Department of Obstetrics/Gynecology Nurse Practitioner Protocol

I **Background - Scope of Practice**

Nurse practitioners employed by Hospital practice under a collaborative practice agreement which permits them to provide primary and specialty care in collaboration with attending physicians. This document outlines the general responsibilities, as well as the general and specialty-specific practice guidelines for mime practitioners.

П **Oualifications**

The nurse practitioner will:

- Maintain licensure as a Nurse Practitioner with prescriptive privileges in Rhode
- .b. Hold National certification as a clinical nurse specialist/nurse practitioner; Maintain malpractice insurance in an amount recommended by the Medical Staff Executive Committee and approved by the Board of Trustees.

III. General Responsibilities.

- Adhere to national, regional, and institutional standards of care for Nurse Practitioners
 Develop and maintain professional skills in general women's health care and/or specific to the subspecialty area in which they work; b.
- Serve as a clinical resource to enhance the development of other staff members; c:.
- d. Attend and participate in meetings and conferences pertaining to patient care needs and services;
- Participate in clinical research studies as appropriate; e.
- f. Participate in current community outreach and in the planning and development of new services;

Preserve and protect patients' rights of confidentiality.

IV. General Practice Guidelines

The nurse practitioner will:

- Perform clinical assessments (history and physical examinations);
- Perform psychosocial assessments;
- Assess medical data and recommend immediate, intermediate, and long-term plan of care:
- Order laboratory tests and diagnostic procedures;
- Prescribe medications listed on the Women and Infants' Nurse Practitioner Formulary and/or the medications specific to the sub-specialty practice (see Appendices);

Perform diagnostic procedures and administer treatments commonly performed in the assessment and treatment of patients (see Appendices);

- * Consult with a collaborating physician on a case-by-case basis for difficult, complicated, or problem cases, or for any cases deemed appropriate by either the nurse practitioner or the collaborating physician;
- Respond to referrals and consultations from other physicians, practices, or clinics;

* Obtain consults from other medical specialties when appropriate;

- * Order inpatient medications, laboratory tests, and procedures when appropriate (this applies only to those NPs with inpatient responsibilities. In suck cases, the NP must be under the supervision of a collaborating physician, who must co-sign the NP's, order within 24 hours);
- * Utilize current hospital practice guidelines and other authoritative resources.

V. Specialty Practice Guidelines

Sub-specialty clinical areas permit nurse practitioners to perform additional teats and procedures in collaboration with physicians. These are outlined in the appendices: Appendix A: Urogynecology

Appendix B: Triage

VI. Authority

This Collaborative Practice Agreement is in accordance with the delineation of privileges approved by the Department of Obstetrics and Gynecology, the Medical Staff and the

of Trustees