

1 21 NCAC 36 .0221 is amended, **with changes**, as published in NCR 37:18, pages 1893-1894 as follows:

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3 **21 NCAC 36 .0221 LICENSE REQUIRED**

4 (a) No cap, pin, uniform, insignia, or title shall be used to represent to the public that an unlicensed person is a  
5 registered nurse or a licensed practical nurse as defined in G.S. 90-171.43.

6 (b) The repetitive performance of a common task or procedure that does not require the professional judgment of a  
7 registered nurse or licensed practical nurse shall not be considered the practice of nursing for which a license is  
8 required. Tasks that may be delegated to a Nurse Aide I and a Nurse Aide II shall be established by the Board pursuant  
9 to 21 NCAC 36 .0403. Tasks may be delegated to an unlicensed person that:

- 10 (1) frequently recur in the daily care of a client or group of clients;
- 11 (2) are performed according to an established sequence of steps;
- 12 (3) involve little or no modification from one client-care situation to another;
- 13 (4) may be performed with a predictable outcome; and
- 14 (5) do not inherently involve ongoing assessment, interpretation, or decision-making that cannot be  
15 logically separated from the tasks themselves.

16 Client-care services that do not meet all of these criteria shall be performed by a licensed nurse.

17 (c) A registered nurse or licensed practical nurse shall not delegate the professional judgment required to implement  
18 a treatment or pharmaceutical regimen that is likely to produce side effects, toxic effects, allergic reactions, or other  
19 unusual effects or that may rapidly endanger a client's life or well-being and that is prescribed by an individual  
20 authorized by State law to prescribe such a regimen. A nurse who assumes responsibility directly or through delegation  
21 for implementing a treatment or pharmaceutical regimen shall be accountable for:

- 22 (1) recognizing side effects;
- 23 (2) recognizing toxic effects;
- 24 (3) recognizing allergic reactions;
- 25 (4) recognizing immediate desired effects;
- 26 (5) recognizing unusual and unexpected effects;
- 27 (6) recognizing changes in a client's condition that contraindicates continued administration of the  
28 pharmaceutical or treatment regimen;
- 29 (7) anticipating those effects that may rapidly endanger a client's life or well-being; and
- 30 (8) making judgments and decisions concerning actions to take in the event such effects occur.

31 (d) If health care needs of a client are incidental to the personal care needs of the client, a nurse shall not be accountable  
32 for care performed by clients themselves, their families or significant others, or by caretakers who provide personal  
33 care to the individual.

34 (e) Pharmacists may administer drugs in accordance with ~~21 NCAC 46 .2507~~, 21 NCAC 46 .2507 and .2514.

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36 *History Note:* Authority G.S. 90-85.3; **90-85.15B**; 90-171.23(b); 90-171.43; **90-171.83**; **90-171.95B**  
37 *Eff. May 1, 1982;*

1 *Amended Eff. July 1, 2004; April 1, 2002; December 1, 2000; July 1, 2000; January 1, 1996;*  
2 *February 1, 1994; April 1, 1989; January 1, 1984;*  
3 *Emergency Amendment Eff. September 10, 2004;*  
4 *Amended Eff. ~~July 1, 2023;~~ April 1, 2008; December 1, 2004.*  
5 *Readopted Eff. January 1, 2019.*  
6 *Amended Eff. July 1, 2023.*