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## **Physicians and Nurse Practitioners in Primary Care: Collaboration or Competition?**

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## Physicians and Nurse Practitioners in Primary Care: Collaboration or Competition?

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An important evolution in nursing over the past thirty years has been the emergence of graduate level advanced practice nurses (APN), both as clinical specialists in acute care and as nurse practitioners. In response to concerns related to the cost of health care in the United States, and to the inadequate access to care for those currently under-served, most health care reform proposals recommend that APNs serve a major role in primary care, focusing on health promotion, illness prevention and management of common health problems. Even without government-introduced changes, nurse practitioners are currently being recruited to community-based health centers and managed care settings.

Recently, the Department of Nursing in the College of Allied Health Sciences at TJU, in conjunction with faculty of Jefferson Medical College, received state approval to implement a family nurse practitioner program focusing on a collaborative practice model. Collaborative practice, described as interactions between nurses and physicians that draw upon the knowledge of both professionals to improve patient care outcomes has been promoted extensively. However, as state legislatures across the country have expanded the legal authority of nurse practitioners to receive reimbursement and write prescriptions, the consequences of independent practice by nurses in primary care has been actively debated.<sup>3,4</sup> The controversy of independent versus collaborative practice is a heated one.

The Primary Care Task Force of the Pennsylvania State Generalist Initiative at TJU, which includes representatives from Jefferson Medical College (JMC) and the Department of Nursing, sponsored a dinner conference on this controversial theme on April 14, 1994. JMC generalist faculty, volunteer staff and graduate trainees, nursing faculty and medical and graduate nursing students attended. The program was partially funded by Wyeth-Ayerst.

Panelists included Sallye B. Shaw, RN, MN, American College of Obstetrics and Gynecology, John E. Ott, MD, George Washington University Health Plan, and Angelo P. Giardino, MD, Leonard Davis Institute of Health Economics at the University of Pennsylvania.

Ms. Shaw has directed the development of criteria for managed collaborative practice for the American College of Obstetrics and Gynecology. Her formal responsibilities within the college are reflective of that organization's belief that their members can only remain competitive in health care reform through collaborative practice with advanced practice nurses.

Dr. Ott is a pediatrician who worked with Dr. Henry Silver at the University of Colorado in the development of the Child Health Associate program during the 1960's. As a managed care administrator, Dr. Ott described his institution's efforts toward development of educational programs for mid-level professionals and their utilization in his institution. While he recommends collaborative practice and education for health professionals with shared responsibility and accountability, current practice does not meet his goal. He believes that traditional gender specific

roles are barriers to collaborative practice and perpetuate competition over collaboration.

Dr. Giardino observed that collaboration with nurses is not routinely a priority with physicians. As the primary investigator on a funded project to promote interdisciplinary education of medical and nursing students, he identified at least two hurdles to collaborative education-different academic calendars for the two disciplines and a lack of financial commitment from institutions. While Dr. Giordano believes that educational experiences combining nursing and medical students encourage collaborative practice, he recommended that any collaborative efforts be implemented with nursing students and medical students who are at the same level of experience.

The panelists were in agreement that collaborative practice is a mechanism to improve patient outcomes and a way to enhance the strength of each profession. The need for more research to evaluate outcomes for patients managed by nurse practitioners, independently or in collaboration with physicians, was made clear. In addition, the need to increase understanding among physicians of how nurse practitioners are trained and evaluated was also demonstrated.

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