

RN PRESCRIBING FREQUENTLY ASKED QUESTIONS

1. What is an RN prescriber?

An RN prescriber is a registered nurse with an expanded scope of practice which enables them to prescribe medications and devices and order relevant screening or diagnostic tests within their specific area of prescribing [competence](#) and practice. RN prescribers have completed additional education and met additional registration requirements.

2. What is the difference between an RN prescriber and a nurse practitioner?

RN prescribing is not as broad as NP prescribing. RN prescribers have completed additional education and have a defined and limited expanded scope of practice. They may only prescribe for clients with specific conditions and in practice settings as defined by their employer. RN prescribers cannot prescribe controlled drugs and substances, methadone, investigational agents, or medical cannabis. RN prescribers cannot be the most responsible health provider for a client.

NPs have completed a graduate level program and they have a very broad scope of practice. They may prescribe for any client under their care. NPs can be the most responsible care provider for a client.

3. Will the RN prescriber role replace the nurse practitioner's role in prescribing?

No. The RN prescriber will not replace or duplicate services currently provided by other prescribers. They are intended to complement existing services and improve access to health care for all Nova Scotians.

4. Where is RN prescribing education offered?

The RN Prescribing Certificate Program is offered at Dalhousie University. Please contact Dalhousie University if you have questions about the program.

5. Can any RN complete the program?

Currently, the program is only open to RNs who are currently working in clinical areas where their employer has indicated there is a need for enhanced or improved access to care. RNs must be formally endorsed by their employer to enroll in Dalhousie University's RN Prescribing Certificate Program.

6. Once authorized to prescribe, can an RN prescriber prescribe for any client or in any care area?

No. Once authorized, the RN prescriber may only prescribe for clients with conditions and in practice settings as identified by their employer.

7. What medications are RNs able to prescribe?

The RN prescribers will be prescribing medications specific to their practice setting and their expertise. RN prescribers may not prescribe controlled drugs and substances, methadone, medical cannabis, or investigational agents.

8. Can RN prescribers be the most responsible care provider (MRP)?

The RN prescriber may 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. RN prescribers are expected to [consult](#), [collaborate](#), or refer the client to the most appropriate health care provider when the clients prescribing or care needs exceed their individual or [professional scope of practice](#) or competence.

9. How will I know an RN is authorized to prescribe?

The registration and licensure details under the [Search A Nurse](#) function on the NSCN website will note "Authorized to Prescribe" and/or RN-AP.

10. Can I process a prescription written by an RN prescriber?

Yes. Prescriptions written by an RN prescriber can be processed as you would any prescription.

11. Can RN prescribers discontinue a medication?

Discontinuing a medication is the process of stopping a singular medication that may no longer be a benefit to a client. The decision to discontinue a medication is based on an assessment of the client and the specific issue the medication was intended to address. RN prescribers may discontinue a medication or device which they have ordered. They may only discontinue medications or devices ordered by another prescriber following consultation and collaboration with that individual.

12. What is de-prescribing and can RN prescribers de-prescribe?

De-prescribing is a planned process of decreasing or stopping medications that no longer benefit or may cause harm to a client. De-prescribing requires a full medication review (prescribed, OTC, herbal or other supplements) in context of the client's medical condition and treatment plan. RN prescribers are not authorized to de-prescribe medications. They are however, accountable to refer the client to the appropriate NP or physician if there are indications that a medication review with de-prescribing is necessary. De-prescribing is best managed by the most responsible NP or physician.

13. Can RN prescribers provide care without a collaborator?

An RN prescriber is not intended to replace, or substitute an existing care provider, be the most responsible care provider, or practice independently or autonomously without access to a NP or physician collaborator. RN prescribers are required to have a collaborator available to them. They should work with their employers to understand who their collaborators are and how they contact them.

14. Where can more information on RN prescribing be found?

Practice support tools and additional information on RN prescribing are available on the NSCN website [here](#).

15. Where can any additional questions on RN prescribing be directed?

NSCN Practice Consultants are available to help answer any questions on RN prescribing. Please contact practice@nscn.ca for assistance. They will respond as quickly as possible.

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