



Diagnostic Test Requests Authorized Prescriber Policy Frequently Asked Questions



Nova Scotia Health and IWK Health (IWK) have collaborated to develop a consistent, provincial policy leveraging the full scope and range of providers to define who is authorized to request diagnostic tests. The new policy, [Diagnostic Test Requests – Authorized Prescriber Policy](#), will be published January 9, 2024 on [OP3](#) and will become effective January 30, 2024.

Why is this policy needed?

Each province has authorized prescriber guidelines to ensure patient care is of high quality and safely delivered by appropriately qualified, credentialed and/or licensed healthcare professionals who are accountable to the province and/or health jurisdictions in the province where care is delivered.

Diagnostic testing resources such as laboratory and diagnostic imaging are critical to the delivery of quality, safe care. These diagnostic resources must be used appropriately to ensure the right test is provided to the right patient at the right time.

Nova Scotia Health Medical Staff Bylaws (2023) and IWK Medical Staff Bylaws (2021) identify who is authorized to prescribe testing. The new policy compliments and helps to reinforce the rules set out in the bylaws.

The policy's overall goal is to support high quality and safe care by clearly defining:

- which health care professionals are authorized to request diagnostic tests
- the scope of what various prescribers are permitted to request
- the circumstances or conditions under which this prescribing is authorized and
- the need for appropriate communication and follow-up with respect to results, including up to date contact information and rapid response to critical results.

It aims to help ensure:

- patients are prescribed appropriate tests and receive timely, appropriate follow-up on this testing
- inappropriate, redundant, or duplicate testing is avoided, preventing unnecessary and costly burdens on testing equipment and materials and our teams (i.e., clerical and booking staff, technologists providing/processing tests, specialists interpreting/reporting results, etc.)

When does the policy take effect?

The policy is effective as of January 30, 2024.

How was this policy developed and who was engaged in the development?

The policy was developed by a working group involving administrative and medical leaders from Nova Scotia Health's Diagnostic and Therapeutic Services Network, Chronic Disease Management and Primary Health Care Network, Medical Affairs, Interprofessional Practice and Learning, as well as representatives from Diagnostic Imaging, Pathology and Laboratory Medicine, Pharmacy and IWK.

The team drafted the policy using information compiled from existing policies and other jurisdictions. From there the working group sought feedback from key stakeholders whose input was considered important in the final development, including team members from the groups listed above. Over 100 stakeholders were engaged to enlist feedback.

Does this policy replace other existing policies related to prescribing?

This new policy will take the place of pre-existing regional or facility-based policies or guidelines defining who is authorized to prescribe diagnostic tests from various Nova Scotia Health and / or IWK diagnostic services, as well as the conditions and expectations surrounding that authority.

What services does the policy apply to?

This policy applies broadly to various diagnostic services provided by Nova Scotia Health and the IWK, including diagnostic imaging, pathology and laboratory medicine, and other services used to detect or assess the progression of various illnesses, injuries, or conditions.

It does not apply to self-referred testing such as breast, colon cancer, cervical cancer and other screening programs. Individuals continue to have the ability to self-refer to these services within the parameters (e.g., age and frequency guidelines) of Nova Scotia's various cancer screening programs.

Does the scope of what can be requested vary between different types of providers?

Yes. Certain types of providers may be limited in the scope of testing they can request or the conditions under which requesting is permitted.

A chart within Appendix-B of the policy (listed below) defines the scope of what can be requested by various providers and any conditions under which they are authorized to prescribe (e.g., affiliation agreements, care directives). Some individuals are considered authorized prescribers, while others are defined as authorized requestors.

What is the difference between authorized prescribers and requestors?

An authorized prescriber is a Regulated Health Care Professional who is permitted by legislation, their regulatory college, Nova Scotia Health / IWK, and practice setting (where applicable) to prescribe medications/treatments and request diagnostic tests within their scope of practice or employment. Some clinicians are authorized prescribers, meaning they have the authority to request from the full scope of testing available.

In addition to authorized prescribers, certain individuals can be authorized requestors. These individuals include anyone who has been delegated the authority to request a test to be requested through medical (care) directives, delegated functions, expanded role designation, specific policies, etc. (e.g., Emergency Department care directives, physiotherapists (requesting x-rays) etc.). The Authorized Prescriber associated with the documented process is responsible for the test result(s).

Examples of Nova Scotia Professions	Authorized Prescribers for Diagnostic Testing	Source
Advanced Paramedics approved by formal Care Directives	Authorized Requestor: Limited test list	Refer to relevant Nova Scotia Health/IWK Care Directives
Chiropractors	Yes (General Radiography only)	
Clinical Clerks	No	
Dentists	Yes	PDBNS
Dietitians	Authorized Requestor: Limited test list	Refer to relevant Nova Scotia Health/IWK Care Directives
Genetic Counsellors approved by delegated medical function	Authorized Requestor	Refer to relevant IWK Delegated Medical Functions
Medical Students	No	
Naturopathic Doctors	No	
Nurse Practitioners	Yes	NSCN Practice Standards
Optometrists	No	NSCO
Pharmacists	Nova Scotia Health/IWK requesting diagnostic tests only *Community pharmacists currently under review	Pharmacist Extended Practice Regulations Drug Prescribing, Administration and Testing By Pharmacists - Policy and Procedure - NSHA MM-GA-001
Physicians (registered in Nova Scotia)	Yes – when holding privileges with Nova Scotia Health or IWK	CPSNS

Physician Assistants	Yes, limited test list	see Nova Scotia Health Care Directive
Physiotherapists	Yes (General Radiography only)	Requesting General Radiography Studies by Physiotherapists NSHA DT-DI-020 Consultation for X-rays by Physiotherapists - IWK 7001
Podiatrists	No	
Psychologists	No	
Registered Nurses approved by formal Care Directives or completion of the RN Prescribing Certificate Program	Authorized Requestor: Limited test list	Refer to relevant Nova Scotia Health/IWK Care Directives or RN Prescribing Certification
Registered Midwives	Limited test list	MRCNS Legislation and Regulations MRCNS Policies and Standards

Do prescribers have to be practicing in Nova Scotia or can they simply hold a valid Nova Scotia license?

Only those providers actively practicing within the province, and /or meeting other eligibility criteria (i.e., have a contractual agreement in place), may prescribe diagnostic tests. Being licensed to practice here does not remove the requirement to be actively practicing within Nova Scotia or meet other conditions set out in the policy.

Contractual agreements include affiliation agreements, memorandums of understanding or agreement, contracted services, and referral contracts.

Can authorized prescribers request on behalf of ineligible providers?

No. It is neither acceptable nor permissible for authorized prescribers to request diagnostic tests on another provider’s behalf or to allow ineligible providers to use your license number to circumvent the defined process. This could lead to inappropriate requesting and insufficient follow-up, which could jeopardize patient safety. Individuals who abuse their prescribing authority in such ways could also be subject to disciplinary action from their licensing body or employer.

Can authorized prescribers request testing for themselves or family members?

No, they may not request for themselves, family members or for any others whom they have personal involvement with, that may render them unable to exercise objective professional judgment in reaching diagnostic or therapeutic decisions. This is noted in the policy and explicitly outlined by various professional associations and licensing bodies.

Some prescribing is allowed under contractual arrangements. What are these and could a provider apply for such an agreement so that they may request testing?

Contractual arrangements can include affiliation agreements, memorandums of understanding / agreement, contracted services, or referral contracts. Prescribers external to and having no contractual arrangement with Nova Scotia Health / IWK Health / First Nations Community Health Centre may not prescribe within Nova Scotia Health practice settings. Such agreements are not available outside these situations and not available simply for the purposes of gaining access to testing.

The table shows physiotherapists are authorized to prescribe general radiography studies. Does this include all physiotherapists practicing in the province?

Physiotherapists employed by Nova Scotia Health and IWK Health as well as those employed in private community-based practice are authorized to request specific general radiography studies ([see policy](#)) as part of their role.

The table shows chiropractors are authorized to prescribe general radiography studies. Does this include all chiropractors practicing in the province?

There has been a historic practice within Central Zone whereby these non-NSH providers were permitted to request limited tests. This is now being expanded to include all chiropractors in Nova Scotia.

Does the policy outline the requirements to follow-up on prescribed testing?

Diagnostic staff need to ensure that results are delivered to authorized prescribers. To support this requirement, the policy notes that when requesting testing, it is necessary to name and provide contact information for the physician, or designated provider, who will be available to receive the results. It is essential that the individual(s) named be able to receive and promptly follow-up on critical, time-sensitive results.

What does this policy mean for patients receiving care through VirtualCareNS services?

VirtualCareNS provides free, temporary access to primary health care for people on the Need a Family Practice Registry. Through VirtualCareNS, people on the registry can make a virtual health appointment for their health care needs.



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This policy recognizes that NSH Virtual services are providing a valuable service to Nova Scotians and enables providers with VirtualCareNS to request diagnostic testing, regardless of whether they are in Nova Scotia or elsewhere (per VirtualCareNS expansion).

If a physician or nurse practitioner works for both a private primary care service, such as a virtual care provider, as well as Nova Scotia Health, IWK Health or a First Nations health clinic, are they authorized to prescribe testing?

The credentialing and other agreements that apply to providers within NSH, the IWK and First Nations Clinics do not extend to other private care services. Therefore, providers are responsible for their own liabilities in private work and their authorized prescriber privileges do not extend outside of their NSH, IWK and First Nations roles.

The Canada Health Act precludes private facilities or providers from charging insured residents of a province for insured services such as blood tests or x-rays.

Why not just allow private / virtual care providers based outside of Nova Scotia to request tests, to fill this gap in primary care for patients?

Timely access to primary care is a concern for many Nova Scotians. There are many investments and initiatives underway to help improve access and help make Nova Scotians aware of their options.

Removing prescribing rules that protect patients and safeguard health system resources, is not a safe or reasonable solution to primary care access issues. Each province has similar provider rules to protect patients and their health information.

It is important we know who is requesting testing, that they are in good standing with their professional bodies and that they are both qualified and competent to request the appropriate testing and follow-up in a timely and appropriate manner.

Without rules in place for who can request, we also risk adding unnecessary pressures to the health system that could add to wait times and testing and treatment delays.

How can zones/IWK support compliance with the policy?

It is vital that directors and managers routinely reinforce the need for vigilance and consistency with all staff, particularly those tasked with registration and booking, including all new hires during their orientation. This education should include informing staff of any special agreements that allow for prescribing outside typical parameters.