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Minnesota Nurses Association /  
Minnesota Medical Association

# Memorandum of Understanding

For Written Prescribing Agreements  
Between an Advanced Practice  
Registered Nurse and a Collaborating  
Physician

Revised September, 2005



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## Rationale for the *Memorandum of Understanding*

This *Memorandum of Understanding* has been jointly developed by the Minnesota Nurses Association and the Minnesota Medical Association to assure minimum standards in the preparation of written agreements for the delegation of prescribing authority by physicians to qualified advanced practice registered nurses.

Advanced practice registered nurses who may be delegated prescribing authority by a collaborating physician licensed under Chapter 147 include certified registered nurse practitioners, certified registered nurse anesthetists, and certified clinical nurse specialists. It should be noted that clinical nurse specialists in psychiatric and mental health nursing have a separate and distinct *Memorandum of Understanding* based on standards established by the Minnesota Nurses Association and the Minnesota Psychiatric Society.

Legislation enacted by the 1999 Legislature defines and permits the delegation of responsibilities related to the prescribing of drugs and therapeutic devices but does not provide for the total delegation of physician responsibility. As part of the delegation of prescribing, the collaborating physician has responsibility to provide direction of the prescribing function and the advanced registered nurse has responsibility to act within his/her scope of practice and within the individual prescribing agreement. The collaborating physician and the certified registered nurse practitioner, certified registered nurse anesthetist, or certified clinical nurse specialist have the responsibility to jointly determine the amount of autonomy that will be delegated specific to the prescribing of drugs and therapeutic devices.

## Prerequisites for the Development of a Written Prescribing Agreement

- A written prescribing agreement must be developed and executed prior to the delegation of prescribing authority to a certified registered nurse practitioner, a certified registered nurse anesthetist, or a certified clinical nurse specialist.
  - The prescribing agreement should be jointly developed and reflect the mutual trust and experience of both the advanced practice registered nurse and the collaborating physician.
  - A prescribing agreement must be between an individual advanced practice registered nurse and an individual collaborating physician.
  - Each advanced practice registered nurse with delegated prescribing authority must have a signed agreement with at least one physician licensed under chapter 147.
  - A drug formulary *may be* used as a guideline in the development of a written prescribing agreement.
  - The authority to prescribe extends only to those categories of drugs and therapeutic devices described or referenced in the written prescribing agreement.
  - The agreement does not need to be filed with the Board of Nursing or the Board of Medical Practice.
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## Minimum Standards for Prescribing Agreements

Every prescribing agreement between an advanced practice registered nurse and a collaborating physician must, at a *minimum*, contain the following information:

1. Name of the advanced practice registered nurse, practice address(es), and phone number(s);
2. Specialty and specific certification(s) of the advanced practice registered nurse;
3. Name of the collaborating physician, the practice address(es) and phone number(s);
4. Medical specialty of the collaborating physician;
5. The prescribing agreement shall contain a general description of the practice setting of the advanced practice registered nurse and the physician. Descriptive statements could include information about the nature of the practice, the geographic location, and any other information deemed relevant;
6. Each category of drugs and therapeutic devices that the advanced practice registered nurse may prescribe shall be listed in the agreement along with any specific limitations to prescribing;
7. The physician and the advanced practice registered nurse will establish minimum frequencies and schedules for review of prescriptive practice to assure that the standard of care to which the physician and the advanced practice registered nurse are held is maintained;
8. A written prescribing agreement must be maintained at the primary practice site of the advanced practice registered nurse and of the collaborating physician;
9. An advanced practice registered nurse and a physician must jointly review, sign, and date their prescribing agreement at least annually and whenever the situation calls for amendment; and
10. A prescribing agreement must meet the standards established in any future MNA/MMA *Memorandum of Understanding*.

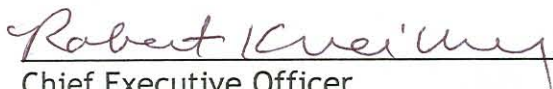
## Previously Existing Prescribing Agreements

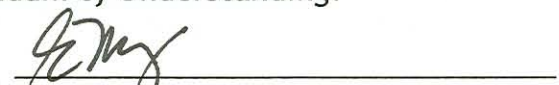
Prescribing agreements existing prior to the 1999 amendments to Minnesota Statute, Chapter 148.235, must be reviewed and updated, if necessary, to comply with the most current MNA/MMA *Memorandum of Understanding*. Any existing prescribing agreements should be reviewed and dated following the execution of this *Memorandum of Understanding*.

## Periodic Review of the MNA/MMA Memorandum of Understanding

This *Memorandum of Understanding* will take the place of any previously existing *Memoranda* and will be reviewed again by the Minnesota Nurses Association and the Minnesota Medical Association by July 1, 2007 and every two years thereafter.

The signatures below signify joint approval of the *Memorandum of Understanding*.

  
\_\_\_\_\_  
Chief Executive Officer  
Minnesota Medical Association

  
\_\_\_\_\_  
Executive Director  
Minnesota Nurses Association

1/27/06  
\_\_\_\_\_  
Date

1/27/2006  
\_\_\_\_\_  
Date

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