Purpose:
To delineate the guidelines for practice of nurse practitioners within the scope of services provided by the Alliance.

Policy:
The Alliance requires that all Alliance Nurse Practitioners shall adhere to the guidelines described in this policy.

Definitions:
Nurse Practitioner:
A Nurse Practitioner is currently licensed as a Registered Nurse in California and is currently certified by a licensed Nurse Practitioner Program which has met the requirements set forth and described in the Nursing Practice Act, Business and Professional Code, Chapter 6, Nursing, Article 8, Nurse Practitioners.

Procedures:
Nurse Practitioner Guidelines
A. The Nurse Practitioner is authorized to do the following patient-related activities within the scope of practice:
   1. Take a patient's medical history and perform a physical examination for any presenting problem.
   2. Diagnose and treat common primary care medical problems
   3. Whenever necessary, perform life-sustaining emergency
   4. Order specific laboratory studies and x-rays, and other studies as appropriate for that patient.
   5. Collect specimens as indicated for additional tests.
   6. Perform pertinent laboratory tests.
   7. Perform any other procedure for which they have applied for privileges and which have been granted or approved with proctoring.
   8. Counsel patients and their families on health promotion, diagnoses and management alternatives.
10. Verbally transmit any prescription, except Schedule II controlled substances, to a pharmacist. This is in accordance with the Pharmacy Law, Business and Professions Code, Section 4036.2.

11. The Nurse Practitioner may furnish drugs and devices in accordance with the Nursing Practice Act, Section 2836.1 - 2836.3 if the following conditions are met:
   a. The Nurse Practitioner possesses a current Furnishing Number issued by the California Board of Registered Nursing.
   b. The Nurse Practitioner Furnishing Number is included on the prescription and the Consulting Physician's name appears on the prescription for labeling purposes.
   c. Appropriate educational information is provided to the patient prior to furnishing the drugs or devices.
   d. The Nurse Practitioner may not furnish controlled substances.

B. The patient must be informed that the provider is a mid-level clinician, and be given the opportunity to request care by a physician should the patient desire it.

C. The Nurse Practitioner will seek physician consultation in a timely manner for the following situations, and any others he/she deems appropriate:
   1. Any conditions which have failed to respond to appropriate management or do not follow classic diagnostic patterns.
   2. Before performing any invasive procedures.
   3. All emergency situations after initial care has been started.

D. The supervising physician shall be a physician licensed by the State of California. This physician will review the findings of the patient's history and physical examination and supervise the Nurse Practitioner performing approved tasks or procedures. The Nurse Practitioner will be responsible to communicate with the supervising physician regarding patient management and seek assistance or additional instructions in patient management. The supervising physician will be available for consultation or assistance at all times, either by physical presence or electronic communications. One supervising physician will be available for every two mid-level clinicians working in an area at the same time.
E. The Mid-Level Practitioner will be authorized to diagnose and treat common medical problems according to accepted criteria and management, including, but not limited to the following:

**Health care maintenance and promotion, all ages**

**Dermatology**
- Acne Vulgarize
- Atomic dermatitis
- Paronychia
- Contact dermatitis
- Dermatophytosis
- Pediculosis/Scabies
- Moniliasis
- Seborrheic dermatitis
- Stomatitis/apthous ulcer
- Verruca
- Cellulitis/Folliculitis
- Insect bites
- Drug reactions

**Eye**
- Blepharitis
- Hordeolum
- Pterygia/Pinguecula
- Healing corneal abrasion

**ENT/Respiratory**
- Otitis media
- Seros Otitis
- Dental pain
- URI
- Allergic rhinitis
- Foreign body: ear & nose, easily removable
- Anterior epistaxis
- Pneumonia & bronchitis w/o cyanosis or tachypnea
- Stable COPD
- Hiccups
- TB exposure

Wound care
1st/2nd degree burns, involving <5% of BSA
Simple laceration
Herpes zoster/Shingles
Viral exanthem
Milia
Seborrheic keratosis
Impetigo
Pityriasis rosea
Cholasma
Pruritis
Psoriasis
Conjunctivitis
Conjunctival hemorrhage
Dacarocystitis
Chalazion
Otitis externa
Pharyngitis
Laryngitis
Cerumen impaction
Mononucleosis
Sinusitis
Acute asthma, mild
+PPD/CXR
Thrush
### Cardiovascular
- Hypertension - other than malignant
- Non-invasive management of varicose veins
- Functional heart murmurs
- Stable, non-incapacitating angina
- Stable, controlled arrhythmia
- Stable, controlled congestive heart failure
- Hyperlipidemia
- Peripheral vascular disease without significant distal ischemia

### Gastrointestinal
- Gastritis or PUD, without significant hemorrhage
- Dyspepsia
- Esophagitis
- Hiatal hernia
- Viral hepatitis
- Gastroenteritis/acute diarrhea w/o fever or needing IV hydration
- Functional bowel syndrome
- Constipation (organic lesion ruled out)
- Medical management of anal fissure and hemorrhoids

### Genitourinary
- All uncomplicated STDs/exposure
- Cystitis/UTI
- Herpes Genitalis (non-pregnant)
- Condyloma
- Pyelonephritis, mild

### Gynecology
- Amenorrhea
- PMS
- Contraception
- Cervicitis
- Hirsuitism
- Dysmenorrhea, simple
- Evaluation of cystocele/rectocele, mild
- Dysfunctional uterine bleeding, without orthostasis or significant anemia
- Fibrocystic breast disease, without isolated mass
- Pregnancy: Routine prenatal care
Musculoskeletal
Osteoarthritis Sprain, stable, simple
Low back pain, chronic or acute Gout
Splint application to sprain Tendinitis
Bursitis Muscle spasm
Stable or responsive inflammatory (non-infectious) arthritis

Hematology
Iron deficiency anemia, nutritional Pernicious anemia, stable
Thalassemia minor Folate deficiency, stable

Endocrine/Metabolic
Diabetes, stable, controlled
Hyper/hypothyroid states, stable, controlled
Exogenous obesity
Menopausal symptoms

Neurology
Headaches, tension Migraines
Seizure disorder, stable, controlled Peripheral neuropathy

Pediatrics
Well child care Feeding problems
Enuresis Minor illness

Psychiatry
Simple anxiety
Adjustment reaction, brief, uncomplicated

Emergency Care
Whenever necessary, the Mid-Level Practitioner may perform life-sustaining measures. This includes, but is not limited to:
- Establishing and maintaining airway
- Cardiopulmonary resuscitation
- Control of hemorrhage by external pressure or tourniquet
- Start IV line
- Suture wound
- Injection of adrenaline for asthma, anaphylactic shock or laryngeal edema
- Injection of Atropine for severe bradycardia
- Administration of oxygen for acute dyspnea
• Administration of Narcan for suspected narcotic overdose
• Administration of IV glucose for suspected insulin reaction
• Splint skeletal emergencies

**Inpatient Care (Mid-Level will need hospital privileges)**
• Perform history and physical examination
• Develop treatment plan in consultation with supervising physician
• Assist with surgical procedures
• Develop discharge plan in consultation with supervising physician

References:
Alliance Policies:
Contractual: Medi-Cal Contract Exhibit A, Attachment 9
Regulatory: Title 22 CCR Section 51345.1
Pharmacy Law, Business and Professions Code, Section 4036.2
Legislative: Nursing Practice Act, Business and Professional Code, Chapter 6, Nursing, Article 8, Nurse Practitioners.
Nursing Practice Act, Business and Professional Code, Chapter 6, Nursing, Article 8, Nurse Practitioners, Section 2836.1 - 2836.3
MMCD Policy Letter:

**Lines of Business This Policy Applies To:**
- [x] Medi-Cal
- [x] Healthy Families
- [x] Healthy Kids Santa Cruz
- [x] Healthy Kids Merced
- [x] Alliance Care IHSS
- [x] Access for Infants and Mothers
- [x] Individual Conversion
- [x] Santa Cruz County LIHP Program
- [x] Monterey County LIHP Program
- [x] Merced County LIHP Program

**Revision History:**
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