

Sharon H. Allan, DNP, ACNS-BC – President – Maryland Chapter of National  
Association Clinical Nurse Specialists

Oral Testimony

SB 513

Titled: Clinical Nurse Specialists - Prescribing Authority

Thank you Senator Eckardt for your generous sponsorship and thank you Chairman Pinsky, Vice-Chair Kagan, and committee members for allowing time to hear my testimony in support of SB 513.

Dr. Sharon Allan, I am a doctoral prepared clinical nurse specialist with over 45 years of experience as a registered nurse, 17 years as an advanced practice clinical nurse specialist in Maryland, and the President of Chesapeake Bay Affiliate (Maryland Chapter) of the National Association of Clinical Nurse Specialists. The Clinical Nurse Specialist is one of “4” advanced practice nursing roles prepared at the Master’s or Doctoral level, educated and trained to diagnose, treat disease and illness, **and prescribe**. Currently 80% of the 50 states and US Department of Veterans Affairs have granted CNSs prescribing privileges – Maryland still has not.

CNSs are change agents working across the continuum of healthcare to improve patient outcomes, increase access to quality care, identify and decrease patient safety hazards and are on the frontline of work done to set evidence-based nursing standards of care. The CNS is not a duplicate role to the other Advance Practice roles but able to fill the gaps and partner with Medical Providers to make improvements in the efficiency and effectiveness of healthcare delivery.

Prescribing is a very complex process that involves much more than ordering medications. Prescribing authority would allow the CNS to follow through on their patient treatment plans, to order patient referrals, lab work, diagnostic tests, titrate medications, order specialty equipment such as a pressure relieving bed, walker, wheelchair, wound care supplies – all of which promote quality management of even the most vulnerable and complex patients.

Not having prescribing authority is crippling to the continuity of quality care. I live this frustration every day in my role managing post-operative cardiac surgery patients after discharge. The time it takes for a patient to obtain an appointment with their Primary Care physician and / or Cardiologist can take 6-10 weeks after discharge home. I fill this gap in care, managing these patients. I identify and diagnose changes in their medical status, develop treatment plans and make adjustments in their medications to keep them safe and prevent readmissions to the hospital. Current Maryland law preventing trained and educated CNSs from having prescribing authority means that I need to interrupt the workflow of another provider, taking them away from what they do best, simply to sign my orders. The CNS does not live in a silo, we are collaborative team members working as strong patient advocates, doing what we do best, respected by the other healthcare providers – All done to provide the BEST care to our patients. Granting CNSs prescribing authority will only improve this care.

I stand in strong support of this bill and am asking you to vote favorably in support of SB 513.

Thank you,

Dr. Sharon H. Allan, DNP, ACNS-BC  
187 Rock Ridge Rd  
Millersville, MD 21108