



Clinic Tips

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“CERTIFICATION” IN PROVIDING SONOGRAMS DOES NOT EQUATE TO “COMPETENCY”

Many Pregnancy Resource Medical Clinics (PRMCs) seem unsure about the meaning of the word “certification” with regard to the legal ability of their nurses to perform sonograms. NIFLA is frequently asked whether or not our course – *Institute in Limited Obstetrical Ultrasound* – will “certify” a nurse to perform sonograms.

Generally, when someone thinks of “certification” they are thinking of a service like CPR certification, which is provided by the American Heart Association or some other non-profit organization, according to recognized national standards. Such a “certification” is needed every two years for healthcare professionals. However, such a “certification” does not exist for performing sonograms, a complicated medical procedure that carries with it serious risks of medical malpractice.

Many PRMCs believe “certification” to be the *legal* ability of a nurse or other healthcare provider to perform sonograms. In their view, one must be “certified” to legally perform sonograms and thus, “certification” is sought. Both Directors and Nurses have indicated to NIFLA that they understand “certification” to be a national standard providing them

with legal protection. They also report that they believe nurses must be “recertified” in Sonography yearly.

NIFLA is concerned that such misunderstandings; believing that “certification” is the key to legally and safely providing sonograms, may lead to a false sense of security. This thinking reflects a misunderstanding of the legal requirements that exist for sonograms to be performed and shows confusion between the concepts of “certification” and “competency.”

THE SCOPE OF PRACTICE UNDER A HEALTHCARE LICENSE DETERMINES “CERTIFICATION”

Simply put, to be *legally* able to perform a sonogram, and thus be “certified” to do so, one’s professional healthcare license must allow for such a practice. It is the professional license of an RN, MD, DO, NP, PA etc. that determines the scope of practice within their state. Thus, Registered Nurses and other healthcare providers can legally perform sonograms – and are legally “certified” to do so – because their license allows for such a practice. No other “certification” is necessary for such a healthcare professional to *legally* perform sonograms. **(Note: Most states do not**

require a license for Registered Diagnostic Medical Sonographers (RDMS). Such professionals have an earned their “credentials” through a course of study and by passing difficult exams that place them on the registry as an RDMS in a specialty area, such as OB.)

However, even when one is “certified” to perform sonograms through their license, they must also be “competent” to do so or serious medical malpractice issues surface. A license to perform sonograms for a healthcare professional does not guarantee that such a professional is *competent* to do so.

COMPETENCY IS DETERMINED BY THE MEDICAL DIRECTOR OF THE PRMC

It is the medical director of a PRMC, a licensed physician, who determines whether or not a nurse or other healthcare professional is *competent* to perform sonograms. Additionally, no medical professional should ever provide services, such as sonograms, for which they are not both educated and have hands-on training. Such a practice would be unethical and against the scope of practice of a medical professional.

As an example, the Oregon Nurse Practice Act states in its standards related to the licensed nurse's responsibilities for ethics -- including professional accountability and *competence* -- that a licensed nurse:

- Has knowledge of the statutes and regulations governing nursing, and practices within the legal boundaries of licensed nursing practice;
- Accepts responsibility for individual nursing actions and **maintains competence** in one's area of practice;
- Obtains instruction and supervision as necessary when implementing nursing practices;
- Accepts only nursing assignments for which one is **educationally prepared** and has the current knowledge, skills and ability to safely perform;
- **Maintains documentation of the method by which competency** was gained, and evidence that it has been maintained.

Note that these standards of practice do not mention "certification" but rather speak about "competency." These standards also reflect national legal standards for medical professionals and specifically nurses. All PRMC nurses and other healthcare professionals providing medical services under the supervision of the medical director must be aware of their state's nurse practice act and professional standards of accountability.

DIDACTIC TRAINING IS THE FIRST STEP TO OBTAINING COMPETENCY

The key to *competence* in providing sonograms is the

initial didactic education in sonography that is supplied by NIFLA's Institute in Limited Obstetrical Ultrasound. This course conforms to didactic content for nurses performing limited OB ultrasounds outlined by the Association of Women's Health, Obstetric, and Neonatal Nurses (AWHONN). AWHONN is the only nationally recognized non-profit organization that recognizes RNs providing sonograms. Therefore, this Guide is critical to nurses as they practice in an expanded role by providing sonograms. This is why we urge all medical professionals to attend the NIFLA course. NIFLA pioneered the medical clinic model for PRCs and has offered the course since 1999. More than 2,000 medical professionals and PRMC staff have been trained at this course in the basic legal and medical "how to's" of providing sonograms.

When medical professionals attend the NIFLA course, they are given a "certificate" of completion; stating the continuing education contact hours from the CA Board of Registered Nursing. This does not in any way imply competency, only that the necessary didactic education has been obtained.

HANDS-ON TRAINING MUST FOLLOW DIDACTIC TRAINING TO OBTAIN COMPETENCY

The AWHONN Guide further states, "Didactic instruction should be followed by sufficient, direct clinical supervision to obtain **competency**. The length and amount of hands-on training may vary with the individual nurse and the practice setting." Observe again that the key word for safely scanning is obtaining

competency, there is no mention of certification.

There are no recognized national standards for "recertification" in sonography. However, it is wise that after initial training and documented competency, a follow-up skills assessment be made by an RDMS (OB) or physician trained in sonography after the first year of scanning. And it would be prudent that further skill assessments be made and documented every two years thereafter.

PHYSICIAN REVIEW OF IMAGES IS CRITICAL TO FURTHER ASSURE COMPETENCY

The physicians who will read and sign off on sonograms performed by a PRMC nurse should provide critical and constructive feedback regarding the images. If not, they should be asked to do so. This can be a win-win for everyone involved—especially patients. Safely providing sonograms requires that the images are consistent, provide accurate measurements, and show anatomy to demonstrate an intrauterine pregnancy (IUP). If a sonographer's images show a lack of skill, the Clinical Director/Nurse Manager should be informed and a plan of action made to improve skills before scanning continues.

To serve women and their unborn with integrity, **competence** and excellence in every PRMC should be our unrelenting pursuit. NIFLA is here to help you to be successful in your endeavors; always doing so with medical, ethical and legal safeguards in place. Please let us know if you have questions on this issue.

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