AMERICAN MEDICAL ASSOCIATION
MEDICAL STUDENT SECTION

Resolution
(I-11)

Introduced by: David Broome, Wayne State University School of Medicine, John Gwizdala, Wayne State University School of Medicine, Nnayereugo Ezekwemba, Wayne State University School Medicine, Scott Coppel, Wayne State University School of Medicine, Richard Heglund, Wayne State University School of Medicine

Subject: Support for Continued Oversight and Supervision of Advanced Practice Registered Nurse

Referred to: MSS Reference Committee

Whereas, current practice of APRN is under supervision of licensed physicians in primary care and specialized fields; and

Whereas, prescription of medical pharmaceuticals by APRNs are currently supervised and approved by a licensed physician; and

Whereas, a New England Journal of Medicine survey has shown a disconnect between nurse practitioners and physicians on perceived efficacy of primary care given by APRNs with and without supervision[1]; and

Whereas: Thirteen states have passed laws expanding the prescription authority of APRNs, there exists ample opportunity for research comparing the efficacy and safety of care provided by APRNs with that of care provided by primary care physicians. Yet, there is a dearth of rigorous, physician-led publications concerning this critical topic; and

Whereas, the Assistant Vice President for Risk Control at CNA conducted a "study with results indicating that while the number of nurse practitioner [malpractice] claims have been relatively stable over the past 5 years (2007-2011), the number of claims resulting in very severe indemnity payment have increased 19% since 2009. The data also show that many claims develop from a failure involving core competencies, such as treatment and care management, and medication prescribing"[2]; and

Whereas, the current standard of healthcare in Michigan is centered on a physician-led team and APRNs' prescriptive authority limited to what is deemed appropriate by the collaborative agreement between the APRN and physician[3]; therefore be it

RESOLVED, That our MSS support a call for physician-led research concerning the safety and efficacy of APRN-provided care in the states that have expanded scope of practice for APRNs prior to implementation in the state of Michigan. Optimally that should be comprised of high-powered, multi-centered, randomized comparative clinical trials; and be it further

RESOLVED, That if scheduled prescription drug classes II through V is to be extended to advanced practice registered nurses, there is continued oversight and approval by a licensed physician in the state of Michigan;.

Fiscal note: (Leave blank)

Date received: (Leave blank)

References:

Insert numbered references here, corresponding to reference numbers cited in the text of the resolution. Please do not use automated footnotes/endnotes. Please format references according to the following examples:

1. Donelan, Karen, Desroches, Catherine M., Dittus, Robert S., and Peter Buerhaus. "Perspectives of Physicians and Nurse Practitioners on Primary Care Practice" *New England Journal of Medicine* 2013; 368: 1898-1906.
2. Leigh, J., and J. Flynn. "Enhance patient safety by identifying and minimizing risk exposures affecting nurse practitioner practice." *J Healthc Risk Manag.* 2013; 33(2): 27-35.
3. American Academy of Family Physicians. "Primary Care for the 21st Centurty, Ensuring a Quality Physician-led Team for Every Patient". 2012. http://www.aafp.org/dam/AAFP/documents/about_us/initiatives/AAFP-PCMHWhitePaper.pdf
4. H-160.950 Guidelines for Integrated Practice of Physician and Nurse Practitioner

Our AMA endorses the following guidelines and recommends that these guidelines be considered and quoted only in their entirety when referenced in any discussion of the roles and responsibilities of nurse practitioners: (1) The physician is responsible for the supervision of nurse practitioners and other advanced practice nurses in all settings.

(2) The physician is responsible for managing the health care of patients in all practice settings.

(3) Health care services delivered in an integrated practice must be within the scope of each practitioner's professional license, as defined by state law.

(4) In an integrated practice with a nurse practitioner, the physician is responsible for supervising and coordinating care and, with the appropriate input of the nurse practitioner, ensuring the quality of health care provided to patients.

(5) The extent of involvement by the nurse practitioner in initial assessment, and implementation of treatment will depend on the complexity and acuity of the patients' condition, as determined by the supervising/collaborating physician.

(6) The role of the nurse practitioner in the delivery of care in an integrated practice should be defined through mutually agreed upon written practice protocols, job descriptions, and written contracts.

(7) These practice protocols should delineate the appropriate involvement of the two professionals in the care of patients, based on the complexity and acuity of the patients' condition.

(8) At least one physician in the integrated practice must be immediately available at all times for supervision and consultation when needed by the nurse practitioner.

(9) Patients are to be made clearly aware at all times whether they are being cared for by a physician or a nurse practitioner.

(10) In an integrated practice, there should be a professional and courteous relationship between physician and nurse practitioner, with mutual acknowledgment of, and respect for each other's contributions to patient care.

(11) Physicians and nurse practitioners should review and document, on a regular basis, the care of all patients with whom the nurse practitioner is involved. Physicians and nurse practitioners must work closely enough together to become fully conversant with each other's practice patterns. (CMS Rep. 15

- I-94; BOT Rep. 6, A-95; Reaffirmed: Res. 240, A-00; Reaffirmation A-00; Reaffirmed: BOT Rep. 28, A-09; Reaffirmed: BOT Rep. 9, I-11; Reaffirmed: Joint CME-CMS Rep., I-12; Reaffirmed: BOT Rep. 16, A-13)