

Saskatchewan Registered Nurses' Association

Council Policy #:

GP 3.19

Council Resolution #:

Policy Effective:

Nov. 7, 2018

Next Revision:

COMMON MEDICAL DISORDERS

1. AUTHORITY FOR POLICY

1.1 *The Registered Nurses Act, 1988*, section 7(1):

7(1) The council shall govern, manage and regulate the affairs and business of the association.

1.2 SRNA Bylaws 2019, Bylaw I, Subsection 3(1):

(1) The council shall govern, manage and regulate the affairs and business of the association and without restricting the generality of the foregoing shall:

(a) establish policies as necessary to further the goals of the association;

(b) establish policies regarding examinations, registration and licencing, temporary licencing, and the admission of members;

1.3 *The Registered Nurses Act, 1988*, section 19(4):

(4) The council may, in accordance with the bylaws, place conditions or restrictions on a licence issued pursuant to this section.

1.4 SRNA Bylaws 2019, Bylaw VI, Subsection 3(12):

(12) Council may place conditions or restrictions on a licence in the nurse practitioner category taking into account the need to protect the public, the particular circumstances of the registered nurse and the context of practice including client population, type of care, service delivery model and/or staffing.

2. NURSE PRACTITIONER CATEGORY

The Registered Nurses Act, 1988 was amended in 2001 to expand the scope of practice of the registered nurse. Section 24 of *The Registered Nurses Act, 1988* was amended to include subsection (3) as follows:

- (3) Subject to any conditions or restrictions on the nurse's licence, a registered nurse who meets the requirements set out in the bylaws may, in accordance with the bylaws:
 - (a) order, perform, receive and interpret reports of screening and diagnostic tests that are designated in the bylaws;
 - (b) prescribe and dispense drugs in accordance with the bylaws;
 - (c) perform minor surgical and invasive procedures that are designated in the bylaws;
 - (d) diagnose and treat common medical disorders.

As a result of this legislative amendment, the Association adopted Bylaw VI, section 3 to establish the nurse practitioner category. SRNA Bylaws 2019, Bylaw VI, Subsection 3(3)(a) states as follows:

- (a) in accordance with the standards and competencies, diagnose and treat common medical disorders;

SRNA Bylaws 2019, Bylaw VI, Subsection 1(1)(b) outlines the nurse practitioner category four specialties.

(i) NP - Primary Care – The NP with a Primary Care Specialty provides NP services to individuals and families across the lifespan.

(ii) NP - Adult - The NP with an Adult Specialty provides NP services to young, middle-aged and older adults.

(iii) NP - Pediatrics - NP with a Pediatrics Specialty provides NP services to children from newborn infants to toddler, school-aged children and adolescents.

(iv) NP - Neonatal - The NP with a Neonatal Specialty provides NP services to high risk newborns.

3. NO LEGAL DEFINITION OF COMMON MEDICAL DISORDERS

The term common medical disorders is not defined in the legislation and the bylaws. The legislation and the bylaws provide the framework for this council policy in order to permit NPs to treat common medical disorders.

4. CONCEPT OF COMMON MEDICAL DISORDERS IS EVOLVING

This policy assists NPs, the public and health care partners to understand the evolving scope of diagnosing and treating common medical disorders.

Common medical disorders refer to health disorders that NPs regularly assess, diagnose, and treat with clients and families. Uncommon medical disorders are outside of the scope of practice for NPs. There is recognition that some medical disorders may be uncommon for some NPs, but common for others in their NP practice. It is also recognized that an NP at the beginning of their career may encounter medical disorders that are uncommon for their practice, but over time become common.

5. PRINCIPLES OF COMMON MEDICAL DISORDERS

The NPs must adhere to the principles when completing assessments that lead to diagnosing and treating common medical disorders:

- 5.1 NPs need to consider their area of specialty practice, the diverse populations encountered, and the variety of clinical practice settings.
- 5.2 NPs require continuing professional development to ensure safe and competent diagnosis and treatment of the common medical disorders within their practice.
- 5.3 NPs must consider the trajectory of clients' health needs across the lifespan as well as the nature of a team-based approach, including collaborative relationships with other healthcare providers.
- 5.4 NPs must be able to provide applicable health services considering *The Registered Nurses Act, 1988*, the bylaws, the standards and competency documents and the policies of council of the SRNA.

6. REFERENCES

[*The Registered Nurses Act, 1988*](#)

[*Registered Nurse \(Nurse Practitioner\) Entry-level Competencies \(ELC\)s, SRNA, 2016*](#)

[*Registered Nurse \(Nurse Practitioner\) Practice Standards, SRNA, 2016*](#)

[*Current SRNA Bylaws*](#)