

Joan A. Sheppard, DDS
Chair: Oral Health Practitioner Work Group
Minnesota Department of Health.
625 North Robert St.
PO Box 64975
St. Paul, MN 55164-0975.

Re: The Nurse Practitioner in the Field of Medicine

Dear Dr. Sheppard,

I have read Dr Lloyd Wallin's letter to you of September 2, 2008, and wish to comment on several of the points he made.

Dr. Wallin states "It is common knowledge that fewer and fewer physicians are going into Family Practice Medicine and are instead specializing. As a direct result, the Family Practice Doctor has become a minority in a sea of medical specialists." I believe that his statement about the current trend toward specialization is as relevant to the practice of primary care Pediatrics and Internal Medicine as it is to Family Medicine.

Dr. Wallin likens the Family Practice physician to General Dentists, but the General Dentist, he notes, "is definitely not in short supply." I do question his statement that General Dentists are not in short supply. They may not be at this moment in time, but, based on statistics that I have heard from dentists, dentists are retiring at a faster rate (7:5) than they are matriculating. Hence, if these statistics are accurate, there will soon be an absolute shortage of dentists nationwide, a situation made worse by geographic maldistribution. In addition, general dentists generally feel uncomfortable with 1 and 2 year olds so they tell parents to start dental care at age 3 or older, despite knowing about the policy advanced in 2006 by the American Academies of Pediatrics and Pediatric Dentistry that every child should have a dental home by age 1.

Dr. Wallin goes on to say that "the lesson to be learned is that the Medical Nurse Practitioner was created out of real need to help Family Practice Physicians perform routine medical procedures such as blood pressure testing, verification of records and medical injections." The tasks he describes are those of a Certified Medical Assistant (CMA) or a Licensed Practical Nurse (LPN), not a Nurse Practitioner. Nurse Practitioners perform the same tasks as do primary care physicians: taking a medical history, performing a full-body, unclothed, physical examination, making assessments, i.e., diagnoses, and developing a care plan (writing orders and prescriptions). They provide comprehensive as well as episodic care, as do physicians. The Nurse Practitioner movement began in the late 60's after the Medicare law was passed when suddenly there were millions of individuals who became eligible for health care and too few internists to care for them. The Family Practice movement began later. I

ran Community-University Health Care Center (CUHCC (and FQHC)) for 15 years. I had as many nurse practitioners employed as physicians. Each cared for a panel of patients and provided total primary care (way more than checking blood pressures, verifying records, and giving injections; in fact; they did not give injections, they did not check blood pressures, and they only verified records in order to develop a better sense of the patient's condition). They worked independently of physicians, though they did consult with the physicians, as **colleagues**, if they had questions, but those consultations were infrequent. They had prescribing authority so they could write prescriptions without need for a physician's signature.

Dr. Wallin's statement that "the Medical Nurse Practitioner's work is also performed just a room or two down the hall from the Family Practice Physician who is always supervising their performance"; is only partly true. Though they may be one or two doors apart, nurse practitioners are not supervised. They work WITH, not FOR, physicians and consult as needed.

Published outcome studies have shown that nurse practitioners outcomes are as good as physicians', they are preferred by patients, and they get sued far less frequently. If I were to start a clinic today, I would hire primarily nurse practitioners, with either a family medicine physician or a pediatrician and an internist as back up should the nurse practitioner have questions.

I hope that you will read this letter into the record.

Sincerely yours,

A handwritten signature in cursive script that reads "Amos Deinard". The signature is written in black ink and is positioned above the typed name and title.

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