



University of Wyoming's Nurse Practitioner Program

BY ROBERT MONGER, MD



The Fay Whitney School of Nursing at the University of Wyoming (UW) is helping to address the healthcare provider shortage in our state through their excellent nurse practitioner (NP) program, and we physicians should look for ways to support and collaborate with our nursing colleagues.

UW's NP program originally started in the early 1980s with a master's NP program, which graduated its first student in 1982 and its last students in 2012. In the early 2000s, many health care disciplines started offering more advanced degrees to recognize the highest levels of practice within their discipline, such as pharmacy programs offering PharmD degrees. Similarly, UW's NP program also evolved to offer a more advanced

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degree, and in 2010, UW's Board of Trustees approved the creation of a three-year nursing doctorate, the Doctor of Nursing Practice (DNP), which started in 2010 and graduated its first students in 2015. UW continues to offer a master's program for nurses who want to teach or move into administrative positions; however, UW's master's program focuses on leadership and teaching and is not a clinical degree.

UW's DNP program accepts 18 students per year and offers two clinical concentrations: family nurse practitioner (FNP), which prepares students for careers in rural primary care, and psychiatric mental health nurse practitioner (PMHNP), which prepares students for careers in rural psychiatric mental health care. Each year, the program aims to enroll 12 students into the FNP track and 6 students into the PMHNP track, and the program is considering offering an adult-gerontological acute care nurse practitioner (AGACNP).

In order to be accepted into UW's DNP program students must have a BSN degree. Prior nursing experience is not required; however, many DNP students have years of clinical

experience prior to starting the program. Physicians have generally been very supportive of the program, and many DNP students participate in clinical rotations supervised by physicians. UW's DNP program is committed to Wyoming and has a strong rural emphasis, and the FNP program generally focuses on outpatient primary care, not inpatient hospital care or deliveries. Most of UW's DNP students are from Wyoming and following graduation around two-thirds of the graduates stay in the state to practice.

There are several different degrees and certifications in the nursing world which can be confusing to non-nurses. To clarify, the term "advanced practice registered nurse" (APRN) includes four different types of practitioners, including NPs (the largest group), Certified Registered Nurse Anesthetists (CRNAs),

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Clinical Nurse Specialists, and Certified Nurse Midwives. All of Wyoming's APRNs are licensed through the Wyoming State Board of Nursing, and like many other states, Wyoming is what is known as a full independent scope of practice state, meaning that APRNs may provide care in all settings, and supervision or collaboration agreements with any other provider are not required by Wyoming law. Additionally, Wyoming's APRNs are also eligible for full prescriptive authority.

There are number of similarities between UW's DNP program and the Wyoming WWAMI medical school program, including the size of the programs: 20 Wyoming WWAMI students are admitted each year compared to 18 Wyoming DNP students. Both programs are physically located in the same building at the College of Health Sciences in Laramie, and although the two programs have traditionally been siloed without much interaction between them, this is beginning to change. The DNP students, for example, now use the same anatomy lab as the WWAMI medical students (although not at the same time), and several of the WWAMI faculty are teaching DNP classes this year, and at least one DNP faculty member is now teaching WWAMI students. In addition, for the last several years, UW's DNP, WWAMI, and PharmD students have participated in a one-day interprofessional event related to opioid prescribing and they are exploring other interprofessional learning events.

There are also significant differences between UW's DNP

and Wyoming's WWAMI programs. For example, following graduation most newly minted DNPs go straight into practice without completing post-graduate training such as a residency. Also, while not trivial, the in-state tuition for the UW DNP program is much less expensive than medical school, with average in-state cost for tuition and fees of around \$12,000 each year for three years (compared to many medical students who graduate with more than \$200,000 dollars in debt). However, unlike the Wyoming WWAMI medical school program, there is no state loan repayment program available for DNP students.

The 18 members of the class of 2019 graduated in August, and they are the 5th class to graduate with a DNP degree from UW. The program is becoming nationally recognized for its emphasis on rural primary care and will likely continue to grow in the future under the outstanding leadership of the DNP program director Dr. Ann Marie Hart, PhD, FNP-BC, FAANP.

We physicians should look for ways to expand interprofessional collaboration with our nursing colleagues as they continue to increase their role in patient care. For example, Wyoming APRNs have their own state-wide organization, the Wyoming Council for Advance Practice Nurses (WCAPN), which hosts an annual meeting. The WMS works with the Wyoming Association of Physician Assistants to co-host educational opportunities, and we should do the same with the WCAPN. All of us need to work together to improve patient care in Wyoming. 

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