



100 Years of Nursing Advocacy
1904-2004

**Testimony to
Prescription Drug Usage Study Committee
October 21, 2009**

Co-chairs: Senator Amanda Ragan and Representative Beth Wessel-Kroeschell

On behalf of the Iowa Nurses Association we are responding to the request for a summary to the question: **“What does your organization propose doing to contain the cost of, provide access to, and improve the quality of prescription drugs?”** (We had anticipated the legislative committee’s discussion to focus on problems arising from inappropriate medication use in the health care system which we thought was the committee charge.)

What is the role of the Registered Nurse and ARNP in regard to prescription drugs?

Medication administration is a large part of the role of the registered nurse in providing direct patient care. Nurses assess the following: 1) whether the medication is correct for the person’s diagnosis; 2) whether the dose is appropriate for the patient, and 3) what is the reaction to the medication, is there a side effect or adverse drug reaction, etc. These all demonstrate the cognitive thought process that an RN uses and are in concert with the Institute for Healthcare Improvement recommendations to use the “five rights” to reduce medication errors and include: the right patient, the right drug, the right dose, the right route, and the right time. When a medication error does occur during the administration of a medication, there is often action to blame the nurse and accuse her/him of not completing the five rights. Even using the “five rights”, medication errors can occur, i.e. two patients in the same room with similar first names and common last names may be mistaken for each other (Bill Smith vs. Billy Smith). System and technological improvements are also important to ensure medication safety to avoid inappropriate medication use.

Advanced registered nurse practitioners (ARNPs) are first registered nurses with advanced and specialized education. In Iowa ARNPs have full prescriptive authority and therefore improve the access to medications. *Iowa Code Chapter 147.107(8) Notwithstanding subsection 1, but subject to the limitations contained in subsections 2 and 3, a registered nurse who is licensed and registered as an advanced registered nurse practitioner and who qualifies for and is registered in a recognized nursing specialty may prescribe substances or devices, including controlled substances or devices, if the nurse is engaged in the practice of a nursing specialty regulated under rules adopted by the board of nursing in consultation with the board of medicine and the board of pharmacy.*

Contain the cost of prescription drugs...

Registered nurses are educated to be attuned to the whole person, not just the unique presenting health problem. The human response to a health problem may be much more fluid and variable and may have a great effect on the individual’s ability to overcome the initial medical problem. With a blend of physiology and psychology, nurses build on their understanding of the disease and illness process to promote the restoration and maintenance of health in their clients.

As a cost containment measure, prescribing ARNPs may start with generic medication prescriptions as long as the generic will work for a given patient. This supports the long term use of medications to moderate the illness. Relief from symptoms can allow a return to a higher level of functioning in work, social and emotional life. If the generic is not effective, more expensive name brand medications may be essential to effectively treat the patient.

Provide access to prescription drugs...

Iowa Code Chapter 147.107 (3) DRUG DISPENSING, SUPPLYING, AND PRESCRIBING Allows for: *A physician assistant or registered nurse may supply, when pharmacist services are not reasonably available or when it is in the best interests of the patient, on the direct order of the supervising physician, a quantity of properly packaged and labeled prescription drugs, controlled substances, or contraceptive devices necessary to complete a course of therapy. However, a remote clinic, staffed by a physician assistant or registered nurse, where pharmacy services are not reasonably available, shall secure the regular advice and consultation of a pharmacist regarding the distribution, storage, and appropriate use of such drugs, substances, and devices.*

Improve quality of prescription drugs...

The improvement of quality of prescription drugs is beyond the practice of the profession of a registered nurse.