

Advanced Practice Registered Nurses (APRNs) Prescribing Opioids in Tennessee

The Controlled Substance Monitoring Database (CSMD) has proven to be a very good resource to help deter “doctor shopping” as part of the fight against prescription opioid abuse in Tennessee. The CSMD can also identify the top 50 prescribers of opioid prescriptions. At last count, 35 of the top 50 prescribers were APRNs. At face value, this statement gives the impression that APRNs are overprescribing. But is this really true? Let us look a little closer at what we do and do not know.



Unknown	Known	Safeguards
<ul style="list-style-type: none"> • We do not know the practice setting of the APRNs in the top 50 list. Do they work in oncology, palliative care, pain clinics, or orthopedics where large amounts of opioids are prescribed? • In some practices a single APRN may be in a practice with multiple physicians, writing a majority of the prescriptions - we do not know enough about the top 50 prescribers to draw conclusions. 	<ul style="list-style-type: none"> • There is no evidence to date that links increased opioid drug abuse with APRN prescribing practices. • APRNs are utilized in high volume practice settings: Examples: Surgeons are operating while APRNs are doing postop care when opioids are most likely to be prescribed. Palliative care teams may consist of 1 doctor and 5 palliative care APRNs. • In Tennessee, doctor shopping for opioids is down 40% from 2012. • Since the introduction of the Chronic Pain Guidelines last year, the total number of opioids prescribed in Tennessee has decreased 5%. • Some of the APRNs in the original top 50 prescribers are no longer on the list. The APRNs that have taken the place of the APRNs on the first list are under the supervision of the same doctors which indicates that APRNs are following physicians’ practice guidelines. • APRNs use a holistic approach to pain management that includes non-pharmacologic methods such as physical therapy, cold and heat, and non-opioid medications. • It is important to note that Florida, one of the few states which does not allow APRNs to prescribe opioid narcotic drugs, has one of the highest opioid narcotic abuse rates in the country. 	<ul style="list-style-type: none"> • One way to insure the safety and welfare of Tennesseans is through a disciplinary process for those providers not following code. From Jan 2014 through Jan 2015, 21 MDs and 13 APRNs have had disciplinary actions in prescribing controlled substances. • The Tennessee Board of Nursing (TBON) has opened a position for a nurse practitioner whose job is to work with the state’s Overprescribing Task Force which shows the nursing profession’s commitment to addressing the problem of overprescribing. • APRNs can only prescribe 1 non-refillable 30 day course of opioid treatment. • If more than 1 non-refillable 30 day course of opioid treatment is prescribed, the APRN must have physician approval.