



Pennsylvania MEDICAL SOCIETY®

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Arthur Coccodrilli, Chairman
Independent Regulatory Review Commission
333 Market Street, 14th Floor
Harrisburg, PA 17101

RE: Clinical Nurse Specialist Regulations

Dear Chairman Coccodrilli:

As President of the Pennsylvania Medical Society, I am writing to express concern regarding the final version of the clinical nurse specialist (CNS) regulations approved by the State Board of Nursing September 8, 2008. I specifically want to reiterate my concerns about relevant provisions in the Act 49 of 2007 (Act) which are noticeably absent in the final regulations.

The first provision is Section 8.6 Scope of Practice for Clinical Nurse Specialists. In the Act it reads as follows:

Scope of Practice for Clinical Nurse Specialist.--(a) Nothing in this act shall permit a clinical nurse specialist to engage in the practice of medicine or surgery as defined in the act of December 20, 1985 (P.L.457, No.112), known as the "Medical Practice Act of 1985"; perform acts of medical diagnosis; or prescribe medical therapeutic or corrective measures. The restrictions in this subsection apply to both physical and mental disorders. (b) Nothing in this act shall be construed to limit or prohibit a clinical nurse specialist from engaging in those activities which normally constitute the practice of nursing, including a nursing diagnosis, as defined in section 2.

The regulations need to specifically state that the CNS scope of practice is limited, as expressed in the Act. Having the scope of practice in the regulations provides easier access to the information for anyone wishing to know the scope of practice for a CNS. Placing the scope of practice in the regulation also allows the State Board of Nursing (the Board) to discipline those individuals who violate this provision more effectively, as provided in § 21.831 Penalties for Violations. The Medical Society recommends that the scope of practice for clinical nurse specialist appear in the final regulations.

777 East Park Drive

PO Box 8820

Harrisburg, PA 17105-8820

Tel (717) 558-7750

Fax (717) 558-7840

Email stat@pamedsoc.org

www.pamedsoc.org

The second provision missing from the regulations is the requirement for a CNS to maintain professional liability coverage. This requirement appears in the Act under Section 8.5 (e) which states:

(e) A clinical nurse specialist practicing in this Commonwealth shall maintain a level of professional liability coverage as required for a nonparticipating health care provider under the act of March 20, 2002 (P.L.154, No.13), known as the "Medical Care Availability and Reduction of Error (Mcare) Act," and shall not be eligible to participate in the Medical Care Availability and Reduction of Error (Mcare) Fund.

This particular subsection in the Act is placed under § 8.5 Clinical Nurse Specialist, Qualifications. Again, the thought process here is that there is one place for the CNS to access what they need to practice. The Medical Society recommends that this provision be added to § 21.811 Qualifications for initial certification.

Act 49 legislation was intended to give the CNS the title recognition that they deserve. Keeping some provisions of the Act in the regulations and others out, makes it difficult for a layperson to properly interpret the intention of the legislation. The Medical Society strongly urges the Senate Consumer Protection and Professional Licensure Committee to request the inclusion of the above referenced provisions in the regulations prior to publication as final.

Sincerely,

A handwritten signature in black ink, appearing to read "P. Lund", with a long horizontal flourish extending to the right.

Peter S. Lund, MD, FACS
President

Cc: Teresa Lazo, Board Counsel
State Board of Nursing