Guidelines on Nurse and Midwife Initiated Diagnostic Investigations

Re-endorsed by Annual Conference 2011

Nurse and midwife initiated diagnostic interventions are becoming increasingly common in a range of practice areas, most notably among nurse practitioners, midwives and advanced practice nurses. Also changes in the workforce in many rural and regional areas necessitate that many diagnostic investigations will be ordered by registered nurses and midwives.

The arrangements for the initiation and processing of diagnostic pathology and diagnostic imaging differ according to whether or not a charge is raised under Medicare for the processing of the request.

There are certain legal requirements attached to the initiation of any diagnostic pathology or diagnostic imaging service that attracts a charge against Medicare for processing the request. The major requirement is that a medical practitioner or eligible nurse practitioner or midwife initiates the request by completing and signing the request form prior to the service being provided. It is a breach of federal legislation for one of these professionals to sign the request form after the service has been initiated or to sign a blank request form. A request, however, can be initiated in advance or by telephone or facsimile.

Under current costing arrangements between state and federal governments, diagnostic pathology and diagnostic imaging which are provided in the public sector should not be costed for payment under Medicare. These costs should be met by the state through state/federal government funding arrangements for health. Therefore, if a nurse or midwife is employed in the public sector, the cost of nurse or midwife initiated diagnostic pathology and diagnostic imaging should be met by the state. Although under state legislation, there is no legal requirement for a medical practitioner or eligible nurse practitioner or midwife to initiate the diagnostic pathology or diagnostic imaging or to sign the request form if no claim is being made against Medicare for the processing of the request, there may be local policy requirements that forms must be signed.

Nurses and midwives employed in the public sector

Nurse and midwife initiated diagnostic pathology and diagnostic imaging in the public sector have a legal basis and can be addressed by local policies and protocols. Any policy, guideline and/or protocol in relation to nurse or midwife initiated diagnostic pathology and diagnostic imaging should be in writing and be endorsed by the employing facility, and cover such areas as:

- the specific diagnostic pathology and diagnostic imaging items which are appropriate for nurse or midwife initiation,
- the circumstances under which these items can be initiated, and
- how results are to be managed and by whom.

(For example, a midwife may be authorised to collect blood for an antenatal screen, a nurse working in an emergency department may be authorised to initiate radiological examinations for particular clients, a nurse working in an intensive care
unit, a medical unit, a surgical unit, or any unit or department may be authorised to initiate pathology requests specific to that environment.)

**Nurses and midwives employed in the private sector**

In the private sector, nurses and midwives are restricted in initiating diagnostic pathology and diagnostic imaging as the processing of such items would normally occur in a private facility and attract a charge against Medicare. Nurse or midwife initiated diagnostic pathology and diagnostic imaging could only occur if:

- Arrangements were available for the processing of the request that did not necessitate a claim against Medicare. For example, the client may choose to pay for the service, the employer may choose to fund the service as part of their operating costs, or funding may be sought under a specific state or federal government funding program (such as the *better practice program*), or

- The medical practitioner initiates the request in advance or by telephone or facsimile.

All diagnostic pathology or diagnostic radiology initiated by nurses and midwives should be appropriately documented, with mechanisms in place for the management of results and any follow up that is required.

**Nurse Practitioners and eligible midwives**

Since 1 November 2010, legislation\(^1\) supports the rights of nurse practitioners and appropriately qualified and experienced midwives to request diagnostic tests for which Medicare benefits may be paid.

Nurse practitioners and eligible midwives in private practice have access to the Medicare Benefits Schedule (MBS) for items under their clinical practice guidelines.

Nurse practitioners and eligible midwives must meet eligibility requirements to access the new arrangements. The core criterion is that the nurse practitioner or midwife is an ‘eligible nurse practitioner’ or ‘eligible midwife’.

To meet the core requirement of being ‘eligible’, the bill requires endorsement as a nurse practitioner or as an eligible midwife and, in addition, that requirements specified in delegated legislation are met. Additional requirements are based on having appropriate advanced qualifications, experience and/or competencies.

Nurse practitioners and eligible midwives wishing to request diagnostic investigations for which Medicare benefits may be paid need to demonstrate that they have collaborative arrangements in place, including appropriate referral pathways with hospitals and doctors to ensure that patients receive coordinated care and the appropriate expertise and treatment as the clinical need arises.

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\(^1\) Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009