



Independent Practice of Advanced Practice Nurses: ICEP Urges Opposition to HB 421 and SB 1315

The Illinois College of Emergency Physicians (ICEP) strongly opposes HB 421 and SB 1315, bills that eliminates the requirement for physician oversight for advanced practice nurses and would allow advanced practice nurses to provide the same level of care as a physician, independent of any physician collaboration.

ICEP recommends that HB 421 and SB 1315 be defeated and the current standard of requiring physician oversight is maintained for advanced practice nurses.

- Advanced practice nurses (APNs) do not have the training or experience that would warrant independent practice. Physicians have seven or more years of post-graduate education and more than 10,000 hours of clinical experience. Most APNs **have just two to three years post-graduate training and less clinical experience** than is obtained in the first year of a three-year medical residency that physicians must complete before they are allowed to independently practice.
- It is not in the best interest for patients to allow non-physician practitioners to expand their scope of practice. Under the bill, APNs would be allowed to **provide the same services as physicians**, with surgery as the *only* exception. The bill would allow full authority to prescribe drugs including Schedule II drugs such as narcotics. It would also allow APNs to administer anesthesia services, provide obstetrical care, and manage chronic diseases.
- Independent practice by APNs puts patient safety and quality of care at risk. Education and training requirements in the health care setting exist to ensure that the patient is properly treated. The complex and critically important health care services provided by physician specialists require significant training and education — **requirements that have not been met by APN education** but are, in fact, *mandated by law for physicians* to complete.
- While APNs serve an important health care role, including in crowded emergency departments often overburdened with an influx of patients, the utilization of APNs in emergency departments and other hospital settings is effective because these providers **must work under physician supervision**.
- Independent practice of APNs will not improve access to quality care and **does not solve the physician shortage**. Research demonstrates that even in states where independent practice of APNs is allowed, physicians and nurses continue to work in the same areas — and there continue to be *shortages of both physicians and APNs in underserved areas*.

Protect patient safety and ensure the highest standard of care by opposing HB 421 and SB 1315 and maintaining a requirement for physician supervision for advanced practice nurses in Illinois.