Advanced Practice in Neonatal Nursing
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ABSTRACT. The advanced practice neonatal nurse’s participation in newborn care continues to be accepted and supported by the American Academy of Pediatrics. Recognized categories of advanced practice neonatal nurse are the neonatal clinical nurse specialist and the neonatal nurse practitioner. Training and credentialing requirements have been updated recently and are endorsed in this revised statement.

ABBREVIATIONS. APNN, advanced practice neonatal nurse; NNP, neonatal nurse practitioner; NCNS, neonatal clinical nurse specialist.

The American Academy of Pediatrics recognizes the expanding role of the advanced practice neonatal nurse (APNN) and endorses the current training and credentialing process.1,2 The APNN is prepared, according to nationally recognized standards, by the completion of an educational program of study and supervised practice beyond the level of basic nursing. As of January 1, 2000, this preparation must include the attainment of a master’s degree in the nursing specialty. Graduates from previous years who are currently credentialed APNNs or certificate (nongraduate)-prepared neonatal nurse practitioners (NNPs) should be allowed to maintain their practice and are encouraged to complete a formal graduate education.3 Included in the category of APNN1,2 are:

- Neonatal clinical nurse specialist (NCNS): a registered nurse with a master’s degree who, through study and supervised practice at the graduate level, has become expert in the theory and practice of neonatal nursing. Responsibilities of the NCNS include serving as a resource for neonatal nurses, NNP, and other care providers; establishing and evaluating standards of patient care within a unit; assessing and identifying educational needs of the family, nursery, and community; designing and implementing appropriate educational programs on the basis of identified needs; providing consultation to others in the nursery, hospital, or community; and initiating research projects, participating in data collection, and implementing changes on the basis of research findings.

- NNP: a registered nurse with clinical expertise in neonatal nursing who has obtained a master’s degree or completed an educational program of study and supervised practice beyond the level of basic nursing in the specialty with supervised clinical experience in the management of newborns and their families. The NNP manages a caseload of neonatal patients with consultation, collaboration, and medical supervision by a physician. Using the acquired knowledge of pathophysiology, pharmacology, and physiology, the NNP may exercise independent judgment in the assessment and diagnosis of infants and in the performance of certain delegated procedures. As an APNN, the NNP is also involved in education, consultation, and research.

- Neonatal nurse clinician: the term neonatal nurse clinician is imprecise and should no longer be used.

The spectrum of duties performed by the APNN will vary among institutions and may be determined by state regulations. Each of these roles currently requires advanced education and a master’s degree. Nationally recognized certification examinations exist for each category. Credentialing to practice is currently governed by individual states. Inpatient care privileges are granted by the individual institution. Each institution needs to develop a procedure for the initial granting and subsequent maintenance of privileges, ensuring that the proper professional credentials are in place. That procedure is best developed by the collaborative efforts of the nursing administration and the medical staff governing body.

The American Academy of Pediatrics recommends the following:

1. Medical care provided by the APNN in the newborn intensive care unit should be supervised by a neonatologist. In basic and specialty nursery units, a board-certified pediatrician with special interest and experience in neonatal medicine may provide supervision.
2. The APNN should collaborate and consult with other health care professionals.
3. The APNN should be certified by a nationally recognized organization and should maintain that certification.
4. The APNN should maintain clinical expertise and knowledge of current therapy by participating in continuing education and other scholarly activities.

5. The APNN should comply with hospital policy regarding credentialing and recredentialing.4

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REFERENCES


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