

NP/PA Standardized Procedures for Family Community Medicine 2016

Section	Major proposed edits	Comment
NP/PA preamble: III. Circumstances Under Which NP/PA May Perform Function: B. Supervision	Initiation or change of medication other than those listed or approved by the formulary (ies). <i>Note: this also appears in the Medicine SPs.</i>	Old verbiage implied that physician consult is required for any medication requiring a prior authorization/TAR
Protocols #1, 2, and 3	Removal of "Health Care Maintenance" from title	Unnecessary and confusing
Protocol #3 Prenatal Care 2. Patient conditions requiring physician consultation a. Maternal Conditions	<ul style="list-style-type: none"> • Consultation required for selected maternal infections: added HIV to list • Consultation required for BP greater than 130/80 or if significant change from baseline in systolic or diastolic BP. • Addition: Refer to HROB for preterm birth or if undocumented or classical scar with previous C/S, or if 2+ C/S. • Follow up intervals: Every 4 weeks until 28wks gest age (instead of q8); Every 2 wks from 28 to 36 (instead of q4) 	Various edits proposed by Pooja Mittal, MD reviewed by Lydia Leung, MD and reviewers including Kara Myers, CNM
Protocol #5 Furnishing Medications/Drug Orders	Addition: "Schedule II-III controlled substances may be ordered for, but not limited to, the following conditions: patients presenting with acute and chronic pain and patients presenting with ADHD or other mental health-related disorders requiring the use of controlled substance II medications."	Wording needs to include this type of patient specific protocol.
Protocol # 6: Procedure: Surface Trauma and Wound Care	Reappointment competency to require 1 procedure and 1 chart review every 2 yrs	Previous was 2/2 every 2 yrs. Adjusted to align w CPC
Protocol #8: Procedure: Incision and Drainage of Abscess	Reappointment competency to require 1 procedure and 1 chart review every 2 yrs	Previous was 2/2 every 2 yrs. Adjusted to align w CPC and MED

Protocol #10: Procedure: Nail Debridement and Protocol #11: Procedure: Nail Removal/Matrisectomy	Separated protocols, but maintained original proctoring and reappointment numbers	Allows for nail debridement without hospital consent/time out process. Used ortho template.
Protocol #12: Procedure: IUD Insertion	<ul style="list-style-type: none"> Removed "IUD removal from this protocol". Additional language referencing newer IUDs. "Acute pelvic inflammatory disease or current behavior suggestive of a high risk for pelvic inflammatory disease." Replaced with "Known or suspected PID or cervical infection" 	IUD removal does not need SP. Propose no change to current proctoring/reappointment numbers
Protocol #14: Procedure: Contraceptive Implant Insertion	Separated implant insertion and removal protocols.	Propose proctoring/reappointment numbers adjusted to align with CPC: Proctoring: 2 insertions for new provider and 1 insertion for experienced provider. Reappointment: 4 insertions and 1 chart review every 2 years.
Protocol #15 Contraceptive Implant Removal.	Separated implant insertion and removal protocols.	Propose proctoring/reappointment numbers adjusted to align with CPC: Proctoring: 6 procedures for new provider and 2 procedures for experienced provider. Reappointment: 8 procedures and 2 chart review every 2 years.
Tattoo Removal	Removed this Protocol/Procedure	No longer being performed in FCM.

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