

Essay on nurse practitioner and clinical nurse specialist

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Similarities and differences between the Clinical Nurse Specialist (CNS) and Nurse Practitioner (NP)

There are many similarities in the roles of CNSs and NPs. Both of these spend a considerable length of time in direct care of the patient. Both the CNSs and NPs are involved in providing support to patients and their families during the crisis of diagnosis and management of the illnesses. However, CNSs and NPs do have separate and distinct advanced nursing practice roles. Clinical nurse specialists provide care in specialty area like cardiac, oncology, pediatric, gynecological nursing, etc. The role of CNS is to improve the quality of nursing care delivered to patients. The CNS's actual client is the nurse and his/her focus is on the education of nursing staff and system analysis. They are the healthcare practitioners having a Master's degree in a specific area of clinical nursing. Nurse practitioners deliver primary and acute care in clinics, schools, hospitals and other healthcare settings. They also diagnose and treat acute illnesses/injuries, provide immunizations and manage chronic conditions like diabetes. NPs direct client is the patient and the focus is to provide direct care. They spend more time in conducting physical examinations, ordering laboratory tests, prescribing medications and initiating treatment (Fenton & Brykczynsky, 1993; Mick & Ackerman, 2000).

Settings where they work

CNSs work in a variety of settings such as hospitals, community health centers, educational institutes, mental health settings, occupational health centers and private practice. NPs work along with the physicians in clinics,

ambulatory care or long-term care facilities and hospitals. Overall, CNSs work in acute, secondary and tertiary care delivery systems and NPs work primary care delivery systems (Page & Arena, 1994; Fenton & Brykczynsky, 1993).

Circumstances when they provide direct and indirect care

In the direct practice, the NPs and CNSs are involved in direct patient care, and in the indirect practice they are involved in nursing administration. In the direct care, they may work as family nurse practitioner, neonatal nurse practitioner, pediatric, mental/psychiatrist and women's health nurse practitioner. In the indirect care, they may serve as community/public health nurses, clinical research coordinator or nurse managers (Page & Arena, 1994; Fenton & Brykczynsky, 1993).

Role overlap

The roles of CNSs and NPs are overlapping to some extent and this overlap increases the cost effectiveness of the healthcare system. The knowledge, skills and competencies of CNSs and NPs are shared depending on the setting and clinical situation. In certain clinical set ups, the NPs have a significant administrative, consultation, research and education component in their roles overlapping with the CNSs (Fenton & Brykczynsky, 1993; Mick & Ackerman, 2000).

References

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