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An advisory opinion adopted by AZBN is an interpretation of what the law requires. While an advisory opinion is not law, it is more than a recommendation. In other words, an advisory opinion is an official opinion of AZBN regarding the practice of nursing as it relates to the functions of nursing. Facility policies may restrict practice further in their setting and/or require additional expectations related to competency, validation, training, and supervision to assure the safety of their patient population and or decrease risk.

**OPINION: NURSE PRACTITIONER
DESCRIPTION OF ROLES AND
FUNCTIONS**

APPROVED DATE: 6/03

REVISED DATE: 01/09

ORIGINATING COMMITTEE:

ADVANCED PRACTICE COMMITTEE

ADVISORY OPINION

NURSE PRACTITIONER DESCRIPTION OF ROLES AND FUNCTIONS

- Nurse Practitioners are registered nurses who have acquired the formal education, extended knowledge base and clinical skills beyond the registered nurse level to practice in an advanced role as direct health care providers.
- Nurse Practitioners are authorized to practice by the Board in a specialty area via their registered nurse licensure and advanced practice certification in a specialty area.
- Nurse Practitioners may perform additional skills within their specialty area for which they have been prepared through post-graduate education and training in accordance with R4-19-508 C.
- Nurse Practitioners provide health care services within their specialty area to individuals, families and groups including but not limited to admission, management of care, discharge and follow up, in ambulatory, acute, long term and other health care settings.
- Nurse Practitioners utilize critical judgment in the performance of comprehensive health assessments, differential medical diagnosis including ordering, conducting, and interpreting diagnostic and laboratory tests, and the prescribing of pharmacologic and non-pharmacologic treatments in the direct management of acute and chronic illness and disease.
- Nurse Practitioners serve in multiple roles, including but not limited to, direct providers of care, health care researchers, consultants, and educators.
- Nurse Practitioners may work in independent practice.
- Nurse Practitioners work collaboratively with other health care professionals when appropriate.

RATIONALE: Per A.R.S. § 32-1601(15), a nurse practitioner is a professional nurse (RN) who is certified by the board and has an expanded scope of practice within a specialty area (e.g., family, pediatric, acute care, adult, etc.) that includes:

- Assessing clients, synthesizing and analyzing data and understanding and applying principles of health care at an advanced level;
- Managing the physical and psychosocial health status of clients;
- Analyzing multiple sources of data, identifying alternative possibilities as to the nature of a health care problem and selecting, implementing and evaluating appropriate treatment;

- Making independent decisions in solving complex client care problems;
- Diagnosing, performing diagnostic and therapeutic procedures, prescribing, administering and dispensing therapeutic measures, including legend drugs, medical devices and controlled substances within the scope of registered nurse practitioner practice on meeting the requirements established by the board;
- Recognizing the limits of the nurse's knowledge and experience, planning for situations beyond the nurse's knowledge and expertise and consulting with or referring clients to other health care providers when appropriate;
- Delegating to a medical assistant pursuant to section 32-1456;
- Performing additional acts that require education and training as prescribed by the board and that are recognized by the nursing profession as proper to be performed by a nurse practitioner.

Per A.A.C. R4-19-508, in addition to the scope of practice permitted a registered nurse, a registered nurse practitioner, under A.R.S. §§ 32-1601(15) and 32-1606(B)(12), may perform the following acts within the limits of the specialty area of certification:

- Examine a patient and establish a medical diagnosis by client history, physical examination, and other criteria;
- For a patient who requires the services of a health care facility:
 - Admit the patient to the facility,
 - Manage the care the patient receives in the facility, and
 - Discharge the patient from the facility;
- Order and interpret laboratory, radiographic, and other diagnostic tests, and perform those tests that the RNP is qualified to perform;
- Identify, develop, implement, and evaluate a plan of care for a patient to promote, maintain, and restore health;
- Perform therapeutic procedures that the RNP is qualified to perform;
- Prescribe treatments;
- If authorized under R4-19-511, prescribe and dispense drugs and devices; and
- Perform additional acts that the RNP is qualified to perform.

A nurse practitioner shall only provide health care services within the nurse practitioner's scope of practice for which the RNP is educationally prepared and for which competency has been established and maintained. Educational preparation means academic coursework or continuing education activities that include both theory and supervised clinical practice.

A nurse practitioner shall refer a patient to a physician or another health care provider if the referral will protect the health and welfare of the patient and consult with a physician and other health care providers if a situation or condition occurs in a patient that is beyond the RNP's knowledge and experience.

Per A.A.C. R4-19-101, "Collaborate" is defined as to establish a relationship for consultation or referral with one or more licensed physicians on an as-needed basis. Direct or on-site supervision of the activities of a registered nurse practitioner by the collaborating physician is not required.

GENERAL REQUIREMENTS

A nurse practitioner is certified by the board as a nurse practitioner; has completed a nurse practitioner education program approved or recognized by the board; if applying for certification on or after January 1, 2001, has a master of science degree with a major in nursing or a master's degree in a health-related area; and if applying for certification after July 1, 2004, holds national certification from a national



certifying body recognized by the board or provides proof of competence if a certifying examination is not available. (A.R.S. § 32-1601(15); R4-19-505 (B))

REFERENCES

Scope and Standards of Advanced Practice Registered Nursing, American Nurses Association, 1996.

Scope of Practice for Nurse Practitioners, American Academy of Nurse Practitioners, 1998.

A.R.S. § 32-1601(15)

A.A.C. R4-19-101

A.A.C. R4-19-505

A.A.C. R4-19-508