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Evolution and Evidence-Based Practice of the Emergency Nurse Practitioner in the United States

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Abstract

This article explores the evolution of the Emergency Nurse Practitioner (ENP) role and the importance of Evidence-Based Practice (EBP) in improving patient outcomes. The authors discuss the history and development of the ENP role, including the education and training required, and emphasize the need for ongoing professional development and adherence to EBP principles. The article also provides examples of how ENPs can use EBP to improve care in the emergency department.

Keywords: Evidence-based practice; Emergency Nurse Practitioner; Education

Introduction

The Emergency Nurse Practitioner (ENP) is a highly skilled Advanced Practice Nurse who works in the emergency department and provides specialty care to patients. The development of ENP practice emerged in response to the growing demand for high-quality, accessible, and efficient emergency care for patients across the lifespan [1]. Certified ENPs hold master's degrees and certifications as both Family Nurse Practitioners (FNP) and emergency nurse practitioners (ENP) and are educated to assess, diagnose, and manage a wide range of medical and trauma emergencies [2]. ENPs use an evidence-based approach to patient care and can order and interpret diagnostic tests, prescribe medications, and perform a variety of emergency procedures [2]. There is strong evidence supporting the role of ENPs in providing emergency care. Studies have shown that ENPs can safely and effectively diagnose and treat a wide range of emergency conditions, improving patient outcomes and reducing wait times in emergency departments [3]. In addition, ENPs collaborate with other healthcare professionals, including physicians, to provide comprehensive and coordinated care. They also play a key role in managing patient flow in emergency departments, reducing overcrowding, and improving overall patient satisfaction [3].

Why an additional Certification after Years of Clinical Practice?

Nurse practitioner (NP) practice in the Emergency Department (ED) is unique because it requires a combination of advanced clinical skills, critical thinking, and the ability to work effectively in a fast-paced, high-stress environment. Fueled by the need for nurses with skills and competencies to provide quality care to all who seek emergency care, the development of the ENP role continues to evolve and more evidence-based practice continues to emerge [2,3].

Here are some key factors that make NP practice in the ED unique: [4,5].

- **Wide scope of practice:** NPs in the ED manage a wide range of acute and complex medical conditions, from minor injuries to life-threatening emergencies in patients of all ages including infants to older adults. They are responsible for conducting comprehensive assessments, ordering and interpreting diagnostic tests, developing and implementing treatment plans, and providing patient and family education.
- **Collaborative practice:** NPs in the ED work collaboratively with physicians, nurses, paramedics, and other healthcare providers to ensure seamless care for patients. They must be skilled at communication and coordination, and able to function effectively as part of a team.

- **Rapid decision-making:** The ED is a high-stress environment where decisions must be made quickly and accurately. NPs in the ED must be able to think critically, make rapid assessments, and take appropriate action promptly.

- **Flexibility and adaptability:** The ED is a dynamic and unpredictable environment, with patients presenting with a wide variety of conditions and needs. NPs in the ED must be able to adapt quickly to changing circumstances and work to provide the best possible care in often chaotic and unpredictable situations.

- **Patient-centered approach:** NPs in the ED must be skilled at providing patient-centered care, taking into account each patient's unique needs and preferences. They must also be able to communicate effectively with patients and families, providing education and support throughout the care process.

Overall, NP practice in the ED is a challenging but rewarding role that requires advanced clinical skills, collaboration, flexibility, and a patient-centered approach. Board certification requires the NP to have an education as a Family nurse practitioner due to having many OB/GYN, Pediatric, and Geriatric emergencies. It is important to recognize that Boards of nursing license education as an FNP. However, it is important to note that the vast majority of patients are discharged home from the Emergency Department. When patients require admission, the ED transfers these patients to a higher level of care such as internal medicine, surgery, or intensive care [4,5].

Timeline for the evolution of the ENP role

The Emergency Department Nursing Association (EDNA) published the first Standards of Emergency Nursing Practice in 1975. Established in 1970, EDNA was the first specialty organization for emergency nurses and was renamed the Emergency Nurses Association (ENA) in 1986 in recognition that emergency nursing was role-specific rather than site-specific. Key milestones quickly followed including certification of Emergency Nursing with the Board Certified Emergency Nurses (BCEN) and Certified Emergency Nurse (CEN) programs. In 1998, ENA established an Advanced Practice Registered Nurse (APRN) committee to develop an APRN outline in the ENA core Curriculum. Shortly thereafter and by consensus of specialty nursing groups, the American Nurses Association (ANA) became the official body to review scope-of practice-statements and standards of practice for nursing specialties [5].

In 2008, based upon a national Delphi study and a comprehensive practice analysis, ENA published the Competencies for Nurse Practitioners in Emergency Care. Eventually, in 2011, the ANA and the National Organization of Nurse Practitioner Faculties (NONP) endorsed these competencies. Additionally, in 2008 the Consensus Model for APRN Licensure, Accreditation, Certification, and Education (LACE) was published to guide state boards of nursing to improve the regulation of APRN roles based on education and certification in population foci while recognizing that NP practice will evolve incrementally over time. The LACE model did not specify the emergency population; therefore, the ENP has evolved over several decades in response to changing healthcare needs and the increasing complexity of emergency care [9].

Brief Historical Timeline of the Development of ENPS In the United States: [4,5,10]

- **The 1960s:** Emergency Departments (EDs) begin to emerge as specialized units within hospitals, staffed primarily by physicians and nurses.
- **The 1970s:** The concept of the Nurse Practitioner (NP) introduced in response to the shortage of primary care physicians. NPs begin to work in a variety of settings, including emergency departments.
- **The 1980s:** ENPs begin to emerge as a distinct role within emergency care. The first ENP program is established at the University of Maryland School of Nursing in 1980.
- **The 1990s:** The ENP role becomes more established, with specialized training programs and certification exams. The Emergency Nurses Association (ENA) establishes a certification program for ENPs in 1995.
- **The 2000s:** The role of the ENP continues to evolve, with increasing emphasis on advanced clinical skills, leadership, and collaboration with other healthcare providers. In 2008, the American Academy of Nurse Practitioners (AANP) recognizes the ENP as a distinct specialty.
- **The 2010s:** The ENP role becomes more widely recognized and integrated into emergency care. In 2017, the AANP and the ENA collaborate to establish a joint position statement on the role of the ENP in emergency care.
- Today, ENPs play an important role in providing high-quality emergency care, with specialized training and skills that complement those of physicians and other healthcare providers in the ED.

ENP Education

Becoming an ENP requires education, clinical experience, certification, and licensure. It can be a challenging and rewarding career path for individuals who have a passion for providing advanced care to patients in the emergency setting. To become an ENP, individuals must follow these steps: [6,7,9].

- Earn a Master of Science in Nursing (MSN) degree: To become an ENP, you must earn an MSN degree from an accredited nursing program with FNP population foci to obtain licensure.
- Obtain state licensure: You must also obtain a license to practice as an ENP in the state where you want to work. Requirements vary by state, so it is important to check with the state board of nursing for specific requirements.

- ENP post-graduate programs are available to those already practicing and certified as family nurse practitioners and prepare NPs to sit for the specialty certification as an ENP. Other current options include fellowship and board certification through continuing education and dedicated ED hours although these options are falling out of favor as employers seek to hire ENPs with standardized educational preparation.

Future of ENP Practice

The future for ENPs looks promising as healthcare systems continue to seek innovative solutions to improve access to high-quality emergency care. The demand for ENPs is likely to increase as the population ages and requires complex care in emergency departments with high volumes of patients and overcrowding [8,9]. ENPs help alleviate the shortage of emergency physicians and provide timely and efficient patient care. In addition, the use of technology in emergency care is likely to increase, and ENPs may play a key role in leveraging new tools to improve patient outcomes. These advances include telehealth, remote monitoring, and other digital health solutions. ENPs are well-positioned to collaborate with other healthcare providers in the emergency department, including physicians, nurses, and paramedics. This includes team-based care models that enhance communication and coordination among providers [2,7,8]. ENPs may continue to specialize in certain areas of emergency care, such as trauma, critical care, geriatrics, or pediatrics. This allows for even more advanced clinical skills and expertise in specific patient populations. Overall, the future of the ENP role is likely to be dynamic and responsive to the evolving needs of emergency care in the United States. ENPs will continue to play a critical role in providing patient-centered care in emergency settings.

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