

# Advanced Practice Registered Nursing Prescribing Agreements and Collaborative Management

The Minnesota Nurse Practice Act (*Minnesota Statutes*, sections 148.171-148.285) establishes scopes of practice of Advanced Practice Registered Nurses (APRN).

## Current Scope of Practice

An APRN is an individual licensed as a registered nurse by the board and certified by a national nurse certification organization acceptable to the board to practice as a nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, or nurse-midwife (Subd. 3), and includes:

- functioning as a direct care provider, case manager, consultant, educator, and researcher.
- accepting referrals from, consulting with, cooperating with, or referring to all other types of health care providers, including but not limited to physicians, chiropractors, podiatrists, and dentists (Subd. 13).

**Nurse practitioner (CNP)** practice includes:

- Diagnosing, directly managing, and preventing acute and chronic illness and diseases, and
- Promoting wellness, including nonpharmacologic treatment (Subd. 11).

**Clinical nurse specialist (CNS)** practice includes:

- Diagnosing disease,
- Providing nonpharmacologic treatment (including psychotherapy),
- Promoting wellness and
- Preventing illness and disease (Subd. 5).

**Certified registered nurse anesthetists (CRNA)** practice includes:

Provision of anesthesia care and related services, including selecting, obtaining and administering drugs and therapeutic devices to facilitate diagnostic, therapeutic, and surgical procedures upon request, assignment, or referral by a patient's physician, dentist, or podiatrist (Subd. 21).

**Nurse-midwife (CNM)** practice includes:

Management of women's primary health care, focusing on pregnancy, childbirth, the postpartum period, care of the newborn, and the family planning and gynecological needs of women (Subd. 10).

## Collaborative Management

APRNs must practice within a health care system that provides for consultation, collaborative management, and referral as indicated by the health status of the patient (Subd. 13).

"Collaborative management" is defined as a mutually agreed upon plan between an APRN and one or more physicians or surgeons that designates the scope of collaboration necessary to manage the care of patients. The APRN and physician/surgeon(s) must have experience in providing care to patients with the same or similar medical problems, with exceptions for CRNAs<sup>1</sup> (Subd. 6).

## Prescribing Agreements

Chapter 148.235 establishes conditions under which APRNs may prescribe or administer drugs.

---

<sup>1</sup> CRNAs may provide anesthesia in collaboration with physicians, surgeons, podiatrists or dentists if services are provided at the same hospital, clinic or health care setting as the collaborating provider.

# Advanced Practice Registered Nursing Prescribing Agreements and Collaborative Management

---

**Certified nurse midwives** may prescribe and administer drugs and therapeutic devices. The law does not require a written agreement with a physician or surgeon (Subd. 1)

**Nurse practitioners** and **CRNAs** who have a written agreement with a physician based on standards established by the Minnesota Nurses Association (MNA) and the Minnesota Medical Association (MMA) that defines the delegated responsibilities related to the prescription of drugs and therapeutic devices, may prescribe and administer drugs and therapeutic devices within the scope of the written agreement and within practice as an APRN (Subd. 2 and Subd. 2a). **Prescribing does not include recommending or administering a drug or therapeutic device perioperatively by a certified registered nurse anesthetist (MS 148.171, Subd. 16).** Written agreements must be maintained at the primary practice site of the APRN and the collaborating physician (MS 148.235, Subd 6).

The MNA and MMA *Memorandum of Understanding (MOU)* sets forth the minimum standards for a prescribing agreement. Any agreement must include:

- A general description of the practice setting
- Each category of drugs and therapeutic devices the APRN can prescribe and any specific limitations to prescribing
- Minimum frequencies and schedules for review of prescribing practices
- The APRN and physician must jointly review, sign, and date their agreement at least annually

Model agreements are available online at the MMA <http://www.mmaonline.net> and MNA websites: <http://www.mnnurses.org/>

**Clinical nurse specialists** who meet minimum pharmacology education requirements may prescribe and administer drugs within the scope of a written prescribing agreement with a physician based on standards established by the MNA and the MMA (Subd. 4a). **Clinical nurse specialists in psychiatric and mental health nursing** may prescribe under a written prescribing agreement with a psychiatrist or other physician based on standards established in a separate *Memorandum of Understanding* developed by the MNA and the Minnesota Psychiatric Association (Subd. 4).

An advanced practice registered nurse, who is authorized by law to prescribe, may also dispense drugs described in the written agreement (Subd 4b).

## Prescribing under protocol

**Registered nurses** may implement a protocol that does not reference a specific patient and results in a prescription of a legend drug that has been predetermined and delegated by a licensed practitioner<sup>2</sup> when caring for a patient whose condition falls within the protocol and the protocol specifies the circumstances under which the drug is to be prescribed or administered (Subd. 8). A nurse may deliver vaccines under similar protocols (Subd. 9).

---

<sup>2</sup> “Licensed practitioner” is means a licensed doctor of medicine, licensed doctor of osteopathy duly licensed to practice medicine, licensed doctor of dentistry, licensed doctor of optometry, licensed podiatrist, or licensed veterinarian. For purposes of sections 151.15, subdivision 4, 151.37, subdivision 2, paragraph (b), and 151.461, "practitioner" also means a physician assistant authorized to prescribe, dispense, and administer under chapter 147A, or an advanced practice nurse authorized to prescribe, dispense, and administer under section 148.235. (M.S. § 151.01, subd.23)