World Congress Poster Abstract 1153: A Survey of Advanced Practice Nurse Roles in APGNN (Association of Pediatric Gastroenterology and Nutrition Nurses)


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Introduction: Significant role diversity was suggested during the Advanced Practice Nurse (APN) Round Table Discussions at the recent 2003 NASPGHAN/APGNN Conference in Montreal. A survey was developed to explore this diversity in anticipation of further discussions with our International colleagues at the 2004 World Congress.

Methods: Utilizing the current APGNN database, a one page, 14 item Role Survey was emailed or faxed to 79 APGNN members with credentials suggestive of an APN role (MS, PNP, FNP). Members were directed to return surveys either by email or fax. Answers were tabulated by hand and presented as simple percentages or ranked in order of frequency.

Results: 40 surveys, from 21 states in the USA, were returned for an overall response rate of 51%. The majority of responders work fulltime (90%), primarily in a GI clinic (65%) or in a hospital (28%). 63% are prepared as PNPns with another 8% prepared as FNPs. Most are working as Nurse Practitioners (83%), but others as Clinical Nurse Specialists (8%), Researchers (5%) or Case Managers/Coordinators (5%). 33% have been a GI APN for over 10 years. Specific Job Responsibilities: 70% spend > ¾’s of their time on outpatient activities. No one reported spending > ¾’s of their time on inpatient activities, yet at least 60% spent some time on inpatient activities. The top 3 activities which required at least 20% of their time were: 1) seeing follow up patients (85%), 2) doing patient/family teaching (73%) & 3) seeing new patients (70%). Management of home feedings, research, making home care arrangements, & staff supervision were reported by at least 18%. In the outpatient setting, 55% see any patient in the practice, while 43% see specific diagnoses; Constipation, GERD and ABD pain being the most common. 70% reported having prescriptive privileges. Billing and Supervision: Billing practices are fairly evenly distributed with 40% never billing under their own Provider Number, 23% sometimes billing under their own number, 30% always billing under their own number (5% were not applicable). The majority (68%) have their supervising MD see their patients some of the time, while 23% always have their patients co-examined.

Conclusion: APNs in APGNN are predominantly PNP-trained with a primary focus on outpatient GI Clinic activities, but many are also involved in patient/family teaching, nutritional support, home care & research. Billing practices are highly variable, likely impacted by state regulations and organizational practices.