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Advisory Opinion # 62 Formulated: May 15, 2014 Revised: April 2022 Reviewed:

Question: Can a registered nurse (RN) practice in the role of a Clinical Nurse Specialist (CNS) and/ or use the title CNS as a part of the registered nurse credential initials?

The State Board of Nursing for South Carolina acknowledges it is NOT within the scope of practice for an RN to practice in the CNS role or to use the initials CNS in his or her title. A nurse may not practice in the role of a Clinical Nurse Specialist (CNS) or use that title unless the nurse is duly licensed as an Advanced Practice Registered Nurse (APRN) and credentialed as a CNS as required by law. Therefore, it is not within the scope of practice for an RN to practice in the CNS role or to use the initials CNS in his or her title.

S.C. Code § 40-33-20(5) defines Advanced Practice Registered Nurse as follows:

(5) "Advanced Practice Registered Nurse" or " APRN" means a registered nurse who is prepared for an advanced practice registered nursing role by virtue of additional knowledge and skills gained through an advanced formal education program of nursing in a specialty area that is approved by the board. The categories of APRN are nurse practitioner, certified nurse-midwife, clinical nurse specialist, and certified registered nurse anesthetist. An advanced practice registered nurse shall hold a doctorate, a post- nursing master's certificate, or a minimum of a master's degree that includes advanced education composed of didactic and supervised clinical practice in a specific area of advanced practice registered nursing. In addition to those activities considered the practice of registered nursing, an APRN may perform delegated medical acts.

S.C. Code § 40-33-20(21) defines Clinical Nurse Specialist (CNS) as follows:

(21) "Clinical Nurse Specialist" or "CNS" means an advanced practice registered nurse who is a clinician with a high degree of knowledge, skill, and competence in a practice discipline of nursing. This nurse shall hold a master's degree in nursing, with an emphasis in clinical nursing. These nurses are directly available to the public through the provision of nursing care to clients and indirectly available through guidance and planning of care with other nursing personnel. A CNS who performs delegated medical acts is required to have physician support and to practice within approved written protocols. A CNS who does not perform delegated medical acts is not required to have physician support or to practice within approved written protocols as provided in Section 40-33-34.

S.C. Code § 40-33-20(23) defines Delegated Medical Acts as follows:

(23) "Delegated medical acts" means additional acts delegated by a physician or dentist to the NP, CNM, or CNS and may include formulating a medical diagnosis and initiating, continuing, and modifying therapies, including prescribing drug therapy, under approved written protocols as provided in Section 40-33-34. Delegated medical acts must be agreed to jointly by both the Board of Nursing and the Board of Medical Examiners. Delegated medical acts must be performed under the general supervision of a physician or dentist who must be readily available for consultation.

S.C. Code § 40-33-34 includes the requirements for APRN licensure as follows:

(A) An advanced practice registered nurse applicant shall furnish evidence satisfactory to the board that the applicant:

(1) has met all qualifications for licensure as a registered nurse; and

(2) holds current specialty certification by a board-approved credentialing organization. New graduates shall provide evidence of certification within one year of program completion; however, psychiatric clinical nurse specialists shall provide evidence of certification within two years of program completion; and

(3) has earned a master's degree from an accredited college or university, except for those applicants who:

(a) provide documentation as requested by the board that the applicant was graduated from an advanced, organized formal education program appropriate to the practice and acceptable to the board before December 31, 1994; or

(b) graduated before December 31, 2003, from an advanced, organized formal education program for nurse anesthetists accredited by the national accrediting organization of that specialty. CRNA's who graduate after December 31, 2003, must graduate with a master's degree from a formal CRNA education program for nurse anesthetists accredited by the national accreditation organization of the CRNA specialty. An advanced practice registered nurse must achieve and maintain national certification, as recognized by the board, in an advanced practice registered nursing specialty;

(4) has paid the board all applicable fees; and

(5) has declared specialty area of nursing practice and the specialty title to be used must be the title which is granted by the board-approved credentialing organization or the title of the specialty area of nursing practice in which the nurse has received advanced educational preparation.

Any registered nurse who is not licensed as an APRN and credentialed as a CNS may not perform tasks outside the scope of practice for a registered nurse and may not utilize CNS as part of his or her job title. Any nurse engaging in these prohibited practices will be subject to disciplinary action.

This statement is an advisory opinion of the Board of Nursing as to what constitutes competent and safe nursing practice.