

August 22, 2008

**ESTABLISHING MEDICATION PRESCRIBING AUTHORITY FOR
ADVANCED PRACTICE NURSES**

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides guidance for establishment of medication prescribing authority for Advanced Practice Nurses (APNs).

2. BACKGROUND

a. It is Department of Veterans Affairs (VA) policy to provide high quality health care to its patients. VA can provide high quality care through the proper utilization of a variety of well qualified and appropriately credentialed health care providers. Consistent with the Food, Drug, and Cosmetic Act; applicable regulations; and informal Food and Drug Administration guidance, the Under Secretary for Health has determined that for non-controlled substances, VA will exercise its authority in defining inpatient and outpatient medication prescribing privileges for APNs.

b. The health care practitioner's state of licensure or registration must permit the health care practitioner to prescribe controlled substances.

c. **Definitions of Advanced Practice Nurses (APNs).** The generic term "Advanced Practice Nurses" includes Clinical Nurse Specialists, Nurse Anesthetists, Nurse Midwives, and Nurse Practitioners who have Masters or Doctoral degrees. However, reference to APNs in this Directive is restricted to Clinical Nurse Specialists (CNSs) and Nurse Practitioners (NPs).

3. POLICY: It is VHA policy that medication prescribing privileges for controlled substances can only be granted in accordance with the Federal Controlled Substances Act and applicable regulations contained in Title 21 Code of Federal Regulations (CFR) Part 1300.

4. ACTION: Each facility Director is responsible for:

a. Ensuring that APNs, who prescribe controlled substances, are authorized to do so by their state of licensure or registration.

b. Ensuring that APNs comply with the limitations and restrictions on that authority.

c. Developing appropriate policies and procedures to facilitate the effective and efficient implementation of the medication prescribing authority identified in this Directive, including practices to ensure that APNs are prescribing within their identified scope of practice. These practices may include monthly reviews of the provider's prescriptions or orders. **NOTE:** *The prescribing practices of APNs are included in the medication use evaluation process.*

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d. Ensuring that each APN is credentialed using VetPro.

e. Ensuring that privileging or scope of practice for each APN is approved by the appropriate facility-based authorizing body (i.e., Clinical Executive Board, Medical Executive Committee, and Nurse Professional Standard Board) and the Chief of Staff and the Nurse Executive.

f. Conducting a feasibility assessment as to the facility's ability to comply with the relevant controlled substances prescribing authority of each of its practitioners.

g. Ensuring APN inpatient pharmaceutical orders and outpatient prescriptions, that are not specifically identified in an individual scope of practice, require a co-signature by a physician prior to these orders being filled.

h. Ensuring that the following guidelines provided for APNs is implemented:

(1) A locally-determined scope of practice is to be prepared for each APN. The scope of practice statement must:

(a) Identify the individual's prescriptive authority,

(b) Describe the routine and non-routine professional duties, and

(c) Describe the general areas of responsibility to be performed.

***NOTE:** Because State laws cannot regulate the activities of the Federal Government, or its employees when the employees are acting within the scope of their Federal employment,(except by congressional consent), State laws and regulations relating to medication orders and prescriptions for non-controlled substances do not affect scope of practice statements under this Directive.*

(2) To be granted prescriptive authority, an APN must:

(a) Hold a current licensure as a Registered Nurse in any state,

(b) Have completed graduate level pharmacology coursework,

(c) Have a masters or doctoral degree, and

(d) Have and maintain full and current certification from the American Nurses Credentialing Center or other nationally-recognized certifying body.

5. REFERENCES: VA Handbook 5005/14, Part II Staffing, Appendix G6: RN Qualification Standard.

August 28, 2008

6. FOLLOW-UP RESPONSIBILITY: Chief Nursing Officer (108) is responsible for the contents of this Directive. Questions may be referred to (202) 461-6700.

7. RESCISSIONS: VHA Directive 2003-004 is rescinded. This VHA Directive expires August 31, 2013.

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