

Missouri End-of-Life Coalition
Issue Brief

Controlled Substances Prescriptive Privileges for Advanced
Practice Registered Nurses

Many individuals facing the end of their lives needlessly experience pain and discomfort that could be lessened with improved access to pain-relieving medications. Because dying Missourians receive a growing percentage of their health care services from Advanced Practice Registered Nurses (APRNs), they may not have access to medications and treatments that could improve the quality of their remaining lives.

The Missouri End-of-Life Coalition offers its strong support for HB X/SB Y, which will increase availability of pain-relieving medications to many terminally ill Missourians. We encourage you to consider the following facts regarding controlled substance prescriptive privileges for APRNs:

- Missouri APRNs have been prescribing medications with the exception of controlled substances since 1993. APRNs are authorized to prescribe through a collaborative practice agreement and can only prescribe those medications used within their scope of practice. However, APRNs are educated to prescribe controlled substances along with other medications.
- Controlled substances are divided into five (5) schedules. The most addictive drugs with no recognized medical use are in Schedule I, and those with the least potential for abuse are in Schedule V. Schedules II-V are commonly used in all patient care settings including family practice.

Schedule I – Includes illegal drugs such as heroin and LSD.

Schedule II – Includes commonly used medications such as Adderall and Ritalin for the management of Attention Deficit Disorder (ADD); Demerol and morphine for pain management.

Schedule III – Includes medications such as Vicoden and Tylenol with Codeine for patients with moderate pain levels.

Schedule IV – Includes Ativan – for patients with nausea, vomiting and anxiety; Ambien – to assist with sleep; Valium – a muscle relaxant; Xanax – for anxiety; Darvocet – pain medication.

Schedule V – Includes medications such as Robitussin AC for cough and Lomotil for diarrhea or irritable bowel, and, as of 2005, medications with Pseudoephedrine, such as common decongestants (e.g. Sudafed).

- As of February 2004, only four states other than Missouri do not allow APRNs to prescribe controlled substances.
 - 36 states allow APRNs to prescribe Schedules II-V.
 - 7 states limit APRNs to prescribing Schedules III-V.
 - Only 1 state restricts APRNs to prescribing Schedule V.
 - 1 state allows Schedules I-V.

- Controlled substances are regulated in Chapter 195 of Missouri Statutes under the administration of the DHSS. They are regulated because they have the potential for addiction and abuse, not because they have more serious side effects or adverse effects than other prescription drugs.

- The federal Controlled Substances Act of 1971 gave the Drug Enforcement Agency (DEA) the power to enforce control of potentially abusive drugs. The DEA issued regulations in 1993 permitting APRNs to obtain DEA numbers for the purpose of prescribing controlled substances.

Action Needed: Support HB X/SB Y.

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