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INDEPENDENT REGULATORY
REVIEW COMMISSION

2729

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

November 20, 2008

Dear Ms. Steffanic:

Even though I am not a nurse practitioner, I am writing this letter on behalf of all the wonderful nurse practitioners in Pennsylvania. I agree that there should be a removal of the 4:1 nurse practitioner ratio, especially when we are talking about nurse-managed centers. Without nurse practitioners there may not be Planned Parenthood Clinics or free clinics. Without these clinics what would happen to the scared young girls whom are contemplating sexual relations or have already become pregnant and are afraid to go to their parents? They would have no where to turn for guidance. I have two small daughters and when they get to be teenagers, I would rather have them go to a clinic with a nurse practitioner to find some guidance than get into trouble that they may not know how to handle the situation.

With the way the economy is today, why should patients in Pennsylvania have more co-payments to pay when their nurse practitioner has the ability to write a thirty day prescription compared to a seventy-two hour prescription. This makes absolutely no sense to me. Also, when I worked at a local hospital everyone wondered why the emergency room was always overcrowded and we were sending patients to other hospitals without care, here is your answer patients need to go places for pain control when they have no medication and can't get an appointment with their physician for three more days. This also leaves the patient with yet another co-payment. This will also make extra trips to the nurse practitioner for prescriptions, with more co-payments, and a total inconvenience. For some patients this means days off work and days off school which are unnecessary. When my grandfather was dying from cancer I wouldn't have wanted him to worry if he had enough medication everyday and depend on someone else to get a prescription filled because he could not go out of his house.

There is absolutely no reason that a nurse practitioner should not be able to prescribe thirty day medications and ninety day medications. Most insurance companies now make you send in for a ninety day supply of medications. For example, if I go to the drug store and get a thirty day prescription filled twice, the third time I have to pay full price. My insurance will not cover a penny of it.

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I hope that I have made a few good points but I would still like to tell my own story about my nurse practitioner. I found out I was bipolar in 2004. There are many ups and downs with being bipolar. You think things are going well and then all of a sudden something changes, you either have a manic episode or a depressive episode. From day one my nurse practitioner has stood by me every step of the way. I normally see her once a month but there have been times I have needed to see her before that and I get fit right into her schedule. If I call because I need to talk to her about medications or something I feel isn't going right, I can always expect a phone call by the end of the day. If I need medication, she makes sure it is called into the pharmacy the same day. I don't have to wait a day or two, like I have a few times with my family doctor. I am not trying to make physicians sound bad but this has been my experience. If I have had to be admitted to the hospital, she has had me directly admitted so I didn't have to wait in the emergency room. I would never want to lose my nurse practitioner, she is one of the best things that has happened to me and dealing with my bipolar disorder.

Just a couple of known facts: a nurse practitioner usually has a Master's Degree and training in the diagnosis and management of common and complex medical conditions. Nurse practitioners treat both acute and chronic conditions with history taking, physical exams, physical therapy, ordering tests and therapies within their scope of practice. Nurse practitioners focus on patient's conditions as well as the effects of illness on the lives of the patients and their families. With these well known facts it seems to me that any consideration on the Certified Registered Nurse Practitioners rules and regulations should be very simple. Everything should be in favor of the nurse practitioners in regards to changes that are being considered.

In ending, I hope my input has helped you in making a positive outcome that will benefit patient care.

Best Regards, *

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