



*The Nova Scotia College of Nursing (NSCN) is the regulatory body for licensed practical nurses (LPNs), registered nurses (RNs) and nurse practitioners (NPs) in Nova Scotia. Our mandate is to protect the public by promoting the provision of safe, competent, ethical and compassionate nursing services by our registrants. The term nurse in this document refers to LPNs, RNs and NPs unless otherwise stated.*

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Our practice support tools are developed using current reference material. The source of this material is available upon request.



The roles and responsibilities of Canadian health care professionals are always evolving to meet the needs of [clients](#). Effective January 1, 2022, RN prescribing will be implemented to help improve access to health care services for Nova Scotians. RN prescribing enables RNs with specialized education and skills to prescribe medications and order tests within their specific area of expertise and for specific clients with conditions as identified by their employer.

The RN prescriber provides care independently within the health care team and is [accountable](#) for their prescribing actions and decisions. The RN prescriber can not be the most responsible health care provider for a client. The most responsible health care provider has the overall responsibility for directing and coordinating the care and management of the client.

## About RN Prescribing

- RN prescribing is designed to improve access to health care for Nova Scotians, by complementing, not replacing, existing care providers.
- The first cohort of learners will complete the RN Prescribing Certificate Program at Dalhousie University in December 2021 and February 2022.
- All RN Prescribers are identified as “RN-AP” and/or authorized to prescribe under the [Search A Nurse](#) function on the NSCN website.

## What can an RN prescriber prescribe?

- RN prescribers are expected to prescribe within the Standards of Practice for RN Prescribers and RN Prescriber Competencies, their individual [competence](#), scope of practice and clinical expertise, in addition to their RN Standards of Practice and Entry Level Competencies.
- Unlike NPs, who have broad authority to prescribe medications, the RN prescribers’ capacity is narrow because they may only prescribe for the client conditions and in contexts defined in their employer policy.
- RN prescribers may not prescribe controlled drugs and substances, methadone, [medical cannabis](#), or [investigational agents](#).
- RN prescribers are not authorized to de-prescribe medications. They are, however, accountable to refer the client to the appropriate nurse practitioner or physician if there are indications that a medication review with de-prescribing is necessary. More information on de-prescribing and discontinuing medication can be found in the [RN Prescriber Practice Guideline](#).

## How will RN prescribers work with other health professionals?

- RN prescribers are expected to [consult](#), [collaborate](#), or refer the client to the most appropriate health care provider when the client’s prescribing or care needs exceed their individual or [professional scope of practice](#) or competence.
- RN prescribers are fully accountable for their practice and prescribing actions and decisions.
- RN prescribers may not prescribe as part of their self-employed practice.
- Nurses may transcribe and action prescriptions/orders written by RN prescribers.

## Resources

- [RN Prescribing Practice Support Tools](#)
- [Standards of Practice for RN Prescribers](#)
- [RN Prescriber Competencies](#)