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INDEPENDENT REGULATORY
REVIEW COMMISSION

November 12, 2008

Ann Steffanic Board administrator Pennsylvania State Board of Nursing P. O. Box 2649 Harrisburg, PA 17105-2649

Dear Ms. Steffanic;

I am pleased to see that the State Board of Nursing is constantly striving to improve the regulations for Nurse Practitioners in the State of Pennsylvania. I feel we can be very proud of the advances and competency that the Nurse Practitioners in the state of Pennsylvania are exhibiting.

I do have a few comments concerning the recent proposed changes to our regulations.

I believe we need to be careful restricting physicians to only supervising 4 NP's at a time. The state of Pennsylvania (mostly due to increased liability insurance) is losing physicians at a rapid rate each year. Thankfully, Nurse Practitioners are fully capable of filling this void in care.

With this decrease in physicians the need has already arisen that physicians may need to supervise more than four Nurse Practitioners in order to provide adequate care, especially in rural and highly populated urban areas. I do not believe this regulation says anything about supervising at any one time. Many NP's have several jobs with several collaborating physicians, and those physicians have many NP's they collaborate with, but not all at once. This needs to be taken into consideration.

Another issue is the restrictions that are imposed on Nurse Practitioners prescribing Schedule II substances for 72 hours, and Schedule III or IV substances for only 30 days at a time. This interferes with continuity of care, as well as a financial hardship for our patients who have a co-pay for their medications. I work in a college setting where our collaborating physician is physically in the office 3 half days a week (she is always available by phone) but if we get a student referred from the counseling center who needs an anti-anxiety

medication or someone with an acute injury who needs a pain medication and the physician will not be in for a few days, we are restricted in prescribing, which leads to unnecessary anxiety and/or hardship for our students. We also see a fair amount of student's with ADD/ADHD who we presently must schedule with the physician only. This causes a hardship for our students whose, schedules are tight and must sometimes miss class in order to see the physician to get refills on their present medications. We are very particular about our ADD/ADHD students and have policies in place for therapeutic drug screening as we know these are highly abused medications. Being able to prescribe these medications would make it easier and better for our patient population. I have also worked in family practice, physiatrist medicine, and will soon be going to prison health and in every situation these restrictions interfere with good patient care. Please consider all of these factors when changing and revising regulations for Nurse Practitioners.

Sincerely yours, Surely Howhen

Beverly J. S. O'Rourke, CRNP