
Family Physician and Nurse Practitioner Training

High-quality care is the goal for family physicians and nurse practitioners.

Primary care physicians and nurse practitioners have the same goals and focus in their professions: the delivery of comprehensive, high-quality and accessible health care. In the delivery of health care services, there is some overlap in the roles and services provided by different members of the health care team.

Family physicians complete training for complex, differential diagnoses and medical treatments

Due to his/her seven years of medical and clinical training, a family physician can provide all the services of a nurse practitioner. But more importantly, the family physician brings a broader and deeper expertise to the diagnosis and treatment of all health problems, ranging from strep throat to chronic obstructive pulmonary disease, from unsightly moles to cancer, from stress headaches to refractory multiple sclerosis. The family physician is trained to provide complex differential diagnosis, develop a treatment plan that addresses the multiple organ systems, and order and interpret tests within the context of the patient's overall health condition.

Nurse practitioners complete training for common diagnoses and treatments

Nurse practitioners are trained to recognize and treat common health problems, such as strep throat, ear infections and conjunctivitis. They are trained to monitor specific chronic conditions such as hypertension, high cholesterol, and high or low blood sugar problems. They provide preventive care such as immunizations. They educate patients about chronic conditions, medications, nutrition and exercise. They refer patients to the family physician when a patient has multiple symptoms that may or may not be related, a condition that is not specific to the nurse practitioner's training or a condition that has multi-organ effects and/or requires multiple medical interventions or medications. The nurse practitioner is trained to recognize and treat the three or four most likely causes of a patient's symptoms.

You know what you're getting with a physician

Family physicians throughout the United States complete the same educational path to become doctors. They all must have met the same medical school admissions requirements. They all must complete the same coursework and successfully complete the same licensure examination.

Nurse practitioner certification can mean various levels of training

According to the March 2010 report, Registered Nurse Population: Initial Findings from the 2008 National Sample Survey of Registered Nurses, the Health Resources and Services Administration notes, "educational requirements for advanced practice vary for each specialty, across States, and over time."

Nurse practitioners can come to their certification from various routes. They can complete an associate's degree program or nursing diploma program and go directly into a master's degree program or they can complete their Bachelor of Science degree in nursing.

Clinical care is only one-third of nurse practitioner training

According to the 2002 survey conducted by the American Association of Critical-Care Nurses Task Force on the Professional Clinical Doctorate, practice-focused nursing doctoral programs share core content areas and competencies.



Advanced clinical practice constitute only 33 percent of the curriculum. Other areas include organizations and systems; nursing and health care administration; economics; leadership skills; research methods; basic science for practice, including areas such as genetics and psychoneuroimmunology; and use of technology and information.

Although 38 states require nurse practitioners to hold a master's degree, they have grandfathered in nurse practitioners who do not have a master's degree. Those who classified themselves as nurse practitioners in 2008 were grandfathered in, regardless of whether they had completed a master's degree in advanced practice nursing. Another 11 states and the District of Columbia do not require that nurse practitioners hold a master's degree.



Family Physician and Nurse Practitioner Education & Training

All physicians hold a medical degree and certification of three to four years of medical residency training. Many hold fellowships in additional subspecialty training.

Five percent of NPs hold an associate or bachelor's degree; 92 percent hold a master's degree; three percent hold a PhD or DNP.¹

Family physician training

Bachelor of Science degree with course work emphasizing biology, inorganic chemistry, organic chemistry, biochemistry, anatomy, physics and math (e.g., calculus)

Nurse practitioner training

Nursing diploma granted from hospital training program; **associate's degree** from community college with course work that prepares graduates for a defined technical scope of practice, or **Bachelor of Science** degree in nursing, with course work in psychology, microbiology, anatomy, organic chemistry, adult and child health, statistics, health assessment, nursing theory, bioethics, nutrition, management, and community health nursing.

Four-year medical school with two years of course work in anatomy, cell biology, embryology and immunology, neuroscience and physiology, clinical medicine and microbiology, pathology and pharmacology; and **two years in clinical rotations** in internal medicine, neurology, pediatrics, surgery, family medicine, and psychiatry, with electives in areas such as family and community medicine, internal medicine, anesthesiology/pain management, dermatology, OB/GYN, orthopedics, otolaryngology, pathology, urology, radiology and pharmacology.

Two-year master's degree or **two-year doctoral degree in nursing** with courses in areas such as advanced physiology, pathophysiology concepts in nursing, health policy, illness management, drug therapy, epidemiology, health assessment, the role of the NP, pharmacotherapy, and social and cultural influences on health.

Three-year family medicine residency training with training in 1) preventive care, including well-child, well-adult, prenatal, post-natal and newborn care; 2) preventive and diagnostic procedures, including colonoscopy, cardiovascular stress tests, spinal taps and biopsies; 3) office-based procedures including orthopedic casting, removing foreign objects from eyes and skin, suturing, joint injections; 4.) minor surgical care such as appendectomy; 5.) inpatient care on medical, surgical, intensive care, emergency units and in long-term care facilities; 6.) diagnosis, treatment, and management of acute conditions as well as chronic conditions, including coronary artery disease, chronic obstructive pulmonary disease, sickle cell anemia, HIV, rheumatic disorders and cancer.

FP Clinical Training: 20,700 – 21,700 hours

Total of five years

NP Clinical Training: 2,800 – 5,350 hours

Total of six weeks for master's degree and 12 weeks for doctor of nursing practice

1. "A Decade of Growth: Salaries Increase as Profession Matures, Jill Rollet and Sarah Lebo, Advance for Nurse Practitioners, January 2008, www.advanceweb.com/np)



Continuing Education Requirements

Family Physician

Recertification required every seven to 10 years. During that time, must score at least 80 percent on two self-assessment modules within clinical areas such as new medical developments in cerebrovascular disease, diabetes, asthma, care of vulnerable elderly, and maternity care. Must present case scenario demonstrations that show competency in new knowledge within module topics. Must complete 300 hours of continuing medical education, in addition to 50 hours of CME each year to maintain state licensure.

Nurse Practitioner

Can waive recertification if they have 1,000 hours of professional practice over the five-year certification period.