

MILLARD FILLMORE SURGERY CENTER

Clinical Service _____

Name of Practitioner (Print)

SCOPE OF PRACTICE - NURSE PRACTITIONER

Credentialing period effective for 2 years

PART I: TITLE

In the State of New York, the proper title for a nurse practitioner is N.P. Only persons registered as a nurse practitioner may use this title. Please circle your nurse practitioner specialty for this scope of practice.

- | | | | | |
|---------------|----------------|------------------|---------------|-----------------|
| Adult Health* | College Health | Community Health | Family Health | Gerontology* |
| Neonatology | Ob-Gyn | Oncology | Pediatrics* | Perinatology |
| Psychiatry | School Health | Women’s Health | Acute Care | Palliative Care |

Age Range of Patient Population: (Please check) Pediatric Adult Geriatric

*In circumstances where you are routinely (weekly) treating individuals outside of the Office of the Professions, NYS Education Department nurse practitioner limitations, additional certification in the appropriate specialty must be obtained. (For requirements, refer to www.op.nysed.gov/np.htm.) See page 4 for age range limitations.

PART II: DEFINITION

A nurse practitioner is defined by law as someone who is registered with the New York State Education Department as a nurse practitioner. That person must meet the stipulations of Article 139, Section 6902 of the Education Law as to the requirements of education and training to become a nurse practitioner.

PART III PRACTICE RELATIONSHIPS (excerpted from Section 6902 NYS Education Law)

The New York State Education Law and related regulations provide that nurse practitioners work within a specialty area in collaboration with a qualified physician and in accordance with a written practice agreement and approved practice protocols. The collaborating physician need not be physically present when professional services are rendered. Copies of the practice agreement must be maintained at the practice setting of both the nurse practitioner and the collaborating physician.

Practice protocol information must be submitted to the State Education Department on Form 4NP within 90 days of beginning practice. A copy of Form 4NP shall be maintained in the practitioner’s file.

A physician may not have collaborating agreements with more than four nurse practitioners who do not practice at the same site at which the physician practices. There is no limitation on the number of nurse practitioners who may collaborate with a physician practicing at the same site.

Medical acts, functions, and services provided by the nurse practitioner must be within the scope of practice of the collaborating physician and must be appropriate to the education, training, and experience of the nurse practitioner to which they are assigned. **The scope of practice within a hospital setting is at the discretion of the hospital Board of Directors.**

Part IV: COMPETENCIES:

- 1) **Core Competencies** - (accorded to practitioners that have met the stipulations of Article 139, Section 6902 of the Education Law as to the requirements of education and training to become a nurse practitioner)
 - Obtain comprehensive history
 - Perform physical examination
 - Make daily rounds
 - Order diagnostic tests and devise medical plans based on results with consultation from collaborating physician.
 - Institute appropriate care based on patient’s lab and physical findings.

Nurse Practitioner

Name: _____

2) Specialty Related Cognitive Skills – THE COLLABORATING PHYSICIAN MUST COMPLETE THIS SECTION by checking one of the following:

- _____ a) I, as collaborating physician, have personally observed _____ (applicant's name) in the clinical setting and can attest he/she has the cognitive skills appropriate to the Specialty/Subspecialty of _____.
- _____ b) I, as collaborating physician, **have not** personally observed _____ (applicant's name) in the clinical setting and recommend he/she be given a six (6) month provisional approval with direct supervision at the end of which an attestation as to competence will be required.

3) Specialty Related Procedural Competencies - The applicant must provide written documentation of current competence (as noted below) for all procedures requested:

- a) **Recent graduate** – A list of requested procedures performed within the educational program, signed by a representative of the program, attesting to competence.
- b) **All Others** – A list of requested procedures performed within the previous 2 years.

OR

A signed statement from the collaborating physician confirming that he/she has personally observed the applicant successfully perform the procedure(s) and can attest to his/her competence.

- c) **If neither of the above requirements can be met**, the applicant may submit a separate written request for approval to perform the procedure(s) under direct supervision until such time as the above noted attestation can be submitted. This request must be co-signed by the collaborating physician.

PLEASE NOTE: All subsequent reappointments will require a 2-year case list.

1ST TWO COLUMNS TO BE COMPLETED BY APPLICANT		//COMPLETED BY CLINICAL			
CHIEF					
I AM REQUESTING APPROVAL TO PERFORM THE FOLLOWING PROCEDURES - Must provide documentation of current competence as noted above.	Requested		Approved	*Not Approved	With Direct Supervision

Nurse Practitioner Name: _____

To be completed on reappointment only:

I attest that I have reviewed the Practice Agreement previously submitted. Check one of the following:

- No revisions are necessary; the agreement reflects current practices and protocols.
 Revisions have been made and an updated copy is attached.

Practitioner's Signature

Date

Collaborating Physician's Signature

Date

Collaborating Physician's Name (Print)

Clinical Chief

Date

KEY
<u>NOT APPROVED DUE TO:</u> (Provide Details if necessary)
1) Lack of Documentation
2) Lack of Required Training/Experience
3) Lack of Current Competence

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For Your Information Re: Practice Agreements

The following information is excerpted from the most recent NYS Education Department publication entitled Practice Agreements and Practice Protocols December 2005.

You must establish a practice protocol from the approved list of protocol texts prior to beginning practice and maintain it in the practice settings for you and your collaborating physician where it will be available to the State Education Department for inspection. You must submit Form 4NP-Verification of Practice Protocol to the Office of the Professions no later than 90 days after beginning practice.

Practice agreements must include:

- 1) Provisions for referral and consultation;
- 2) Coverage for emergency absences of either the nurse practitioner or collaborating physician;
- 3) Resolution of disagreements between the nurse practitioner and collaborating physician regarding matters of diagnosis and treatment;
- 4) The review of patient records at least every three months by the collaborating physician;
- 5) May include such other appropriate provisions as determined by the nurse practitioner and collaborating physician.

Practice protocols must identify the area of practice to be performed by the nurse practitioner in collaboration with the physician and reflect accepted standards of nursing and medical practice. Protocols shall include provisions for case management, including diagnosis, treatment, and appropriate recordkeeping by the nurse practitioner; and may include such other provisions determined to be appropriate by the nurse practitioner and collaborating physician.

Questions about practice agreements and practice protocols should be referred to the State Board for Nursing at 518-474-3817 ext. 120, Fax: 518-474-3706, or e-mail: nursebd@mail.nysed.gov.

AGE RANGE LIMITATION REQUIREMENTS: In special circumstances where the practitioner will be treating patients outside of Office of the Professions, NYS Education Department nurse practitioner age range limitations (Pediatric Nurse Practitioner - birth until 18th birthday; Adult Nurse Practitioner - 18th birthday and over; Geriatric Nurse Practitioner - 50th birthday and over), these unique circumstances must be documented in the Practice Agreement.

Please note: The Practice Agreement and practice protocols submitted with your application must meet the criteria delineated above.