

A critical link

By Virginia Beggs, A.R.N.P.

Nearly 100 nurse practitioners at DHMC hold faculty appointments at Dartmouth Medical School. That fact surprises some people when they hear it. Then they're full of questions.

Questions such as "What is a nurse practitioner?" A nurse practitioner (NP) is a registered nurse trained in diagnosing and treating illnesses and providing routine health care. In New Hampshire, nurse practitioners receive the credential of Advanced Registered Nurse Practitioner (A.R.N.P.). Most NPs have a graduate degree, with one to two years of school beyond a B.S.N. (a bachelor's of science in nursing), and they work with a variety of patients in different hospital and clinic settings. Historically, NPs provided just primary and episodic care, but today they may also provide very specialized care, such as occupational medicine, pain management, and cancer or neurologic care.

Tasks: While NPs perform many "traditional" nursing duties—coordinating care, counseling patients, and providing psychological support—they also perform tasks that only doctors used to do. NPs can now conduct physical exams, manage chronic health conditions such as diabetes and hypertension, refer patients to doctors and community resources, order and interpret diagnostic tests, write prescriptions, and provide health education. Nurse practitioners at DHMC include nurse-anesthetists and nurse-midwives, as well as those specializing in family, adult, pediatric, and women's health.

Now that hospital stays are shorter, patients do most of their recovering at home, away from the professional eyes of the inpatient-care team. Nurse practitioners coordinate patient care during and after hospital stays. They are valuable members of the health-care team and participate in rounds with residents, medical students, and attending physicians. Although there is an ever-changing mix of resident physicians, the NPs, as "permanent" members of the team, are able to provide knowledgeable and consistent communication among staff, patients, and families.

Empathic skills: When a patient leaves the hospital, a nurse practitioner is often involved in the discharge process and provides follow-up phone contact. Dr. Thomas Colacchio, president of the Dartmouth-Hitchcock Clinic and a professor of surgery, says that nurse practitioners provide a critical link between the physician and the patient, and that NPs' empathic skills enable them to appreciate and address patients' emotional and spiritual as well as physical needs.

What else do nurse practitioners do? NPs are principal or coprincipal investigators in funded research projects. They assist with all kinds of research by collecting data, coordinating studies, and pro-



SIZANNE DEJOHN

When a patient leaves the hospital, a nurse practitioner is often involved in the discharge process.

viding hands-on care. At the Norris Cotton Cancer Center, for example, 15 NPs are collaborating with oncologists to evaluate and manage patients undergoing cancer treatment. Dr. Marshall Baker, DMS '98, now a surgical resident at Northwestern, tells how a nurse practitioner "spent countless hours explaining database analysis. It was hard-core, practically based, one-to-one teaching and represented the best small-group learning experience that I had in medical school. She was—more than any other person—responsible for my ongoing

interest in medical outcomes and research in general."

Nurse practitioners are also leaders of quality improvement teams and participate in collaborative efforts to identify clinical problems and recommend solutions that have led to improvements in patient care and satisfaction. NPs also participate—and hold leadership positions—in national nursing research organizations, and are invited to speak at community and professional meetings at local, regional, and national levels. Such efforts have promoted DHMC as a leader in supporting the role of advanced practice nursing.

Teachers: How are nurse practitioners involved as DMS faculty? They teach in the classroom and also serve as informal clinical mentors. A recent article in the *Journal of Perinatology*, for example, highlighted an innovative teaching method used in DHMC's neonatal intensive care unit; first-year pediatric residents there are teamed with seasoned NPs in a program that is described as a way to ensure consistency and high-quality supervision of educational experiences.

NPs can serve as role models, demonstrating coping skills, humanism, communication with families, and a collaborative team approach to health care. Nurse practitioners at Kendal, a retirement community, teach housestaff and medical students about physical assessment and history-taking in the context of a population with multiple chronic illnesses. Dr. David Nierenberg, associate dean for medical education, admits to a bias in favor of nurse practitioners as educators. His own experience included a student rotation with nurse-midwives who, he recalls, were kind, caring teachers. Dr. Worth Parker, director of graduate medical education, says that DHMC's reputation for clinical excellence is enhanced by the NPs in its midst.

So the next time you encounter an A.R.N.P., you might say, "You're a nurse practitioner, I know what you do!" ■

Virginia Beggs, director of DHMC's Shared Decision-Making Center, is a nurse practitioner in cardiothoracic surgery and also holds a master's degree from Dartmouth's program in the evaluative clinical sciences. Coauthoring this essay with her was Elizabeth McCabe, A.R.N.P., a nurse practitioner in the Comprehensive Breast Program. Other contributors to it included A.R.N.P.'s Lynne Wolfe, Karen Skalla, and Ellen Smith.