

# Advanced Registered Nurse Practitioner Care

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December, 1999

## Happy Holidays!

by Jerri Henry  
President

As President of our organization, I want to wish everyone *peace* and *happiness* this Holiday season. May the renewal of the Holidays and approaching new Millennium inspire us as we work to advocate for our profession and for our patients.

Your Legislative Committee is working hard to gear up for the upcoming Legislative Session beginning in January. We are **committed** to getting key items of legislation passed in 2000 including completion of prescriptive authority. What a great New Year's gift that would be for all of us! Please jump on our **grassroots** bandwagon and do your part by devoting 15 minutes to write or email your legislator (find their address at [www.leg.wa.gov](http://www.leg.wa.gov)) to encourage their support on our prescriptive authority bill. Don't forget to attend our Nurse Legislative Day January 24, 2000 in Olympia.

## Have You Joined ARNPs United?

by Jerri Henry

At the September conference many of you told me you simply forgot to send in that check to join or renew your dues. *Your professional organization needs your support now* to keep in the black for the New Year! Your dues are 100% tax deductible and will go directly to pay for our Lobbyist and minor administrative costs. Your investment will benefit you and your colleagues. Already a member?... Get two of your colleagues to join! For information contact us through our web site at [www.nurse.org/awa/au](http://www.nurse.org/awa/au).

## HCFA Medicare Reimbursement Final Rule

by Jerri Henry

In Washington, DC, our national affiliate, the American College of Nurse Practitioners (ACNP) continues to represent us through meetings with HCFA, as well as monitoring and getting involved in issues facing NP's. On November 2, 1999 HCFA published the final rule governing Medicare Reimbursement for NP's and other providers. These rules were adopted as supported by ACNP. This includes a 5.4% increase in fees paid in 2000 as compared to the 2.3% in 1999. The main issue was NP qualifications to be able to directly bill Medicare Part B. As expected, the qualifications will progressively increase during the next 3 years and is summarized as follows:

Until **January 1, 2001**, an NP must meet the qualifications of either option 1 or 2.

**Option # 1:** NP must be a RN authorized by the state in which services are furnished to practice as an NP and be certified as an NP.

**Option # 2:** NP must be a RN authorized by the state in which services are furnished to practice as an NP and have a Medicare billing number as a NP by **December 31, 2000**.

As of **January 1, 2003**, NP's applying for a Medicare billing number for the first time must possess a Master Degree in Nursing and meet the qualifications outlined in Option #1.

Need information on obtaining a Medicare Number? Contact the WA State Medicare Part B Carrier (Blue-Cross/Blue Shield of North Dakota) at phone: 701-282-1100 or fax: 701-282-1002. To find out more check out the Medicare information on the ACNP web site at <http://www.nurse.org/acnp>.

## ARNPs United and WSNA Affiliation

by Patti Varley

As many of you already know the affiliate relationship between WSNA and ARNP's United (AU) was reestablished over a year ago. As a result we have been able to work together in areas such as the WSNA Summit meeting, Nurse Lobby Day, sharing representation on each other Boards, etc. AU board took the annual meeting in Sept. as an opportunity to discuss with the membership at large the current opinions of the membership regarding this relationship as it stands now and visions of the future. This is a summary of the feelings expressed by the membership. The overwhelming majority feels positive about the reestablishment of a relationship between the two organizations. They encouraged us to continue the efforts of working collaboratively, strengthening our relationship, forming a stronger alliance and better communication between the groups. It was clear however, that at this point, remaining a separate and independent organization is also important. This allows us to remain very focused on the issues impacting Nurse Practitioners. The board would like to thank all of you who attended the annual meeting for your input and energy... We will continue to work on strengthening our relationship with WSNA and will continue to seek and value your input.

## I-695 and ARNPs

by Michael Gregory

There is no question that I-695 will have a profound effect on the coming legislative session and therefore an impact on our prescriptive authority bill. However, we do have a bill that is largely "agreed upon" and a promise that our bill will be heard in the House Health Care Committee. Challenges that we ARNPs need to meet are to contact our legislators to educate them on our role and our need for access to Schedule II-IV controlled substances and to dialog with our physician colleagues to enlist their support. Suggestions and a form letter for physician support

are available from the ARNPs United Legislative Committee at 253.480.1035 or au@nurse.org.

### Ramipril Significantly Reduces Risks of Death, MI & Stroke

This is an early release of the New England Journal of Medicine article "Effects of an Angiotensin-Converting-Enzyme Inhibitor, Ramipril, on Death from Cardiovascular Causes, Myocardial Infarction, and Stroke in High-Risk Patients" to be published January 20, 2000.

A total of 9297 high-risk patients (55 years of age or older) who had evidence of vascular disease or diabetes plus one other cardiovascular risk factor and who were not known to have a low ejection fraction or heart failure were randomly assigned to receive ramipril (10 mg per day orally) or matching placebo for a mean of five years. The primary outcome was a composite of myocardial infarction, stroke, or death from cardiovascular causes.

The findings demonstrated that treatment with ramipril (Altace), a long-acting angiotensin-converting-enzyme inhibitor significantly reduced the rates of:

Risk of:	Ramipril	Placebo	Relative Risk	P
CV Death	6.1%	8.1%	0.75	<0.001
MI	9.9%	12.2%	0.80	<0.001
Stroke	3.4%	4.9%	0.69	<0.001
Death from any cause	10.4%	12.2%	0.84	=0.006
Revascularization procedures	16.0%	18.6%	0.84	<0.001
Cardiac Arrest	0.8%	1.2%	0.63	=0.03
Heart Failure	7.4%	9.4%	0.78	<0.001
Diabetes related complications	6.2%	7.4%	0.84	=0.03

The authors conclude that ramipril significantly reduces the rates of death, myocardial infarction, and stroke in a broad range of high-risk patients who are not known to have a low ejection fraction or heart failure. They also note that treating 1000 patients with ramipril for four years prevents about 150 events in approximately 70 patients.

From NEJM <http://www.nejm.org/content/yusuf/1.asp>

### Nationwide Recall of Five Lots of Vancercil Double Strength Inhalation Aerosol

Schering/Key Pharmaceuticals is voluntarily conducting a nationwide recall of five lots of Vancercil 84 mcg Double Strength (beclomethasone dipropionate, 84 mcg) Inhalation Aerosol Convenience Pack, a prescription medication for the maintenance treatment of asthma. The company is taking this action because it has determined that a number of canisters in the five lots listed below may not contain active drug. Schering/Key is advising that the matter should be considered very serious and one that merits immediate attention. Patients using an affected canister without active drug would be expected to experience a lack of effectiveness which may result in increased

asthma symptoms, need for other asthma medications, emergency room visits or hospitalization. Because of the nature of the problem, a patient cannot determine whether they have an affected metered dose inhaler (MDI) just by actuating their MDI. An affected MDI may appear to emit an aerosol even if it does not contain active drug.

The recall affects lots Nos. 9-DMT-157, 9-DMT-158, 9-DMT-160, 9-DMT-161 and 9-DMT-163, which were distributed by Schering/Key in November 1999. The inhalers have an expiration date of July 2000. The lot number and expiration date appear on either the top or bottom flaps of the package and on the canister label. No other lots of Vancercil 84 mcg Double Strength Inhalation Aerosol Convenience Pack are involved. The recall is being conducted with the knowledge of the U.S. Food and Drug Administration. There have been no reported medical adverse events related to the recalled lots.

The recall is being extended to individual patients, pharmacies and direct-account customers such as wholesalers and chain drug stores. Direct-account customers have been asked to return any units from the subject lots on hand and to request that their customers return any units from the subject lots to them. Patients who have had prescriptions for Vancercil 84 mcg Double Strength Inhalation Aerosol Convenience Pack filled since November 1999 are advised to check the lot numbers and return any inhalers from the subject lots to the pharmacy for free replacement. Any questions regarding the recall should be directed to the Recall Services Center (toll free) at 1.800.621.9760.

The cause of the problem has been identified as inadequate batch start-up practices that occurred for a short period during filling of the subject lots. The company has taken corrective actions to prevent a recurrence.

### Relenza Approved for Influenza Type A & B

The FDA has approved Relenza (zanamivir), an inhaled anti-viral drug, for adults and adolescents aged 12 years and older for the treatment of uncomplicated influenza virus. This product is approved to treat type A and B influenza.

Effectiveness was demonstrated only in patients who started treatment within 2 days of symptoms. Relenza appears less effective in patients who do not have elevated temperature or severe symptoms.

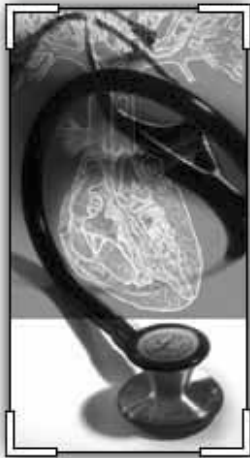
Safety and effectiveness have not been established for the drug's use in preventing influenza.

This product has not been shown to be effective, and may carry risk, in patients with severe or decompensated asthma or chronic obstructive pulmonary disease. Bronchospasm was documented in some patients with mild or moderate asthma following administration of zanamivir. Any patient who develops bronchospasm should stop the drug and call their health care provider. Patients with underlying respiratory disease should be instructed to have a fast-acting inhaled bronchodilator available when they are being treated with zanamivir.

# Order Littmann™ Stethoscopes Online!

Featured on [www.nurse.net](http://www.nurse.net) are the 3M™ Littmann™ Master Cardiology Stethoscope and the Master Cardiology III Stethoscope. You can find information on these and other fine Littmann Stethoscopes at [www.nurse.net/stethoscopes](http://www.nurse.net/stethoscopes)

Order either a Master Cardiology or a Master Cardiology III and receive a free Littmann™ Cardiac Auscultation Audio CD and Study Guide valued at \$45. The CD and study guide comprise a valuable educational tool, designed to help learn or review the fundamentals of cardiac auscultation. Covers basic information on heart sounds and the anatomy and physiology of their production. It includes over 33 murmurs, normal and abnormal heart sounds to help practitioners recognize and differentiate sounds.



## Cardiology III

The exceptional versatility of an adult and pediatric-sided stethoscope.

Outstanding acoustics and superior versatility are combined in the technology of the 3M™ Littmann™ Cardiology III Stethoscope. Featured is both an adult and

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## Master Cardiology

The ultimate acoustical stethoscope. Patented single-sided "Master" chestpiece with tunable diaphragm lets you monitor both high and low frequencies without having to turn over the chestpiece.

Features hand-crafted, solid stainless steel chestpiece, two-tubes-in-one design, and lightweight comfortable headset, nonchill rim, double-leaf binaural spring, and patented 3M™ Littmann™ Snap-tight Soft-sealing Eartips.

The 3M™ Littmann™ Master Cardiology Stethoscope provides the best acoustics that Littmann stethoscopes offer with a significant improvement in low-frequency response. With the unique Master chestpiece, you'll get diagnostic information accurately and efficiently.

The patented tunable diaphragm alternates between low and high frequencies without turning over the chestpiece. This allows for same-site auscultation. Two tubes are incorporated into a single-tube design that eliminates noise artifacts created from two tubes rubbing together. Includes a flexible patented special procedures adapter designed for auscultation of difficult body sites (such as ankles, neck, wrists, etc.), pediatric and emaciated patients. The headset assembly is permanently set at an anatomically correct angle. This assures a proper fit, minimizes air leaks and prevents the headset from loosening over time.

Each 3M™ Littmann™ Master Cardiology stethoscope comes with a seven-year warranty.

Every Master Cardiology or  
Cardiology III Stethoscope  
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You can order using the form on the back of this page, on-line at <http://www.nurse.net/stethoscopes> or by calling 1.800.467.7701

# Littmann Stethoscope Order Form

Quantity	Item	Select Desired Color	Cost Each	Item Total
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	<b>Cardiology III 22"</b>	Blk	\$141	\$
	<b>Cardiology III 27"</b>	Blk Bur Nav HGr	\$141	\$
	<b>Heart Sounds CD (only with above)</b>	Silver	Free	Free
	<b>Master Classic II 22"</b>	Blk	\$79	\$
	<b>Master Classic II 27"</b>	Blk Bur Nav Gry Tea	\$79	\$
	<b>Classic II SE 22"</b>	Blk	\$64	\$
	<b>Classic II SE 28"</b>	Blk Bur Nav Gry Tea RBl Mag Lav	\$64	\$
	<b>Pediatric 28"</b>	Blk Red Pnk LBl	\$72	\$
	<b>Infant 28"</b>	Red Pnk Tea	\$72	\$
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Washington Residents add 8.6% sales				\$
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\* Shipping via UPS Ground in the continental United States. For other shipping options please contact us.

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## Product Information:

<http://www.fda.gov/cder/foi/label/1999/21036lbl.pdf>

From the CDER.

### FDA Approves New Drug to Reduce Risk of Stroke

The FDA has approved a new drug, Aggrenox, which combines two active ingredients — aspirin and dipyridamole — into one pill to reduce the risk of stroke for patients who have already had transient ischemic attacks or completed ischemic strokes due to blood clots in the brain.

Each year, about 500,000 people in the United States have strokes, with approximately 150,000 dying as a result. Of these strokes, 400,000 are ischemic, or caused by a blood clot reducing or blocking blood flow to the brain. The rest are hemorrhagic strokes, caused by bleeding into and around the brain.

The pivotal clinical trial of the new drug, which will be marketed as Aggrenox by Boehringer Ingelheim Pharmaceuticals, Inc., was a double-blinded, placebo controlled, 24-month study, referred to as the European Stroke Prevention Study 2 (ESPS2). The study included 6,602 patients who had an ischemic stroke (76%) or transient ischemic attack (TIA, 24%) within three months prior to entry. The results showed the combination reduced the risk of stroke by 36.8% and the cumulative risk of stroke and death by 24.2% compared to placebo.

The study also compared the use of the combination to the single use of each active ingredient and results showed the combination was more favorable for reducing risk of stroke than each active ingredient alone.

The new drug is contraindicated for patients with hypersensitivity to dipyridamole, aspirin or any of the product's other components. Adverse events associated with the use of the drug include headache, abdominal pain, dizziness and nausea.

From Center for Drug Evaluation and Research: What's New, November 23, 1999.



## Classified Ads

### Occupational Health Nurse Practitioner

One of region's fastest growing multi- specialty groups seeks certified NP with serious interest and experience in occupational medicine. Current knowledge of FAA, DOT, WISHA, OSHA and labor & industries a plus. This is a full- time position at 5 days per week/no call. Position based in our rapidly expanding Workplace Wellness Clinic that serves employees from over 500 businesses. Located just 50 minutes north of Portland, Oregon in a family-oriented community noted for its many parks, excellent library, vital performing arts theatre, and proximity to the great PNW outdoors. This practice is ideal for a NP who wants to join a practitioner driven organization committed to quality and compassionate care. We offer competitive compensation and outstanding benefits. Contact Anne Bennett, PeaceHealth Medical Group, Longview, WA Phone: 360-414-7596; Fax: 360-414-7550 or E-mail: [ABennett@PeaceHealth.org](mailto:ABennett@PeaceHealth.org).

### University Health Services Nurse Practitioner

Nurse Practitioner Lead: Full time 10-month staff position in University Health Services. Responsibilities include: provide assessment, evaluation, diagnosis, treatment and management of general health problems in a holistic manner for users of the Seattle Pacific University Health Center. Required qualifications include: Bachelor of Science in Nursing and successful completion of Nurse Practitioner education program; minimum 3-5 years as nurse practitioner; WA State licensure as ARNP, national ARNP certification, and WA State prescriptive authority for legend drugs; familiar with ICD9 and CPT coding; computer literate. Position will remain open until filled. Salary: low \$40,000's. Mail résumé to Dean, School of Health Sciences, Seattle Pacific University, 3307 Third Ave. West, Seattle, WA 98119-1997.

## Continuing Education

### Pharmacotherapeutics for ARNPs

Friday, December 10, 1999, 8:30 am - 4:30 pm. Location: La Quinta Inn, 1425 27th St E, Tacoma, WA. Pacific Lutheran University presents this workshop with a variety of pharmacotherapeutic topics of interest to all ARNP specialties. For a workshop brochure, contact Terry by phone 253-535-7683, by fax 253-535-7590 or by e-mail at [ccnl@plu.edu](mailto:ccnl@plu.edu) or visit the course web site at: <http://www.plu.edu/~ccnl/courses/pharm.html>.

### Child & Adolescent Neuropsychiatry: Critical Issues & Psychopharmacologic Update III

December 15, 1999, Shoreline Conference Center, Seattle, WA. At this all-day conference, mental health experts from Children's Hospital and the Seattle community will discuss critical neuropsychiatric issues including an update on the state of pediatric mental health, assessment and treatment of Oppositional Defiant Disorder and the application of the HEADS tool in caring for adolescents. The afternoon will provide in-depth workshops on psychopharmacology as well as school and behavioral assessments. The fee is \$110 and continuing education credit is available. Contact Stacy Graves at 206-527-5706 ext.2 for a brochure or to register by phone.

### The Association of Reproductive Health Professionals (ARHP) Infectious Diseases 2000: A Clinical Review of Reproductive and Non-Reproductive Infections

January 28-30, 2000, Miami, Florida. The Association of Reproductive Health Professionals (ARHP) will host a new continuing education conference, Infectious Diseases 2000: A Clinical Review of Reproductive and Non-Reproductive Infections, January 28-30, 2000,

at the Hotel InterContinental in Miami, Florida. This meeting will be sponsored with the International Infectious Disease Society for Obstetrics and Gynecology (I-IDSOG), Planned Parenthood Federation of America (PPFA), American Social Health Association (ASHA) and National Association of Nurse Practitioners in Women's Health (NPWH). Program information is available on ARHP's web site at [www.arhp.org](http://www.arhp.org). Please contact ARHP to receive a printed program, exhibit information or for any other additional information. Association of Reproductive Health Professionals (ARHP), 2401 Pennsylvania Ave NW, Suite 350, Washington DC, 20037-1718, phone: 202-466-3825, fax: 202-466-3826, e-mail: [conferences@arhp.org](mailto:conferences@arhp.org), web site: [www.arhp.org](http://www.arhp.org).

**Seattle Pacific University Graduate Courses**

Do you have legal questions about your practice? Interested in brushing up on pathophysiology? Seattle Pacific University offers graduate courses for working nurses. All courses after 4:00 PM. Winter quarter (January-March): Legal and Entrepreneurial Issues; Pathophysiology; Curriculum Development in Nursing. Spring quarter (March - June) Health Issues of Older Adults; Women's Health. For info on courses or a Master's degree in nursing, contact Donna Allis 206-281-2649 or e-mail [dallis@spu.edu](mailto:dallis@spu.edu).

**Meeting Announcements**

**The Puget Sound Nurse Practitioner Association** will meet on Wednesday, December 8<sup>th</sup> at Kaspar's, 19 West Harrison Street at 6 pm with dinner at 6:30. Jane Cornman will speak on The Spiritual Practice of Nursing. To attend, please RSVP by voice mail to 1-800-737-2088 x 42492 or via e-mail to [susanne\\_canin@merck.com](mailto:susanne_canin@merck.com).

**Ad Information**

**Copy deadline is the second Tuesday of the month prior to publication.** Ads may be accepted later then this on a space available basis. Position Available Ads & Continuing Education Announcements of less than 66 words are \$45, of 66 to 130 words are \$75 and greater than 130 words are \$105. Position Available Ads are priced per insertion. Continuing Education Announcements are per offering for up to three (3) consecutive insertions. New Product Announcements per product for one insertion of 130 words or less are \$75. Ad Inserts are \$540 for one issue. All ads are subject to space limitations and editing. Call for detailed rate information. Mail copy to *ARNP Care*, 212 Railroad Ave N, Kent, WA 98032. Phone 253.852.9042. Fax 253.480.0002. Email [care@nurse.net](mailto:care@nurse.net)

Healthy Humor: Why do nurses carry a red pen? To draw blood of course!

<p><b>ARNP Care</b>                  212 Railroad Ave N, Kent, WA 98032                  253.852.9042 Fax 253.852.7725                  Email: <a href="mailto:care@nurse.net">care@nurse.net</a>  <a href="http://www.nurse.org/wa/arnpcare">http://www.nurse.org/wa/arnpcare</a></p>
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