

## Orthopaedic Specialty Protocol

Item	Eligibility and Exclusions
<u>Eligible Certification Specialties</u>	Family, Adult, Adult Gerontology, Gerontology, and Acute Care
<u>Non-Eligible Specialties</u>	Oncology, Hospice and Palliative Care, and Pediatric (requires individual review)
<u>Skill/Procedure Exclusions</u>	Injections of the Hip Joint, wrist, hand, ankle, and foot and <b>**No injections of tendons, ligaments, or muscle groups**</b>

### **Application Process (Two Parts)**

1. The Physician must submit Orthopaedic Specialty Protocol Request to the Alabama Board of Medical Examiners (ABME).
2. The CRNP must submit an online application to the Alabama Board of Nursing (ABN), to request the Orthopaedic Specialty Protocol through the applicable app below.
  - a. [Modify an Existing Application](#)
  - b. [Add New Collaboration](#)

### **Authorization**

The Joint Committee for Advanced Practice Nursing, the ABN, and ABME review all requests for approval. After authorization, the CRNP may perform supervised procedures and submit documentation to complete the initial approval process.

### **Required Documentation**

Documentation of supervised practice for additional procedures shall be submitted to the ABN and ABME for review. Use the “Supervised Practice Documentation Form” available under CRNP on the ABN website. ***Supervised practice must be submitted within one year of approval or the approval to train will lapse.***

### **Training and Competency Validation**

With Board approval documentation of training under direct physician supervision, the mid-level practitioner may perform limited joint injections, outlined in the grid below.

Supervised practice must be documented on ABN/ABME form. Use a separate form to record at least 10 supervised procedures for each site requested. Annual competency maintenance requires documentation of a minimum of 5 procedures per approved joint site. Documentation of competency must remain on file at each practice site. Additional site requests require 10 procedures per site and 5 annual procedures for maintenance.

Alabama Board of Nursing and Alabama Board of Medical Examiners

<b>ANATOMICAL LOCATION</b>	<b>INCLUDED</b>	<b>EXCLUDED</b>
<b>SHOULDER</b>	Acromioclavicular Joint Subacromial bursa	Bicipital Tendon Glenohumeral joint aspiration and injection
<b>ELBOW</b>	Olecranon Bursa	Ulnar Collateral Ligament Biceps Tendon Biceps Muscle Annular Ligament of Radius Muscle and Tendon attachments at the Medial and Lateral Epicondyles
<b>GREATER TROCHANTERIC BURSA</b>	Iliopsoas Bursa Gluteous Medius Bursa Ischiogluteal Bursa	Hip Joint
<b>KNEE</b>	Arthrocentesis/Knee Joint Pes anserine bursa	Suprapatellar bursa Prepatellar bursa Infrapatellar bursa Patellar Tendon Sartorius Tendon Gracilis Tendon Semitendinosus Tendon
<b>SACROILIAC JOINT</b>	<b>EXCLUDED</b>	May be requested separately- must go before ABN to determine scope of practice
<b>WRIST, HAND</b>	<b>EXCLUDED</b>	NPs are not authorized to perform injections in the wrist or hand
<b>ANKLE</b>	<b>EXCLUDED</b>	NPs are not authorized to perform injections in the ankle
<b>FOOT</b>	<b>EXCLUDED</b>	NPs are not authorized to perform injections in the foot