



Arkansas Center for Nursing
Arkansas Association of Nurse Anesthetists
Arkansas Nurse Practitioner Association
Arkansas Nurses Association
Arkansas Pediatric Nurse Practitioners
Northeast Arkansas Advanced Practice Association

Allowing APRNs (with a PAC# and DEA#) To Prescribe Schedule II Controlled Substances

1. **20-year History of APRNs Prescribing:** Federal guidelines for APRNs prescribing Schedule II controlled substances have changed.
 - Need to **update Arkansas law** to reflect Federal guide for contemporary practice.
 - Hydrocodone-combination medications are now prescribed in Arkansas with a **good safety record by APRNs**.
 - **Prompt care for acute pain** is a priority in all care settings.
 - APRNs writing prescriptions **avoids delay of care and additional work** for physicians.
2. **Prescribing medications:** for Attention Deficit Hyperactivity Disorder/Attention Deficit Disorder (ADHD/ADD):
 - APRNs receive **training on assessment and treatment** for ADHD/ADD in their APRN programs.
 - The **safest practice is for the provider to be the prescriber**; APRNs assess, diagnose and provide follow-up care for ADHD/ADD.
3. **Safety of Care:** APRNs should directly write and document the prescriptions for patients they are managing.
 - Involving a physician for a **signature alone does not improve safety**.
 - Additional physician signature **delays care, adds expense** and **additional work** for physicians.
4. **Cost of Care:** Inability of APRNs to prescribe and renew Schedule II medications-
 - **Adds cost** to see a second healthcare provider to simply write a prescription.
 - **Delays care** to wait for physician appointment.



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