Certified Practice vs. Non-certified Practice:
What is the difference?

The intention of this document is to support a better understanding of the differences between certified and non-certified practice. In this context, it is the responsibility of each individual nurse to ensure they are practicing within their scope as outlined by the BCCNM, their individual competence, and any employer/organizational policies and processes.

Certified Practice Reproductive Health: STI Decision Support Tools

The certified practice Reproductive Health (STI) DSTs provide the framework and guidance to allow RN(C)'s to manage (e.g., order diagnostic tests, diagnose and/or treat) specific diseases, disorders and conditions listed under certified practice (Table 1). While the certified practice DSTs may be accessed by all RNs, RNs without certified practice need to consult and/or refer to a physician/nurse practitioner (MD/NP) for the diagnosis and treatment of cases and contacts of STIs and syndromes listed under certified practice.

Table 1: Diseases, disorders and conditions listed under certified practice.

Certified Practice DST's:	Activity	RN(C)	RN
• Bacterial Vaginosis (BV) • Chlamydia Trachomatis • Genital Warts • Gonorrhea • Recurrent Urethritis • Trichomoniasis • Uncomplicated lower UTI • Urethritis • Treatment of STI Contacts	Assessment*	✓	✓
	Testing**	✓	✓
	Diagnosis	✓	Consult and/or refer to MD/NP
	Treatment	✓	Consult and/or refer to MD/NP
	Treatment of Contacts	✓	Consult and/or refer to MD/NP

*Though the BCCDC Certified Practice DST 900: STI Assessment and Diagnostic Guideline is intended for use by RN(C)s, it may serve as a useful guide for RNs to frame a comprehensive sexual health history provided they are supported to do so by their employer.

** A Medical Service Plan (MSP) practitioner number is required to order most tests. RN(C)s can autonomously order tests outlined within the Reproductive Health (STI) DSTs with their MSP practitioner number. RNs may need to collaborate with another clinician with an MSP practitioner number to order tests per organizational/employer policies.

Non-certified Practice Decision Support Tools

Non-certified practice DSTs can be utilized by both RNs and RN(C)s. Tables 2-5 below outline diseases, disorders and conditions that can be managed by RNs and RN(C)s following a comprehensive sexual health assessment, and always under the considerations given to nursing competency and employer support.

The following infections, infestations and syndromes can be managed independently by RNs and RN(C)s

Table 2: Infections, infestations and syndromes managed under non-certified practice

Non-certified Practice DST's:	Activity	RN(C) and RN
• Candidal Balanitis • Vulvovaginal Candidiasis • Molluscum Contagiosum • Pediculosis Pubis (pubic lice) • Scabies	Assessment	✓
	Testing where applicable	✓
	Diagnosis	✓
	Over-the-Counter (OTC) Treatment (where indicated)	✓

For the management of Herpes Simplex Virus, RNs and RN(C)s must consult and/or refer with MD/NP for the diagnosis of complex presentations, and for all antiviral treatment.

Table 3: Herpes simplex virus management under non-certified practice

Non-certified Practice DST's:	Activity	RN(C) and RN
• Herpes Simplex Virus (HSV)	Assessment	✓
	Testing*	✓
	Diagnosis	✓
	Treatment	Consult and/or refer to MD/NP

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For the management of the following syndromes, RN(C)s and RNs must consult and/or refer with MD/NP for diagnosis and treatment.

Table 4: Syndromes managed under non-certified practice

Non-certified Practice DST's:	Activity	RN(C) and RN
• Pelvic Inflammatory Disease • Epididymitis • Proctitis • LGV	Assessment	✓
	Testing*	✓
	Diagnosis	Consult and/or refer to MD/NP
	Treatment	Consult and/or refer to MD/NP

* A Medical Service Plan (MSP) practitioner number is required to order most tests. RN(C)s can autonomously order tests outlined within the Reproductive Health (STI) DSTs with their MSP practitioner number. RNs may need to collaborate with another clinician with an MSP practitioner number to order tests per organizational/employer policies.

For the management of syphilis, RN(C)s and RNs must consult and/or refer with a MD/NP for diagnosis and treatment. RN(C)s are able to independently treat contacts to syphilis.

Table 5: Syphilis managed under non-certified practice

Non-certified Practice DST's:	Activity	RN(C)	RN
• Syphilis	Assessment	✓	✓
	Testing*	✓	✓
	Diagnosis	Consult and/or refer to MD/NP	Consult and/or refer to MD/NP
	Treatment	Consult and/or refer to MD/NP	Consult and/or refer to MD/NP
	Treatment of contacts	✓	Consult and/or refer to MD/NP

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Testing for HIV, hepatitis A, B and/or C, when indicated, should be considered when offering comprehensive sexual health care. The indications for assessment, testing and follow-up can be found in each of their respective Guidelines found in the BCCDC Communicable Disease Control Manual.

Table 6: HIV, hepatitis A, B, C

Infection	Activity	RN(C)	RN
• HIV • hepatitis A • hepatitis B • hepatitis C	Assessment	✓	✓
	Testing*	✓	✓
	Diagnosis	Consult guideline for management indications.	Consult guideline for management indications.
	Treatment	Consult guideline for management indications.	Consult guideline for management indications.
	Treatment of contacts	Consult guideline for management indications.	Consult guideline for management indications.

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