

# Alabama Board of Nursing Critical Care Specialty

The Critical Care Specialty Protocol for Collaborative Practice Nursing lists the skills/procedures in the table below that are approved to apply for through an application process. The application and instructions are available on the ABN website at <a href="Critical Care Specialty-Advanced Protocol Application">Critical Care Specialty-Advanced Protocol Application</a>.

### **Practice Settings**

Hospitals, Critical/Intensive Care, Emergency Department, and Cardiovascular Surgery

### **Population Foci**

Adult Acute Care, Adult Health, Adult/Gerontology Acute Care, Adult/Gerontology Primary Care, Family, Gerontology, Pediatric, and Pediatric Acute Care

### Insertion of tunneled catheters is not approved.

Training Requirements for insertion of non-cuffed Central Venous Lines no larger than 9French Note: If approved for central venous line insertion, internal jugular and femoral, a total of 10 procedures for annual maintenance are required. A minimum of 5 procedures, out of the 10 required, must be internal jugular.

Skills/Procedures  Note: The Seldinger method is recommended, which refers to the use of a guidewire placed into a vessel to provide a conduit for intravascular catheter placement. The adult central venous access is obtained through a percutaneous method by way of the internal jugular or femoral vein.	Number Required for Initial Certification	Number Allowed in Simulation Lab (50% of Initial)	Annual Maintenance Requirement	
Central Venous Line: Internal Jugular	10	5	5	
Central Venous Line: Femoral	10	5	5	
Central Venous Line: Subclavian (Physician must be present)	50	N/A	25	
Central Venous Line, Remove and Replace Over Guide Wire (Only for NPs who are previously approved or are requesting CVL placement, IJ, and Femoral).	5	N/A	5	
Central Venous Line Removal – Percutaneous	10	0	5	
Central Venous Line Removal – Tunneled	10	0	5	

Training Requirements for other skills/procedures				
Skills/Procedures	Number Required for Initial Certification	Number Allowed in Simulation Lab (50% of Initial)	Annual Maintenance Requirement	
Intra-Aortic Balloon Insertion	20	N/A	10	
Removal of Intra-Aortic Balloon Pump	10	NA	5	

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Radial Artery Harvest (Cardiac Surgery	20	N/A	10
Only)			
Sternal Closure (Cardiac Surgery Only)	50	N/A	25
Primary Sternotomy (Cardiac Surgery Only)	50	N/A	25
Primary Thoracotomy (Cardiac Surgery	50	N/A	25
Only)			
Thoracostomy Tube Insertion (Intra-operative	30	N/A	15
only)			
Paracentesis (only under ultrasound guidance)	30	15	15
Thoracentesis	30	15	15
Removal of Left Atrial Catheter	30	N/A	15

### Insertion of Non-Tunneled Central Venous Line Less than 14F

#### **Population Foci**

Adult Acute Care, Adult/Gerontology Acute Care, and other qualified CRNPs.

## Training Requirements for Insertion of Non-Tunneled Central Venous Line Less than 14F

Approved for an appropriate hospital setting used to mitigate possible complications of the procedure. Hospital protocol shall include a statement of Trauma Center status (Level 3 approvals are contingent on a plan for a specialty physician being onsite and immediately available). All procedures performed, including training, should be recorded in an electronic health record for tracking of the procedure and complications. The collaborating physicians for CRNPs must be hospital credentialed and actively engaged in the practice of insertion of Non-Tunneled CVL and therefore perform non-tunneled central venous line insertion on a routine basis. **Note**: Training should be representative of the appropriately sized catheter that is anticipated to be used by the CRNP.

Skills/Procedures	Requirement Prior to Requesting to Train	Initial Requirement for Certification	Annual Maintenance Requirement
Central Venous Line: Internal Jugular Ultrasound guidance is required	Observe and document no fewer than 10 procedures	25 (10) simulation lab	15
Central Venous Line: Femoral Ultrasound Guidance is required	Simultaneously or previously approved for Internal Jugular insertion training	5 (2) simulation lab	5 (5) simulation lab

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