Who We Are
Pediatric nurse practitioners (PNPs) and their fellow pediatric-focused advanced practice registered nurses (APRNs) are certified, licensed advanced practice nurses who have obtained a master’s degree, postgraduate certificate and/or clinical practice doctorate from an accredited academic program. APRNs have completed advanced course work in physical/health assessment, pharmacology and pathophysiology. The curriculum content includes health promotion, disease prevention, and differential diagnosis and disease management. The degrees require a minimum of 500 faculty-supervised clinical hours. These advanced course and practice requirements are in addition to an APRN’s initial nursing degree (typically RN baccalaureate) and licensure requirements. Beyond educational requirements, APRNs have passed a national certification exam with a specific population focus (family, adult-gerontology, neonatal, pediatric primary care, pediatric acute care, women’s health, psychiatric-mental health) and expanded their knowledge through ongoing continuing education.

PNPs and pediatric-focused APRNs are highly qualified and educated, multi-skilled health care professionals who should be referred to by their state-based licensure nomenclature rather than generic provider categories.

Patient Population
PNPs and pediatric-focused APRNs treat children from birth through transition to adult care and their families and caregivers. While most National Association of Pediatric Nurse Practitioner (NAPNAP) members practice in general pediatrics, some specialize in adolescents and young adults or neonatal populations.

Where We Practice
PNPs and pediatric-focused APRNs treat millions of patients across the country each year. These professionals spend significant one-on-one time with patients and families in pediatric offices, hospitals, specialty clinics, public or school-based health care centers and other facilities. The majority of NAPNAP members report spending up to 20 minutes with patients.

How We Are Regulated
Advanced practice education requirements prepare APRNs to provide high-quality, cost-effective health care to their patients. Based on state laws, each state’s regulatory board sets guidelines for APRN licensure, including practice and prescriptive authority. APRNs have full practice and prescriptive authority in 22 states and the District of Columbia, which allows them to work independently. The other states have rules ranging from reduced practice to restrictive practice and prescriptive authority. In December 2016, the U.S. Department of Veterans Affairs ruled that advanced practice registered nurses, with the exception of certified registered nurse anesthetists, are permitted to practice to the full scope of their education and training. The Institute of Medicine’s report of The Future of Nursing: Leading Change, Advancing Health recommends that all APRNs be allowed to practice to the fullest extent of their education and training. The IOM report recommends that APRNs in reduced or restrictive states advocate for full practice legislation and regulation.
Primary Advocacy Issues
- Optimal funding for and access to state CHIP/Medicaid programs
- Children should have access to comprehensive, continuous, coordinated, compassionate, culturally sensitive and family-centered health care, including behavioral health services in order to ensure healthy lifestyles
- We strive to remove federal and state barriers that impede access to the care provided by PNPs and pediatric-focused APRNs in all practice settings, including state-by-state full practice authority legislation

What We Do
In a review of studies comparing the primary care provided by nurse practitioners to primary care provided by physicians, researchers found that patients of both groups had comparable health outcomes. Nurse practitioners were found to outperform physicians in measures of consultation time, patient follow-up and patient satisfaction (Naylor and Kurtzman 2010). Pediatric-focused APRNs provide the following services:

- Diagnose and treat common childhood illnesses such as allergies, ear and respiratory infections and skin conditions including acne
- Perform pediatric health care maintenance, including well child exams, developmental screenings and in-depth physical assessments, such as vision, hearing and dental
- Prescribe medications, medical equipment and therapies
- Screen and manage mental health illnesses in children and adolescents and prescribe medications and referral to therapy
- Manage acute, chronic and critical pediatric diseases, including asthma, diabetes and cancer
- Order and interpret results of laboratory and diagnostic tests, X-rays and ultrasounds
- Perform school physicals and provide childhood immunizations
- Provide parents advice on common child health concerns, including nutrition, obesity and weight management
- Provide behavioral counseling to children and caregivers on improving school performance, attention deficit/hyperactivity disorder (ADHD) and reducing harmful risk-taking behaviors
- Monitor and ensure the quality of health care practice and assist patients and families in negotiating health care delivery systems
- Provide guidance on in-home safety, unintentional injuries, sports injuries, motor vehicle and bike safety
- Work closely with an interprofessional team to provide the highest level of evidence-based care for infants, children, adolescents and young adults with life-threatening illnesses and organ dysfunction or failure
- Manage complex and ongoing intensive therapies in a variety of settings, including inpatient and outpatient hospital settings, emergency departments and home care settings

About the National Association of Pediatric Nurse Practitioners
The National Association of Pediatric Nurse Practitioners (NAPNAP) is the nation’s only professional association for PNPs and their fellow pediatric-focused APRNs dedicated to improving the quality of health care for infants, children, adolescents and young adults. Representing more than 9,000 healthcare practitioners nationwide with 20 special interest groups and 50 chapters, NAPNAP has been advocating for children’s health since 1973. NAPNAP was the first nurse practitioner professional society in the U.S.; the nurse practitioner movement was founded in 1965. There are an estimated 18,000 PNPs; there are an estimated 270,000 NPs in the U.S.