and be able to apply the principles of asepsis and infection control; 2) Be able to perform cardiopulmonary resuscitation; 3) Be knowledgeable of the surgical anatomy and the operative techniques associated with procedures for which the Registered Nurse agrees to be the first assistant to the surgeon; 4) Recognize safety hazards in the operating room and be able to initiate the appropriate corrective action; 5) Understand and be able to function as a member of the operating room team; and 6) Be able to demonstrate competency in the technical skills required of the first assistant to the surgeon. The Board further recommends that the setting in which the registered nurse functions as first assistant in surgery have clear written policies and procedures regarding the utilization of registered nurses as first assistants, a process to ensure competency for the role and an annual review of performance of the registered nurse in the role as first assistant in surgery.	
Pennsylvania	N/A	N/A	N/A
Rhode Island	N/A	N/A	N/A
South Carolina	**SOUTH CAROLINA BOARD OF NURSING, ADVISORY OPINION #13, LAST REVISED MARCH 2011**	**SOUTH CAROLINA BOARD OF NURSING, ADVISORY OPINION #13, LAST REVISED MARCH 2011**	APRNs follow RN requirements.

	The Board of Nursing for South Carolina acknowledges that it is within the scope of responsibilities of the RN to perform the duties of the Registered Nurse First Assistant (RNFA) as described in the 2006 Association of Perioperative Registered Nurses (AORN) Official Statement on Registered Nurse First Assistants, and as the "expanded role" is defined in the Laws Governing Nursing in South Carolina, Chapter 33, Section 40-33-20. The RNFA practices in collaboration with the health team and at the direction of the surgeon during the intraoperative phase of the perioperative experience.	The Board recognizes this responsibility is an additional act of the RN requiring specialized continued education and training beyond generic nursing school. The Board recommends that the nursing department develop written policies, procedures, and standing orders in accordance with the 2006 AORN Official Statement on Registered Nurse First Assistants.	
South Dakota	**SOUTH DAKOTA BOARD OF NURSING, REGISTERED NURSE FIRST ASSISTANTS IN THE OPERATING ROOM – ADVISORY OPINION** The South Dakota Board of Nursing acknowledges that the role of the Registered Nurse First Assistant in the Operating Room may be within the scope of practice of the registered nurse, with additional training, continued competence, and supervision by a physician.	**SOUTH DAKOTA BOARD OF NURSING, REGISTERED NURSE FIRST ASSISTANTS IN THE OPERATING ROOM – ADVISORY OPINION** The South Dakota Board of Nursing acknowledges that the role of the Registered Nurse First Assistant in the Operating Room may be within the scope of practice of the registered nurse, with additional training, continued competence, and supervision by a physician.	APRNs follow RN requirements.
Tennessee	**TENNESSEE BOARD OF NURSING POSITION STATEMENT RE PRACTICE: SURGICAL FIRST ASSISTANT RN, LAST REAFFIRMED 02/12** The Tennessee Board of Nursing believes the RN surgical first assistant is a category in which the RN functions in a role that is an extension of an	**RULES OF THE TENNESSEE BOARD OF NURSING CHAPTER 1000-01 RULES AND REGULATIONS OF REGISTERED NURSES** To be issued a certificate as a registered nurse first assistant with privileges to hold oneself out as a registered nurse first assistant or use the	N/A

	M.D. surgeon or dentist and that the RN first assistant is performing a delegated medical function during surgical procedures. It is therefore incumbent upon each health care agency to develop administrative, medical, nursing and legal guidelines under which the RN first assistant functions.	abbreviation RNFA, the applicant must meet all of the following requirements: (1) A current, unencumbered license as a registered nurse under T.C.A. Title 63, Chapter 7, or current unencumbered licensure as a registered nurse with the multistate licensure privilege to practice in Tennessee; (2) A current certification in perioperative nursing; SS-7039 (November 2014) 3 RDA 1693 (3) Successful completion of a registered nurse first assistant education program that meets the education standard of the Association of Perioperative Registered Nurses for a registered nurse first assistant; (4) Payment of the applicable fee; (5) Completion of the appropriate application signed under penalty of perjury.	
Texas	**22 TEXAS ADMIN. CODE § 217.18 ASSISTING AT SURGERY** (a) Nurse First Assistants. (2) When collaborating with other health care providers, the RNFA shall be accountable for knowledge of the statutes and rules relating to RNFAs and function within the scope of the registered nurse. Advanced practice nurses functioning as first assistants under the authority of (a)(1)(C)(ii) of this subsection shall function within the scope of the advanced role and specialty for which they hold authorization to practice from the board.	**22 TEXAS ADMIN. CODE § 217.18 ASSISTING AT SURGERY** (a) Nurse First Assistants. (1) A registered nurse who wishes to function as a first assistant (RNFA) in surgery shall meet the following requirements: (A) Current licensure as a registered nurse in the State of Texas or a current, valid registered nurse license with a multi-state privilege in a party state; (B) Completion of a nurse first assistant educational program approved or recognized by an organization recognized by the Board; and (C) Is either: (i) currently certified in perioperative nursing by an organization recognized by the board (CNOR certification in perioperative nursing); or	APRNs must meet APRN standards.

		(ii) currently recognized by the board as an advanced practice nurse and qualified by education, training, or experience to perform the tasks involved in perioperative nursing. (3) A registered nurse (including an advanced practice nurse) functioning as a first assistant in surgery shall comply with the standards set forth by AORN.	
Utah	N/A	N/A	N/A
Vermont	**VERMONT STATE BOARD OF NURSING, THE ROLE OF THE REGISTERED NURSE AS FIRST ASSISTANT, POSITION STATEMENT, LAST REVISED MAY 2012** Perioperative nursing includes the role of RN First Assistant. First assisting is an intraoperative skill as well as a delegated medical function. The first assistant must be able to assess, plan, implement, and evaluate patient care, as well as, perform specific intra-operative skills such as: • Using instruments and medical devices • Providing surgical site exposure • Handling and/or cutting tissue • Providing hemostasis • Suturing	**VERMONT STATE BOARD OF NURSING, THE ROLE OF THE REGISTERED NURSE AS FIRST ASSISTANT, POSITION STATEMENT, LAST REVISED MAY 2012** The role of the RN First Assistant is within the scope of practice of the RN provided: 1. The RN has obtained certification in perioperative nursing (Certified Nurse Operating Room (CNOR)), 2. The RN has successfully completed an RNFA program that meets the "AORN standards for RNFA education programs", 3. The RN has demonstrated adequate knowledge and skill in performing the role, 4. The RN has demonstrated continuing competency in performing the role, 5. The agency/facility has established policies and procedures regarding the role of first assistant, and	APRNs follow RN requirements.

		6. Guidelines for emergency situations are well established. In addition, the Board recommends that all education and training including evidence of initial and continuing competence by documented in the nurse's personnel file and other criteria be so noted in institutional files or policy manuals.	
Virginia	**VIRGINIA BOARD OF NURSING, GUIDANCE DOCUMENT #90-1, RN/LPN AS FIRST ASSISTANTS IN SURGERY, LAST REVISED NOVEMBER 18, 2003** Registered Nurses may serve as first assistant in surgery in cases compatible with their preparation and experience.	**VIRGINIA BOARD OF NURSING, GUIDANCE DOCUMENT #90-1, RN/LPN AS FIRST ASSISTANTS IN SURGERY, LAST REVISED NOVEMBER 18, 2003** The medical staff, hospital administration and nursing service department of any hospital that permits registered nurses to serve as first assistant in surgery shall have mutually agreed upon written policies under which the registered nurse may safety act as a first assistant. The policies should include qualifications of nurses who may act in this capacity, the types of surgical procedures in which they may act in this capacity, and the prohibitions. The safety and welfare of parties must be given primary consideration in the development of such policies.	APRNs follow RN requirements.
Washington	**WASHINGTON STATE DEPARTMENT OF HEALTH, NURSING CARE QUALITY ASSURANCE COMMISSION, RNFA: REGISTERED NURSE FIRST ASSISTANT AT SURGERY, SEPTEMBER 2013**	**WASHINGTON STATE DEPARTMENT OF HEALTH, NURSING CARE QUALITY ASSURANCE COMMISSION, RNFA: REGISTERED NURSE FIRST ASSISTANT AT SURGERY, SEPTEMBER 2013**	APRNs can function up to their full scope of practice in an RNFA role within their certification.

	It is within the scope of practice of a Registered Nurse (RN), who can demonstrate the necessary competency, to practice as a registered nurse first assistant (RNFA). Practice standards prohibit the RNFA from concurrently functioning as a scrub nurse. The RNFA functions include preoperative patient management in collaboration with other health care providers, intraoperative performance of surgical first assistant techniques, and postoperative patient management in collaboration with other health care providers. Technical skills may include handling tissue, providing exposure, using instruments, applying clamps, harvesting veins, dissecting, providing hemostasis, securing drains, tying knots, suturing skin and tissue associated with the surgical procedures being performed. The RNFA may need to perform cardiopulmonary resuscitation and advanced cardiac life support (adult, pediatric, neonatal depending on patient population) to stabilize the patient if the primary surgeon becomes incapacitated.	While not required by law or rule, the Nursing Commission advises certification in perioperative nursing (CNOR) and successful completion of an RNFA program that meets the Association of periOperative Registered Nurses AORN standards for RNFAs. The Commission recommends the facility in which the RNFA practices establish a process to grant clinical privileges to the RNFA.	
West Virginia	West Virginia's Nurse Practice Act and board of nursing regulations are silent on RNFAs. West Virginia's board of nursing provides Criteria for Determining Scope of Practice for Licensed Nurses to assist West Virginia RNs with scope of practice questions.	N/A	N/A

RNFA Scope and Qualifications to Practice
Last update: April 2015

Wisconsin	Wisconsin's Nurse Practice Act and board of nursing regulations are silent on RNFAs. Wisconsin offers a Decision Tree to assist Wisconsin nurses with scope of practice questions.	N/A	N/A
Wyoming	Wyoming's Nurse Practice Act and board of nursing regulations are silent on RNFAs. Wyoming offers a Decision Tree to assist Wyoming nurses with scope of practice questions. In addition, national professional nursing organizations should be consulted for guidelines.	N/A	APRNs follow RN requirements.* * Confirmed with Wyoming Board of Nursing by email (Feb. 13, 2012)

** In states that address RN scope of practice and/or qualifications for RNFAs, but do not separately address APRNs practicing as RNFAs, we concluded that APRNs would need to meet the RN requirements in the state. We did not review, and this chart does not address, APRN/RNFA scope or qualifications for certified nurse midwives (who may have different scope and qualifications requirements for basic midwifery practice and assisting in obstetrical and/or gynecological procedures).