



**North Carolina Department of Health and Human Services**  
**Division of Public Health • Public Health Nursing & Professional Development**  
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Michael F. Easley, Governor  
Carmen Hooker Odom, Secretary

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State Health Director

**TO:** Local Health Directors  
Local Directors of Nursing  
Nurse Practitioners employed by Local Health Department

**FROM:** Joy F. Reed, EdD, RN  
Head, Public Health Nursing & Professional Development

Ann Forbes, RN, MSN, FNP  
North Carolina Board of Nursing Practice Consultant

**DATE:** May 23, 2006

**SUBJECT:** Nurse Practitioner Scope of Practice

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This letter is being sent to alert local health departments to the potential for either allowing or encouraging Nurse Practitioners employed by your agency to exceed their legal scope of practice and jeopardize their "approval to practice." Our concern is the result of learning that an OB/GYN Nurse Practitioner was led to believe that, if she attended a four-day continuing education program in Philadelphia, she could begin seeing the males who presented for services under North Carolina's Family Planning Waiver.

North Carolina's statutes and administrative code are very clear that a Nurse Practitioner's scope of practice is determined by his/her academic preparation and certification and cannot be expanded by continuing education or by a physician under the "collaborative practice agreement." Under North Carolina nursing law, all Nurse Practitioners with the exception of those who are Family Nurse Practitioners, have some limitations on the type of clients they may see by age or presenting problem/health condition. For example, a Pediatric Nurse Practitioner may see a child with diabetes, but may not use his/her understanding of diabetes to provide primary care to an adult with diabetes. Likewise, an OB/GYN Nurse Practitioner is not academically prepared and therefore, does not have within his/her scope of practice, providing care to males or children, nor providing primary care (e.g., to older adult males and females for initial or annual physicals, sick visits or for chronic illnesses such as diabetes or hypertension.) If an OB/GYN nurse practitioner's academic preparation (didactic and clinical) included formal content on male anatomy and sexually transmitted diseases, the OB/GYN nurse practitioner may see males who present for treatment of STDs, but not those who present for an annual physical, or other



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2

presenting chief complaint, problem, or condition. The OB/GYN nurse practitioner's practice is limited to female maternity and reproductive care.

If you are thinking about expanding the types of clients an OB/GYN nurse practitioner at your agency sees, and that individual is not certified as a Family Nurse Practitioner, please ask him or her to seek consultation from a Practice Consultant at the North Carolina Board of Nursing first. Under no circumstances should you assume that any continuing education course, regardless of length or sponsor, would allow the OB/GYN NP to see clients for which their basic academic preparation did not prepare them.

Sincerely,

Ann Forbes, RN, MSN, FNP  
Practice Consultant NCBON

Joy Reed, EdD, RN, Head Public  
Health Nursing and Professional Development Unit

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Executive Director NC Board of Nursing  
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