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November 19, 2008

Ms. Ann Steffanic  
Board Administrator  
Pennsylvania State Board of Nursing  
P.O. Box 2649  
Harrisburg, PA 17105-5124

Dr. Ms. Steffanic,

I am writing in support of 16A-5124 CRNP General Provisions.

The removal of the 4:1 NP ratio to physician will help primary care providers and their families increase access to health care as well as being followed in a medical/health care home.

Extend the Nurse Practitioners ability to prescribe Schedule II medications from 72 hours to 30 day prescription. This will help CRNP's fully manage their patients' needs in relations to cancer treatment and care, palliative and hospice care, trauma cases, chronic pain management, behavioral/psych-mental health care.

Currently, our regulations for prescribing schedule II disrupt continuity of care for families and increase economic hardship during this recession. These extra trips to the pharmacy and office and additional co-pays are a hardship for families.

Families especially those living in underserved or rural areas of the state should be permitted to choose their primary care provider whether it is an NP or MD. By having this right to choose, the patient will receive the much needed primary care from the practitioner of their choice. The Nurse Practitioner should be allowed to practice to their full level of education and Scope of Practice.

In order to practice to their full capacity, the removal of the 4:1 NP/MD ratio must be done. Those NP's most affected by this regulation are the federally qualified health clinics (FQHC), nurse managed centers, and NP's who work in Planned Parenthood Clinics or free clinics. Considering the work force dilemma and decline of primary care providers especially in medicine, the nurse practitioner is the best provider of primary care in a variety of settings.

Thank you for your consideration.

Sincerely,

*Siobhan Brennan MSN, CPNP*

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