

Frequently Asked Questions - Transport Team Exemptions From Obtaining An Oregon License

Per Oregon Revised Statute 678.031 (7) non-resident nurses licensed and in good standing in another state may practice in Oregon on a single, temporary assignment of not to exceed 30 days.

Q: Do I need a license in another state if I transport patients from Oregon to that state?

A: The Oregon statute is silent on this because licensure of nurses falls under the authority of each state. In general, each state mirrors the Oregon statute in allowing transport into and out of the state without requiring licensure in the destination state. Prior to accepting this assignment, nurses should review the practice act of the destination state. However, there may be requirements for licensure if the nurse is transporting the patient from one destination to another in a state in which they are not licensed.

Example: Transport Team nurse is licensed in Oregon. The nurse is assigned to transport a patient from one affiliated hospital in Washington state to another affiliated hospital in Washington state. This activity could require licensure in Washington since the total care of the patient happened in Washington State. Washington statute and rule regarding nursing practice should be consulted.

Q: What is considered a “transport team”?

A: The Oregon statute is silent on what constitutes a transport team. Absent a legal definition, the legislative intent of the statute is to encompass any nurse who accompanies a patients into Oregon from a site outside Oregon. This may be a single nurse or a team of healthcare specialists which have nurses among its members. All non-nurse members of the team should review their own licensing rules for the appropriate guidance.

Q: I work for a home health agency, would I be included in the term “transport team”?

A: Yes, since there is no legal definition of the term “transport team” this would be a home health nurse, a volunteer nurse. It includes any nurse who is responsible for the nursing care of a patient.

Q: My organization wants me to transport a patient to a hospital in another state, we do not have a transport team and I have never done a transport before. Am I allowed under the practice act to accept this assignment?

A: The practice act states that a nurse may accept an assignment if they have the knowledge, skills and abilities (KSA) to perform the requirements of the assignment. Once it is established that the nurse does have the KSA for the assignment then the nurse needs to accept accountability for the safe care of the patient. The organization should have policies and procedures that support the assignment being asked of the nurse.

Q: Can I refuse the assignment?

A: Oregon Administrative Rule 851-045-00070(4) (a) states that performing acts beyond the authorized scope or the level of nursing for which the individual is licensed and (c) assuming

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duties and responsibilities within the practice of nursing for direct client care, supervisory, managerial, or consulting roles without documented preparation for the duties and responsibilities and when competency has not been established and maintained and (d) performing new nursing techniques or procedures without documented education specific to the technique or procedures and a clinical preceptored experience to establish competency is considered conduct derogatory to nursing. The rule does not delineate setting as a requirement to establish competency, therefore, if you have the education and competency validation to perform the nursing care requirements of the assignment (regardless if the requirements are in the back of an ambulance or in any other setting) then the assignment is in your scope of practice. The establishment of competency also requires the nurse to have knowledge of the equipment to be used during the transport.

Example: You are an ICU nurse who is caring for a patient that is in your usual scope of practice. The patient requires an open-sided MRI which is located across town. You are asked to transport the patient to the site in a locally contracted ambulance. Since this patient and their care needs are within your usual scope of practice, it is within your scope to accept the assignment.

Example: The patient will be placed on a transport ventilator. The nurse is assigned to manage the ventilator. The nurse has no experience with the ventilator, has not received education or competency validation. The assignment would then be out of scope. If a respiratory therapist is accompanying the nurse and the therapist does have education and competency to manage the ventilator, then the assignment may be in the scope of the nurse. The same criteria should be established for the IV pump and other patient care equipment which is assigned to the nurse to manage. If the ambulance staff is managing the care equipment owned by the ambulance company and the nurse's role is to monitor the patient, then this is also within the scope of practice.

Q: Does the nurse practice act describe the equipment I need to do the transport?

A: No, the statute and rules regarding the requirements for the ambulance and equipment needed during an ambulance transport are not part of the practice act. The practice act does state that the nurse must make sure that the environment is safe for the requirements of the patient (OAR 851-045-0040 (2)), therefore the nurse must make sure that all equipment to maintain patient safety is available and in function order.

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