

SUBCHAPTER 32M - APPROVAL OF NURSE PRACTITIONERS

21 NCAC 32M .0101 DEFINITIONS

The following definitions apply to this Subchapter:

- (1) "Approval to Practice" means authorization by the Joint Subcommittee of the Medical Board and the Board of Nursing for a nurse practitioner to practice within her or his area of educational preparation and certification under a collaborative practice agreement with a physician licensed by the Medical Board in accordance with this Subchapter.
- (2) "Back-up Supervising Physician" means a physician licensed by the Medical Board who, by signing an agreement with the nurse practitioner and the primary supervising physician(s), shall provide supervision, collaboration, consultation, and evaluation of medical acts by the nurse practitioner in accordance with the collaborative practice agreement when the primary supervising physician is not available. Back-up supervision shall be in compliance with the following:
 - (a) The signed and dated agreements for each back-up supervising physician(s) shall be maintained at each practice site.
 - (b) A physician in a graduate medical education program, whether fully licensed or holding only a resident's training license, shall not be named as a back-up supervising physician.
 - (c) A fully licensed physician in a graduate medical education program who is also practicing in a non-training situation and has a signed collaborative practice agreement with the nurse practitioner and the primary supervising physician may be a back-up supervising physician for a nurse practitioner in the non-training situation.
- (3) "Board" means the North Carolina Board of Nursing.
- (4) "Collaborative practice agreement" means the arrangement for nurse practitioner-physician that provides for the continuous availability to each other for ongoing supervision, consultation, collaboration, referral, and evaluation of care provided by the nurse practitioner.
- (5) "Emergency" means a state of emergency as defined in G.S. 166A-19.3 and proclaimed by the Governor or by the General Assembly.
- (6) "Joint Subcommittee" means the subcommittee composed of members of the Board and members of the Medical Board to whom responsibility is given by G.S. 90-8.2 and G.S. 90-171.23(b)(14) to develop rules to govern the performance of medical acts by nurse practitioners in North Carolina.
- (7) "Medical Board" means the North Carolina Medical Board.
- (8) "National Credentialing Body" means one of the following credentialing bodies that offers certification and re-certification in the nurse practitioner's specialty area of practice:
 - (a) American Nurses Credentialing Center (ANCC);
 - (b) American Academy of Nurse Practitioners National Certification Board (AANPNCB);
 - (c) American Association of Critical Care Nurses Certification Corporation (AACN);
 - (d) National Certification Corporation of the Obstetric, Gynecologic and Neonatal Nursing Specialties (NCC); and
 - (e) the Pediatric Nursing Certification Board (PNCB).
- (9) "Nurse Practitioner" or "NP" means a registered nurse who holds an active unencumbered license approved to practice consistent with the nurse's area of nurse practitioner academic educational preparation and national certification under an agreement with a physician licensed by the Medical Board for ongoing supervision, consultation, collaboration, and evaluation of medical acts performed. Such medical acts are in addition to those nursing acts performed by virtue of registered nurse (RN) licensure. The NP is held accountable under the RN license for those nursing acts that he or she may perform.
- (10) "Primary Supervising Physician" means a physician with an active unencumbered license with the Medical Board who shall provide on-going supervision, collaboration, consultation, and evaluation of the medical acts performed by the nurse practitioner as defined in the collaborative practice agreement. Supervision shall be in compliance with the following:
 - (a) The primary supervising physician shall assure both Boards that the nurse practitioner is qualified to perform those medical acts described in the collaborative practice agreement.
 - (b) A physician in a graduate medical education program, whether fully licensed or holding only a resident's training license, shall not be named as a primary supervising physician.

- (c) A fully licensed physician in a graduate medical education program who is also practicing in a non-training situation may supervise a nurse practitioner in the non-training situation.
- (11) "Registration" means authorization for a registered nurse to use the title nurse practitioner in accordance with this Subchapter.
- (12) "Supervision" means the physician's function of overseeing medical acts performed by the nurse practitioner.
- (13) "Volunteer Approval" means approval to practice consistent with this Subchapter except without expectation of direct or indirect compensation or payment (monetary, in kind, or otherwise) to the nurse practitioner.

History Note: Authority G.S. 90-5.1(a)(3); 90-8.1; 90-8.2; 90-18(c)(14); 90-18.2;
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Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1, 2016;
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