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729 Harvest Hill Drive
Chalfont, PA 18914
November 22, 2008

INDEPENDENT REGULATORY
REVIEW COMMISSION

Ann Steffanic
Board Administrator
Pennsylvania State Board of Nursing
PO Box 2649
Harrisburg, PA 17105-2649

Dear Ms. Steffanic,

I am writing to you with regard to reference # 16A-5124 CRNP General Revisions. I am a board certified adult nurse practitioner with prescription privileges. I work over 40 hours per week in a large hospital based pain management facility with 2 pain management physicians. My duties primarily entail evaluating patients post procedure and the patients response to prescribed scheduled II, III, and IV medications. I strive to perform these evaluations as well as make the appropriate yet cautious medication adjustments in the allotted time. I am keenly aware of my responsibility not only to my patients but to the physicians that trust my judgment. I am also keenly aware of the limitations that prevent me from performing my responsibilities due to current regulations.

The fact that I can not provide a patient with a prescription for a 30 day supply of schedule II narcotic without a physicians signature interferes significantly with how my patients view my professional opinion as well as perpetuating a dependence on the physician for essentially a signature in order to perform the duties expected of me and that I take very seriously. Not only is the patient /practitioner relationship affected but the patient's treatment can be essentially halted. The abrupt withdrawl of narcotic for as little as a day can result in serious effects to a patients physical, mental and emotional wellbeing. I can only imagine how confusing and frustrating it must be for a patient who, after paying their co pay for the necessary med evaluation with the nurse practitioner in order for narcotic therapy to safely continue, can not leave the office with a 30 day supply of medication because the physician is not physically in the office to sign the prescription. Instead they must take a 3 day supply of their schedule II pain medication to their pharmacy pay the co-payment associated with the prescription and then return to our office for their "full" prescription which then also results in another trip to the pharmacy, an additional pharmaceutical copay and possibly time away from work.

The current regulations work against the needs of patients and prevents nurse practitioners from performing their duties in a cost efficient professional manner. I am asking that the current regulations change allowing nurse practitioners with prescriptive authority to write for a 30 day supply of schedule II medications and 90 day supply of schedule III and IV medications.

Sincerely,

Victoria Newbold APRN-BC

