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INDEPENDENT REGULATORY
REVIEW COMMISSION

Afaf I Meleis, PhD, DrPS(hon), FAAN
Professor of Nursing & Sociology
Margaret Bond Simon Dean of Nursing

December 5, 2008

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

Dear Ms. Steffanic,

On behalf of the University of Pennsylvania School of Nursing, I am writing to express our enthusiastic support of the proposed rule changes 16A-5124: CERTIFIED NURSE PRACTITIONERS GENERAL REVISIONS.

Our School is one of the top Schools of Nursing in the country offering, in the words of one of our program directors, "the most rigorous clinical decision-making education." Yet, our graduates are prevented from practicing at the highest levels of their ability by the current rules of the Commonwealth, leading those who can, to practice in neighboring states such as New Jersey and Delaware where they can use their education, clinical expertise, and clinical judgment to the fullest.

Removing the 4:1 CRNP to physician ratio will enable many more of our graduates to practice in clinics that serve some of the neediest and most vulnerable patients. With the current economic downturn, this population can only be expected to grow at a time when the Commonwealth is already experiencing a shortage of nurses. Continuing the restrictive regulations will put unnecessary pressure on the neediest Pennsylvanians.

The education of nurse practitioners includes 500 hours of clinical experience, at some of the finest hospitals in the nation, and extensive knowledge of pharmacology. But what's most important is that nurse practitioners learn exceptional decision-making skills and clinical judgment for assessment of patients' healthcare needs, for identifying and delivering care, and for mobilizing healthy environments. This education prepares them for evidence-based decision-making.

Pennsylvania ranks fourth in the nation with 6,400 nurse practitioners licensed to provide care. Nurse practitioners are licensed independent registered nurses with specialized

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advanced education and clinical competency who are uniquely positioned to deliver care and manage chronicity.

Therefore it is important for these nurses to be empowered to serve their patients and prescribe Schedule II drugs for 30 and 90-day periods. These drugs help patients and their families manage chronic conditions such as attention deficit disorders which are stressful for families. In most situations, the use of these drugs for such chronic conditions is continuous and requires many refills and authorizations. And, as the nation moves toward drug plans requiring cost-saving 90-day prescriptions, filling prescriptions every five days is an added time and financial burden particularly at a time when many families are suffering job losses and economic problems.

Finally, and most importantly, these regulations reflect a national consensus resulting in a model regulatory act passed by the National Council of State Boards of Nursing in August 2008. All 50 states, including Pennsylvania, have already endorsed these regulations.

It is time nurses were permitted to do all they can do, and know how to do it for the people of Pennsylvania. We strongly encourage passage of these regulations.

Sincerely,


Afaf I. Meleis
Margaret Bond Simon Dean of Nursing