

Standard Care Arrangement Pretend Family Practice

Section I. STATEMENT OF SERVICES

The Certified Nurse Practitioner (CNP) is an Advanced Practice Nurse (APN) that provides preventive and primary care services and evaluates and promotes patient wellness. Clinical practice areas include acute care and subspecialty care as well as outpatient care. CNP activities may include education, research and consultation.

Section II. INCORPORATION OF NEW TECHNOLOGY OR NEW PROCEDURES.

The CNP will identify new technology/procedures that are appropriate to the APN's clinical practice in consultation with the collaborating physician. Continuing education events and conferences will be utilized as part of the process. A plan for acquisition of the new skills will be agreed upon by the collaborating parties. Documentation of competency in the new technology or procedures will be maintained by the CNP or the Medical Staff Office.

Section III. QUALITY ASSURANCE PROVISIONS

1. Criteria for Referral/Consultation of a Client:

- A. Request from a patient to see the collaborating or other physician;
- B. A patient whose clinical condition is unusual, who is not making satisfactory progress, or whose condition is unresponsive to the plan of care;
- C. Patients with complicated diagnoses and/or multifaceted treatment outside of parameters established by the CNP and the collaborating physician;
- D. Any other reason as determined by the CNP and/or the collaborating physician(s).

2. Parameters for Specialist Referral

A patient determined by the CNP or the collaborating physician(s) to require specialty expertise:

- The attending physician will be notified by telephone contact or spoken with directly, and the resulting plan of care will be documented in the patient's record. The care outcomes of the referral should be shared by the CNP and the collaborating physician.

3. Procedure for Regular Review of Charts and Referrals to Other Health Professionals

In accordance with rules 4723-8-04 and 4723-8-05 of the Ohio Administrative Code, a random selection of patient records and patient referrals will be selected at least semi-annually for review by the CNP and the collaborating physician. Care outcomes will be reviewed by the CNP and the collaborating physician.

Section IV. PRESCRIPTIVE AUTHORITY

The APN who holds a valid certification to prescribe (including an externship CTP) may prescribe in accordance with Sections 4723.48 through 4723.485, Ohio Revised Code, the rules of the Board of Nursing, and within the formulary made available by the Ohio Board of Nursing.

1. Availability of Timely and Direct Evaluation of the patient by the physician:

The collaborating physician or designated physician colleague shall be notified by telephone contact or spoken to directly to discuss the patient in order to ensure timely and direct evaluation of the patient within 24 hours.

2. Formulary Compliance

A. The CNP who holds a Certificate to Prescribe (including an externship CTP) may prescribe medicines as allowed by the formulary established by the Committee on Prescriptive Governance (CPG) and made available by the Ohio Board of Nursing:

B. The CNP may prescribe medications for off-label use if the following criteria are met:

- i. The off-label indication(s) must be consistent with the CNP Scope of Practice and clinical specialty/subspecialty practice;
- ii. The drug and off-label indication(s) are included in the attached and dated addendum to this document;
- iii. The off-label indication(s) is/are supported by standard clinical practice and literature;
- iv. The signature of the CNP and the collaborating physician(s) indicates agreement to the off-label indication(s) stated in the addendum to this SCA.

C. Prescribing Parameters:

- i. The CNP may prescribe, within their scope of practice, as indicated by educational preparation and training.
- ii. The signature of the CNP and the collaborating physician(s) on the SCA, implies acceptance of the formulary as written.

- iii. Any restrictions to the selected drugs within the formulary as agreed upon by the CNP and the physician(s) shall be indicated in the addendum to the SCA.
- iv. Specific drugs, such as opiates, antidepressants, and steroids, must be reviewed as indicated in the formulary.

3. Quality Assurance Provisions Related to Prescriptive Authority:

During the externship period of the CTP, the CNP and the collaborating physician will review a random sample of written prescriptions at least bi-monthly. Thereafter, the CNP and the collaborating physician will review a random sample of written prescriptions at least semi-annually.

Section V.

1. Policy Care of Infants and Children to Age Three

The CNP who, within their education and certification, provides services to pediatric patients (neonatal period through infancy, childhood, and adolescence), will follow the American Academy of Pediatrics' and/or American Academy of Family Physicians' standards for the schedule and content of well-child visits. Pediatric patients will be seen alternately by the CNP and a collaborating physician during the first 3 years of life for all well child and sick child visits.

2. Policy for Coverage of Absences/Emergencies

In the event of a planned or unplanned absence by the CNP scheduled patients will be seen by another CNP or by a collaborating physician or designees. If this is not possible, scheduled patients will be contacted and rescheduled.

If the client requires further attention, he or she will be directed to the appropriate healthy care facility and health care provider.

Section VI. POLICY FOR RESOLUTION OF CLINICAL DISAGREEMENTS

Should a disagreement arise between the CNP and the collaborating physician(s) regarding diagnosis or treatment, one or more of the following means for resolution shall be followed:

- Consult with an uninvolved physician and/or CNP colleague..
- Refer to current professional literature appropriate to the area in question.
- Consult with a specialist in the area in question.
- Appropriate institutional chain-of-command procedures will be adhered to as necessary or required.

Section VII. ARRANGEMENT REGARDING REIMBURSEMENT

Current state and federal laws governing reimbursement and billing will be adhered to.

Section VIII. REVIEW AND RENEWAL OF THE STANDARD OF CARE AGREEMENT (SCA).

The SCA will be reviewed annually. Amendments will be made prior to the renewal of the agreement.

Section IX. REVIEW AND RENEWAL OF HOURLY WAGE AND BENEFITS

The hourly wage and benefits will be reviewed annually. Amendments will be made prior to the renewal of the agreement.

Section X. ADDENDUM/ATTACHMENTS

Selected off formulary medication used to treat conditions not approved by the FDA, but in collaboration with the physician.

- D. Trazadone: prescribed for sleep
- E. Celebrex: prescribed for headaches
- F. Prozac: prescribed for PMS
- G. Sinemet: prescribed for restless leg syndrome
- H. Neurontin: prescribed for neuropathic pain

Pursuant to Ohio Revised Code Section 4723.431, the undersigned have agreed to the terms and condition of the Standard Care Arrangement. This Standard Care Arrangement contains all necessary provisions, required by law, and any changes or amendments to the Standard Care Arrangement must be agreed to by the undersigned, in writing, and incorporated as part of the Standard Care Arrangement.

Collaborating Parties

CNP:

Kendra L. Newland, CNP, MSN, RN
123 My Road
Lucas, OH 44843
419-xxx-xxxx

Signature

Date

Physician:

John Doe, MD
123 Smith Lane
Smithville, OH 44000
123-321-1233

Signature

Date