RESPONSE TO SERMCHIEF V. GONZALES CASE

On November 22, 1983, the Supreme Court of Missouri decided the case of Sermchief v. Gonzales, which involved the scope of professional nursing in the State of Missouri. The primary question which the court decided was whether the conduct of two registered professional nurses was within the scope of professional nursing as defined by the Missouri Nursing Practice Act. The State Board of Nursing participated in this case by submitting a "friend of the court" brief.

The Board believes that it is appropriate to respond to the Court's decision in Sermchief v. Gonzales by indicating the Board's current position with regard to the role of nurses under the Missouri Nursing Practice Act and the Sermchief v. Gonzales decision.

In its decision, the Court stated:

Under Section 335.016.8 RSMo, later amended to Section 335.016(15) RSMo, a nurse may be permitted to assume responsibilities heretofore not considered to be within the field of professional nursing so long as those responsibilities are consistent with her or his "specialized education, judgment and skill based on knowledge and application of principles derived from the biological, physical, social and nursing sciences"

The Board views its statement of January, 1982, as consistent with the Court's decision. The statement was:

"The Board received many requests from nurses asking if certain procedures are considered "legal" within the framework of the Nursing Practice Act. The Nursing Practice Act definition of professional nursing was purposely written broadly to allow flexibility in nursing practice. It was neither the intention of the authors nor of the Board of Nursing to produce a "laundry list" of procedures that would limit the scope of nursing practice. The Board takes the position that the dimensions of an individual nurse's practice should be based upon the nurse's education, knowledge, competence, interest and in consultation with nursing organizations. Practice decisions of the individual nurse shall be made in order to provide safe health services for the consumer."

In addition to the above statement regarding professional nursing, the Board recognizes that the practice of practical nursing requires substantial education, specialized skill, judgment and knowledge. The Licensed Practical Nurse, under the direction of a person licensed by a state regulatory board to prescribe medications and treatments or under the direction of a Registered Professional Nurse, must also recognize their limits of personal knowledge and skill.

The legal limit of an individual nurse's practice is defined by the nurse's education, knowledge and competence. An individual who is licensed as a nurse may legally practice within his/her full range of nursing regardless of whether or not the individual uses other titles which are indicative of the individual's advanced education, knowledge or experience.

The Board also believes that its previous statement regarding the responsibility of the individual nurse is consistent with the following statement of the Court:

The broadening of the field of practice of the nursing profession authorized by the legislature and here recognized by the Court carries with it the profession's responsibility for continuing high educational standards and the individual nurse's responsibility to conduct her or himself in a professional manner. The hallmark of the professional is knowing the limits of one's personal knowledge. The nurse, either upon reaching the limit of her or his knowledge or upon reaching the limits prescribed for the nurse by the physician's standing orders and protocols should refer the patient to the physician.

Although the Court's decision dealt with only a specific set of facts and application of those facts to the Missouri Nursing Practice Act, the Board believes that the Court's interpretation of the Missouri Nursing Practice Act applies to the practice of all registered professional nurses in this state. The Court's recognition of the expanding role of the nurse in the delivery of health services should benefit not only the two nurses who initiated this case, but all nurses who practice in Missouri and the consumers of such health care.

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