During the September 2007 board meeting, the board voted to find that it is not within the scope of practice of the registered nurse to administer Propofol (Diprivan) during operative, invasive and diagnostic procedures in any type of healthcare setting.

The agent Propofol (Diprivan) is an intravenous sedative agent used in the induction and maintenance of anesthesia or sedation.

Sedation to anesthesia is a continuum and it is not always possible to predict how an individual patient will respond.

The progression from moderate sedation to deep sedation and then unconsciousness can occur rapidly.

Practitioners intending to produce a given level of sedation should be able to rescue patients whose level of sedation becomes deeper than intended.

In the event of an unintended level of sedation, there is not a reversal agent for Propofol (Diprivan). Intervention must be provided by a practitioner proficient in airway management and cardiovascular resuscitation.

The education and experience levels of the registered nurse are quite variable in all types of settings. Also, the registered nurse does not receive advanced training in general anesthesia, airway management and cardiovascular resuscitation.

The board is of the opinion that the agent Propofol (Diprivan) needs to be administered by a trained anesthesia provider educated in anesthesia, airway management and cardiovascular resuscitation. The certified registered nurse anesthetist is considered to be an anesthesia provider.

This position statement is not intended to prohibit the registered nurse from administering Propofol (Diprivan) to intubated, ventilated patients in a critical care setting.

Adopted by the Iowa Board of Nursing 9/19/07.