

PA's & NP's:

Similarities & Differences

Both **PA's** and nurse practitioners (**NPs**) play an increasingly vital role as front-line healthcare providers. Although there are some significant differences in training and maintenance of certification requirements, the similarities between PA's and NPs far outweigh the differences. What is important for patients to know is that, regardless of whether they see a PA or an NP, they are being treated by a highly educated, well-trained healthcare provider who places the patient at the center of their care. The following highlights some of the key differences between PA's and NPs.

PA's

NPs

WHAT IS A PA/NP?

PA's are medical professionals who diagnose illness, develop and manage treatment plans, prescribe medication, and often serve as a patient's principal healthcare provider. With thousands of hours of medical training, PA's are versatile and collaborative. PA's practice in every state and in every medical setting and specialty, improving healthcare access and quality.

NPs are nurse clinicians who provide a wide range of healthcare services including the diagnosis and management of acute, chronic, and complex health problems; health promotion; disease prevention; health education; and counseling to individuals, families, groups, and communities. NPs practice in every state. The majority of NPs are certified in an area of primary care.

HOW ARE PA's/NPs EDUCATED?

- Earn a master's degree and may obtain advanced degrees.
- Curriculum is modeled on the medical school curriculum.
- Students complete 2,000 hours of clinical rotations in family medicine, internal medicine, general surgery, pediatrics, obstetrics and gynecology, emergency medicine, and psychiatry.
- Trained as medical generalists, which provides them diagnostic and treatment skills in all areas of medicine and for all patients, regardless of age or gender.

- Must complete a master's or doctoral degree program.
- Trained in the advanced practice of nursing.
- Students must complete 1,000 hours of supervised clinical practice.
- Trained in a chosen health population focus area: Family, Adult/Gerontology, Neonatal, Pediatrics, Women's Health, or Psychiatric/Mental Health.

HOW ARE PA's/NPs REGULATED?

Primarily regulated by state medical boards, but by separate PA boards in several states.

Primarily regulated by state nursing boards, but in several states the medical board has some role in NP regulation.

HOW DO PA's/NPs PRACTICE?

PA's have been pursuing Optimal Team Practice (OTP) since 2017. OTP is in effect in one state. OTP occurs when PA's, physicians and other healthcare professionals work together to provide quality care without burdensome administrative constraints.

NPs have been pursuing full practice authority (FPA) since the early 1980s. FPA is in effect in 22 states and DC. FPA occurs when state practice and licensure laws permit all NPs to evaluate patients; diagnose, order and interpret diagnostic tests; and initiate and manage treatments, including prescribing medications and controlled substances, under the exclusive licensure authority of the state board of nursing.

HOW DO PA's/NPs MAINTAIN CERTIFICATION?

- 100 hours of continuing medical education (CME) every two years.
- Recertify every 10 years through an exam that evaluates general medical knowledge.
- PA's have one certifying body.

- 100 hours of continuing education (CE) and 1,000 clinical hours every five years.
- No recertifying test required; may take an exam as an alternative to 1,000 hours of clinical practice every five years.
- NPs have six certifying bodies from which to choose.