

1 **20:48:04.01:09. Requirements for delegated medication administration to a nursing**
2 **assistant.** A licensed nurse may delegate the administration of medications authorized under
3 §§ [20:48:04.01:09.01](#) and [20:48:04.01:11](#), inclusive, to a nursing assistant who:

- 4 (1) Has a minimum of a high school education or the equivalent;
5 (2) Completed a board-approved medication administration training program in accordance
6 with § [20:48:04.01:13](#) or completed a program that the board determines is equivalent; and;
7 (3) If administering medications in a skilled nursing facility, assisted living center, or a hospital,
8 licensed under SDCL chapter [34-12](#), are registered with the board in accordance with chapter
9 [20:48:16](#).

10 **Source:** 21 SDR 13, effective August 7, 1994; 41 SDR 12, effective July 31, 2014; 49 SDR 51,
11 effective November 27, 2022.

12 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

13 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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17 **20:48:04.01:09.01. Delegation of medication administration tasks to a nursing assistant.**

18 A licensed nurse may delegate the following medication administration tasks to a nursing assistant
19 if the delegation complies with the general criteria for delegation and supervision set forth in §§
20 [20:48:04.01:01](#) and [20:48:04.01:02](#), respectively:

- 21 (1) Administration of scheduled medications by oral, sublingual, eye, ear, nasal, rectal, topical,
22 transdermal, vaginal, or inhalation route;
23 (2) Measurement of a prescribed amount of liquid medication or crushing a tablet for
24 administration if a licensed nurse, physician, or pharmacist has calculated the dose; and
25 (3) Administration of schedule II controlled substances listed in SDCL [34-20B-16](#) and [34-20B-](#)
26 [17](#) that are prescribed and labeled in a container for a specific client.

27 If the nursing assistant is administering medications in a hospital setting, a registered nurse must
28 provide direct supervision as defined in § [20:48:01:01](#).

29 **Source:** 49 SDR 51, effective November 27, 2022.

30 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

31 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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35 **20:48:04.01:10. Delegation of additional medication administration tasks to a medical**
36 **assistant.** In addition to the tasks listed in § [20:48:04.01:09.01](#), a licensed nurse may delegate the
37 following medication administration tasks to a medical assistant, who holds current certification
38 with a national certification body approved by the board, in a stable nursing situation as defined in
39 § [20:48:01:01](#):

- 40 (1) Administration of scheduled medications by intradermal, subcutaneous, or intramuscular
41 route; and
42 (2) Calculation of the dose of a prescribed amount of medication.

43 **Source:** 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 49 SDR 51,
44 effective November 27, 2022.

45 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

46 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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20:48:04.01:11. Medication administration tasks that require a written protocol. A registered nurse must develop, and maintain on file, a written protocol that includes specific medication administration instructions and training requirements, before delegating the following medication administration tasks to a nursing assistant:

(1) Administration of the initial dose of a medication that has not been previously administered to the client;

(2) Administration of medications on an as-needed basis, including schedule II controlled substances listed in SDCL [34-20B-16](#) and [34-20B-17](#) that are prescribed and labeled in a container for a specific client; and

(3) Administration of insulin by the subcutaneous route, when a licensed nurse is not available to administer the insulin, in accordance with §§ [20:48:04.01:16](#) and [20:48:04.01:17](#).

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 41 SDR 12, effective July 31, 2014; 49 SDR 51, effective November 27, 2022.

General Authority: SDCL [13-33A-2](#), [36-9-21](#).

Law Implemented: SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

20:48:04.01:12. Medication administration tasks that may not be delegated. A licensed nurse may not delegate the following tasks of medication administration:

(1) Administration of schedule II controlled substances listed in SDCL [34-20B-16](#) and [34-20B-17](#) from a locked stock supply;

(2) Administration of medications by subcutaneous, intramuscular, intradermal, or intravenous route except as authorized in § [20:48:04.01:10](#) and [20:48:04.01:16](#) to [20:48:04.01:18](#), inclusive;

(3) Administration of medications by way of a tube inserted in a cavity of the body, except as authorized in § [20:48:04.01:18](#);

(4) Administration of medications via inhalation route in a complex nursing situation as defined in § [20:48:01:01](#); and

(5) Calculation of any medication dose, except as authorized in § [20:48:04.01:10](#).

Source: 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 28 SDR 36, effective September 18, 2001; 41 SDR 12, effective July 31, 2014; 49 SDR 51, effective November 27, 2022.

General Authority: SDCL [13-33A-2](#), [36-9-21](#)(4).

Law Implemented: SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

20:48:04.01:13. Approval of training program required for delegated medication administration. Medication administration as outlined in § [20:48:04.01:09.01](#) to [20:48:04.01:11](#), inclusive, may be delegated to individuals who have successfully completed a training program approved by the board pursuant to §§ [20:48:04.01:14](#) to [20:48:04.01:15](#), inclusive. A training program must apply for renewal every two years.

92 **Source:** 21 SDR 13, effective August 7, 1994; 41 SDR 12, effective July 31, 2014; 49 SDR 51,
93 effective November 27, 2022.

94 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

95 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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99 **[20:48:04.01:14](#). Requirements for approval of medication administration training**
100 **programs.** An institution or individual must submit an application for a training program for
101 delegated medication administration for approval to the board. The board shall grant approval to
102 an applicant upon proof that the training program:

103 (1) Is based on the training curriculum in § [20:48:04.01:15](#);

104 (2) Includes no less than 16 hours of theoretical instruction;

105 (3) Is taught by a registered nurse who has a minimum of two years of clinical nursing
106 experience and who holds a registered nurse license from the board or privilege to practice;

107 (4) Includes no less than four hours of clinical or laboratory instruction that is taught by a
108 registered nurse or licensed practical nurse who has a minimum of two years of clinical nursing
109 experience and who holds a registered nurse or licensed practical nurse license from the board or
110 privilege to practice.

111 The training program must submit an evaluation to the board every two years to demonstrate
112 compliance with program standards in § [20:48:04.01:14.01](#) to maintain approval.

113 **Source:** 21 SDR 13, effective August 7, 1994; 41 SDR 12, effective July 31, 2014; 49 SDR 51,
114 effective November 27, 2022.

115 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

116 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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120 **[20:48:04.01:14.01](#). Standards for medication administration training programs.** An
121 individual or institution approved by the board to offer a medication administration training
122 program must ensure the training program meets the following standards:

123 (1) Maintains a faculty-to-student ratio that does not exceed 1:8 in the clinical setting and a
124 faculty-to-student ratio that does not exceed 1:1 for skills performance evaluation;

125 (2) Requires the student to complete a skills performance evaluation administered by a
126 registered nurse instructor utilizing a board-approved competency checklist;

127 (3) Requires the student to pass a written examination on the curriculum content in
128 § [20:48:04.01:15](#). A passing score of 85 percent is required on the examination. If the student fails
129 the examination, the student may retake the test one time. If the student fails the retake, additional
130 instruction is required before further testing is allowed;

131 (4) Awards a completion certificate to a student who successfully completes the training
132 program. The certificate must include the name and location of the institution, the length of the
133 program, the date of completion, the full name of the student who completed the program, the
134 signature of the faculty member in charge of the course, and the date the certificate was awarded;
135 and

136 (5) Maintains documentation of:

137 (a) Each student enrolled in the program, including documentation of successful
138 completion or the date and reason the student withdrew or failed;

139 (b) Each faculty member teaching the program, including the qualifications and nursing
140 experience of each faculty; and

141 (c) All tests administered.

142 **Source:** 49 SDR 51, effective November 27, 2022.

143 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

144 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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148 **20:48:04.01:15. Medication administration curriculum.** The training curriculum for
149 delegated medication administration must include:

150 (1) General information relevant to the administration of medications, including:

151 (a) Governmental regulations related to the practice of nursing, the administration of
152 medication, and the storage, administration, and recording of controlled substances;

153 (b) Ethical issues;

154 (c) Terminology, abbreviations, and symbols;

155 (d) Medication administration systems;

156 (e) Forms of medication;

157 (f) Procedures and routes of medication administration;

158 (g) Medication references available;

159 (h) The role of nursing assistive personnel in administering medications;

160 (i) The rights of medication administration including the right patient, right medication, right
161 dose, right time, right route, and right documentation;

162 (j) Infection control policies and procedures;

163 (k) Documentation;

164 (l) Medication errors;

165 (m) Safe medication storage and disposal; and

166 (n) Circumstances to consult with or report to the delegating nurse, including the
167 administration of an as-needed medication, a deviation from the delegated instruction of the nurse,
168 or a concerning observation;

169 (2) An overview of the major categories of medications related to the body systems, including:

170 (a) Cardiovascular;

171 (b) Endocrine;

172 (c) Gastrointestinal;

173 (d) Integumentary and mucous membranes;

174 (e) Musculoskeletal;

175 (f) Nervous;

176 (g) Reproductive;

177 (h) Respiratory;

178 (i) Sensory;

179 (j) Urinary and renal; and

180 (k) Immune;

181 (3) Instruction on categories of medications relevant to the health care setting where the nursing
182 assistant will be administering medications; and

183 (4) Clinical or laboratory instruction demonstrating medication administration and evaluation
184 of individual competence.

185 **Source:** 21 SDR 13, effective August 7, 1994; 26 SDR 174, effective July 4, 2000; 41 SDR 12,
186 effective July 31, 2014; 49 SDR 51, effective November 27, 2022.

187 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

188 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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192 **[20:48:04.01:16](#). Written protocol required for the delegation of insulin administration by**
193 **the subcutaneous route to a nursing assistant.** Before a registered nurse may delegate insulin
194 administration by the subcutaneous route to a nursing assistant, the registered nurse must develop
195 a written protocol. The written protocol must include the following requirements:

196 (1) The nursing assistant shall complete a five hour board-approved training in the following
197 areas:

- 198 (a) Diabetes basics;
- 199 (b) Hypoglycemia;
- 200 (c) Hyperglycemia;
- 201 (d) Blood glucose monitoring;
- 202 (e) Glucagon administration;
- 203 (f) Insulin types and methods of administration;
- 204 (g) Nutrition and physical activity;
- 205 (h) Documentation; and
- 206 (i) Standard precautions;

207 (2) The nursing assistant shall pass a written examination on the areas listed in subdivision (1).
208 A passing score of 85 percent is required on the test. If the nursing assistant fails the test, the
209 nursing assistant may retake the test one time. If the nursing assistant fails the retake, additional
210 instruction is required before further testing is allowed;

211 (3) The nursing assistant shall complete a minimum of five hours of clinical or laboratory
212 instruction, including the demonstration of individual competence utilizing a board-approved
213 competency checklist, in the following areas:

- 214 (a) Blood glucose monitoring;
- 215 (b) Insulin administration;
- 216 (c) Glucagon administration;
- 217 (d) Carbohydrate counting and diet management; and
- 218 (e) Standard precautions;

219 (4) The registered nurse shall meet in-person with the nursing assistant, after completion of the
220 requirements in subdivisions (1), (2), and (3), during a client's mealtime at least two times per
221 week in the first four weeks to consult with the nursing assistant and to evaluate competence;

222 (5) The registered nurse must be available by electronic communication at all mealtimes; and

223 (6) The registered nurse shall complete an annual review of the nursing assistant's competence
224 in each area identified in subdivision (3).

225 **Source:** 41 SDR 12, effective July 31, 2014; 49 SDR 51, effective November 27, 2022.

226 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

227 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-21](#).

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20:48:04.01:17. Qualifications of the registered nurse for delegation of insulin administration by the subcutaneous route to a nursing assistant. A registered nurse must meet the following qualifications to delegate insulin administration by the subcutaneous route to a nursing assistant in accordance with §§ [20:48:04.01:11](#), [20:48:04.01:16](#), and [20:48:04.01:18](#):

- (1) Hold an active registered nurse license or privilege to practice in this state;
- (2) Have two years of clinical nursing experience; and
- (3) Have written evidence of demonstrated competence in the area of diabetes management in the past five years, or completion of a diabetes trainer program approved by the board; or
- (4) Hold current specialty certification as a Certified Diabetes Educator (CDE).

Source: 41 SDR 12, effective July 31, 2014; 49 SDR 51, effective November 27, 2022.

General Authority: SDCL [13-33A-2](#), [36-9-21](#).

Law Implemented: SDCL [13-33A-1](#), [36-9-3](#), [36-9-21](#).

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20:48:04.01:18. Delegation of specific medication administration. A registered nurse or licensed practical nurse may delegate the administration of one specific medication to be administered to one specific client by a specific nursing assistant, who has not met the requirements in § [20:48:04.01:09](#), if:

- (1) A registered nurse has determined that the administration of that one medication by the nursing assistant will allow the client to remain in the client’s usual place of residence;
- (2) The client does not reside in a nursing facility or assisted living center licensed under SDCL chapter [34-12](#);
- (3) A licensed nurse is not available to administer the medication;
- (4) The delegation complies with the general criteria for delegation and supervision set forth in §§ [20:48:04.01:01](#) and [20:48:04.01:02](#), respectively;
- (5) The licensed nurse fulfills with the nursing assistant the training requirements in § [20:48:04.01:19](#); and
- (6) The delegation is not prohibited by any other state statute, rule, federal statute, rule, or guidance.

Source: 49 SDR 51, effective November 27, 2022.

General Authority: SDCL [13-33A-2](#), [36-9-21](#).

Law Implemented: SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).

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20:48:04.01:19. Training required for the delegation of specific medication administration. A licensed nurse must meet the following requirements before delegating the administration of a specific medication as provided in § [20:48:04.01:18](#):

- (1) Provide instruction to the nursing assistant on the specific medication to be administered, including:
 - (a) The trade name and generic name;
 - (b) The purpose of the medication;
 - (c) Signs and symptoms of common side effects, warnings, and precautions;

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- 275 (d) Route of administration; and
276 (e) When to contact the licensed nurse;
- 277 (2) Verify, through the administration of a test or observation, that the nursing assistant knows:
278 (a) The six rights of medication administration, including the right client, right medication,
279 right dose, right route, right time, and right documentation;
280 (b) The name of the medication and common dosage;
281 (c) The signs and symptoms of side effects for the medication;
282 (d) Circumstances when the licensed nurse should be contacted;
283 (e) How to administer the medication to the client; and
284 (f) How to document the medication administration;
- 285 (3) Observe the nursing assistant administering the medication to the client until the nursing
286 assistant demonstrates competency;
- 287 (4) Document the training provided to the nursing assistant; and
- 288 (5) Evaluate the client when medication orders change to determine if further instruction of the
289 nursing assistant is needed.

290 A licensed nurse who delegates the administration of insulin under this section shall follow the
291 requirements of §§ [20:48:04.01:16](#) and [20:48:04.01:17](#).

292 **Source:** 49 SDR 51, effective November 27, 2022.

293 **General Authority:** SDCL [13-33A-2](#), [36-9-21](#).

294 **Law Implemented:** SDCL [13-33A-1](#), [36-9-3](#), [36-9-4](#), [36-9-4.1](#), [36-9-21](#).