

TESTIMONY
TO
EDUCATION FUNDING AND TAXATION COMMITTEE
62ND NORTH DAKOTA LEGISLATIVE ASSEMBLY – INTERIM SESSION

BY

DR. BILLIE MADLER, FNP
June 19th, 2012

Madam Chairperson Kelsch and Committee Members:

My name is Dr. Billie Madler. I work as a nurse practitioner in a trauma center and am an educator of nurse practitioner students. I am the president of the North Dakota Nurse Practitioner Association and I am here to testify regarding concussion management programs on behalf of this group. The NDBON was consulted in the development of this testimony.

Concussions, a type of traumatic brain injury, are a major health concern. Data suggests that 1.7 million people sustain a traumatic brain injury annually. These injuries are associated with 1.365 million emergency room visits and 275,000 hospitalizations annually with associated direct and indirect costs estimated to have been \$60 billion in the United States in 2000

There are three sequential phases of injury; preinjury, injury, and postinjury. Obviously efforts to address the preinjury and injury phases are critical. These efforts are focused on prevention and early identification of

concussion symptoms. Heightened awareness of strategies and athletic equipment that can help decrease the incidence of concussion are useful. Moreover, the ability of individuals to identify concussion manifestations present on the athletic playing field has gained increased attention.

The focus of the discussion facing this group today, however, is pertinent to the third phase of injury, that being post injury management. Today you are challenged to identifying which professionals meet the qualifications of being a licensed, registered or certified health care provider whose scope of practice includes the diagnosis and treatment of concussion.

Nurse practitioners meet this definition as defined in the NDCC 43.12.1 Nurse Practices Act and in the NDAC 54-05-03.1. The law recognizes nurse practitioners as advanced practice registered nurses with a scope of practice that meets the needs of this legislation. Practice as an advanced practice registered nurse includes: comprehensive assessment, diagnosis, prescribing, and evaluation of treatment plans. APRNs promote a safe and therapeutic environment. They provide health teaching and counseling for the promotion, attainment, and maintenance of the optimum health level of clients. NPs communicate and consult with the interdisciplinary team as necessitated by the healthcare needs of their

patients and in the implementation of the healthcare regimen. Most concussions lend themselves to diagnosis and management by primary care providers, such as a nurse practitioner. However, in the scenario of a concussion that is displaying worrisome signs or symptoms the nurse practitioner would consult with the appropriate healthcare provider. For example, in the scenario of post-concussive syndrome or worrisome signs or symptoms associated with acute concussion, the nurse practitioner may choose to consult and/or refer to an appropriate healthcare provider.

I was also asked to speak specifically to the issue of malpractice. Like many of our counterparts, nurse practitioners do have malpractice insurance coverage.

Access to the appropriate level of provider is always a priority when discussing the healthcare needs of citizens in our state. Nurse practitioners not only are equipped to assess, diagnosis, and treat athletes who sustain concussion, they are accessible. NPs live and offer their healthcare services throughout the state of North Dakota.

Respectfully submitted,

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