Fitzgerald Health Education
Gerontology Programs: Question and Answer with
Margaret A. Fitzgerald
DNP, FNP-BC, NP-C, FAANP, CSP

Question: Fitzgerald Health Education offers two different programs for gerontology. How do these two programs differ?

Reply: Dr. Miller’s Gerontological Nurse Practitioner Certification Exam Review and Advanced Practice Update is a focused review, specifically designed to be part of the final study as an NP prepares to sit for the gerontology nurse practitioner exam.

Ms. Buttaro’s program provides a comprehensive gerontology update. It also supplies a good deal of the contact hours needed to fulfill the alternate GNP criteria put in place by the ANCC. Fitzgerald Health offers a gerontology package which provides 77.3 contact hours to meet the ANCC requirements. In addition, certified gerontologic nurse practitioners can use these as CE for recertification (see details on next page).

Gerontological Nurse Practitioner Alternative Eligibility Ends
December 31, 2010

Individuals who wish to apply for ANCC Gerontological Nurse Practitioner certification using alternate eligibility must submit an application by December 31, 2010. Applications seeking certification through alternate eligibility that are received after December 31, 2010 will not be processed.

Offer of the Month

10% off
Beyond the Basics in 12-Lead ECG Interpretation

Upcoming NP Certification Exam Review Courses

2010 Schedule
10/01/2010 Orlando, FL
11/05/2010 Kansas City, MO
11/11/2010 Dallas, TX
12/01/2010 Sacramento, CA
12/04/2010 Huntsville, AL
12/06/2010 Denver, CO

2011 Schedule
01/04/2011 North Andover, MA
01/07/2011 Baltimore, MD
01/07/2011 Chicago Area, IL
01/12/2011 Atlanta, GA
01/14/2011 Oakland, CA
01/21/2011 Cleveland, OH
02/01/2011 Manhattan, NY
02/26/2011 Minneapolis, MN
03/11/2011 Charlotte, NC
03/17/2011 Philadelphia, PA
03/23/2011 San Diego, CA
04/15/2011 Charleston, WV
04/20/2011 Atlanta, GA
04/29/2011 Greensville, SC
05/04/2011 Chicago area, IL (Also Acute Care)
05/05/2011 Columbus, OH
05/06/2011 Newark, NJ

Click Here to See the Complete 2011 Schedule
The ANCC has recently announced a certification test to enable licensed Adult, Family, and Acute Care Nurse Practitioners who treat older adults to use alternative eligibility criteria to qualify to sit for ANCC’s Gerontological Nurse Practitioner certification exam. Visit www.nursecredentialing.org for details. FHEA provides 77.3 contact hours to meet the ANCC requirements in the following three programs:

### Comprehensive Gerontological Update
Earn 35 contact hours* by taking FHEA’s Comprehensive Gerontological Update designed specifically to help meet the eligibility requirements.

- Aging Demographics
- Health Assessment
- Clinical Management of Acute and Chronic Illnesses: Skin, Cardio, Respiratory, Gastrointestinal, Genitourinary, Gynecologic, Musculoskeletal (common arthritis problems), Neurologic, Endocrine/Metabolic, Immunologic, Multisystem Disorders, Psychosocial
- Pharmacologic Issues in Older Adults (including Polypharmacy)
- Geriatric Syndromes: Constipation, Dementia/Delirium, Anxiety/Depression, Falls, Failure to Thrive, Functional Loss, Incontinence, Sensory Loss, Sleep Disorders, Pain Management*
- Palliative Care
- Ethics
- Advanced Directives
- Elder Abuse/Neglect
- The Nurse Practitioner/Patient/Family Relationship
- Professional Role and Policy
- Research Utilization

**5 day live seminar $699 (On-line version coming soon)!**

### The Gerontological Pharmacology Package
Earn an Additional 24.8 contact hours* from these lectures:

- Antibiotic Update: A Focus on Treatment Options in Community-acquired Pneumonia.
- Principles of Safe Prescribing: Pharmacokinetics, Pharmacodynamics, Pharmacogenomics, Drug Interactions.
- Pharmacogenomics: Exploring Genetic Variation in Drug Metabolism.
- Prescribing in the Elder.
- The Golden Years: Understanding and Treating Skin in the Older Adult.
- Refining Laboratory Assessment Skills in Drug Monitoring.
- Evaluation of Renal Function.

**Now available on-line for $109 or CD set for $160**

### Nurse Practitioner Advanced Practice Update—Gerontological Track
Review gerontological essentials to earn 17.5 contact hours* net of test preparation content. 2 day live seminar (or recorded) with additional 2 hours on-line. Available on-line for $260 or CD set for $381.

- Preparing for Exam and Test Taking Strategies
- Primary Prevention: Health Promotion and Immunization
- Secondary Prevention
- Geriatric Demographics
- Theoretical Foundations of Advanced Gerontological Nursing Practice
- Scope and Standards of Advanced Gerontological Nursing Practice
- Wellness Assessment of the Gerontological Patient
- Age-related Physiologic Changes
- Illness Assessment of the Gerontological Patient
- Pharmacology Considerations in the Gerontological Patient
- Blepharitis, Macular Degeneration, Cataracts
- Hypertension, Coronary Artery Disease, Peripheral Arterial Disease
- Pneumonia, Asthma, Pulmonary Embolus
- Constipation, Diarrhea, GERD, Diverticulitis, Abdominal Pain
- UTI, BPH, Atrophic Vaginitis
- Arthritis, Gout, Osteoporosis
- Dementia, Delirium, Depression, Movement Disorders, TIA
- Diabetes, Thyroid Disorders, Anemias
- Skin Ulcers, Lesions, Decubitus Ulcers
- Select Ethical, Legal, Cultural, Epidemiologic and Professional Practice Issues (delivered via FHEA’s NPexpert on-line learning portal)

**Now available on-line for $260, on CD set for $381 and live from $381 to $452.**

* Post-tests included in fee for these programs.

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For more information about these products visit [www.fheacom](http://www.fheacom)
Breastfeeding is a Green Practice
by Marie L. Bosco, BSN, RNC, IBCLC

Breastfeeding is not only beneficial to mothers and babies; it is also beneficial to the environment. This is a renewable resource that is readily available and produces little waste. Breastmilk is produced and tailored to infant feeding needs and digested more completely than formula. Formula is a processed product; the production of formula along with bottles, boxes, paper and plastics take energy to make and transport. Much of the waste from formula feeding that could be recycled ends up being dumped in the trash. Breastfeeding reduces non-renewable energy source use. Gasoline use is reduced when formula does not need to be shipped or bought at stores.

Breastfeeding also reduces exposure to chemicals. Plastic bottles contained BPA (bisphenol-A) until recently, which leaked into formula, soil and water. Lead-free glass bottles may be a safer choice but come with their own issues related to recycling. Toxins and chemicals are filtered during milk production, making it a safer choice. Every year, formula companies have recalls due to contamination. Breastfeeding avoids this problem and provides nutrition to the infant, protection against virus and bacterial infection. In fact, breastfeeding mothers usually make fewer car trips to the nursing baby’s healthcare provider because they don’t get sick as often. Breastfeeding not only reduces the carbon footprint but supports a healthy body, community and country. Breastfeeding is clearly the most complete, organic, easily accessible, environmentally sound feeding choice for mothers and infants.

Infant Formula Recall
by Jaclyn Fitzgerald

One of the many benefits of breastfeeding is that mothers do not have to worry about the possibility of feeding their child a formula that may be recalled due to contamination. On September 23, 2010, Abbott Laboratories announced that they were recalling some Similac Powder Infant formulas in the United States, Guam, Puerto Rico, and parts of the Caribbean. According to Abbott, an internal review revealed the risk of beetles in the formula. The recall includes both milk and soy based Similac formulas in cans and plastic containers. The Food and Drug Administration stated that there are no major health risks involved with these beetles or their larvae, but parents and caregivers should seek out the assistance of a healthcare provider if they notice that a child who has ingested the product refuses to eat for a couple of days. For a complete list of the lot numbers of the recalled formulas, please visit: http://abbot.vo.llnwd.net/o18/similac/sms/pdf/similac-recall-lot-numbers-09-26-2010.pdf

References:


Special Offer!
Call to 1-800-927-5380 pre-order these products and get 25% off!

“Nurse Practitioners: The Healthcare Solution” Hat
(One size fits all)

“Future Nurse Practitioner” Scrubs
(size 6mo, 12mo, 2T, 3T, child 5, child 7).
Springer Publishing’s title *How to Run Your Nurse Practitioner Business: A Guide for Success* by Grossman, Sheila, PhD, FNP-BC, APRN; O’Brien, Martha Burke, MS, ANP-BC, APRN was the top rated book in *Doody’s Review Service Weekly Literature Update* email newsletter. The foreword was written by Margaret Fitzgerald, DNP, FNP-BC, NP-C, FAANP, CSP.

**Forward**

This is a most stimulating time for the expanding number of nurse practitioners (NPs), who are seeking challenges and opportunities that will also be financially profitable. But how does the NP take advantage of these opportunities? Grossman and O’Brien have written *How to Run Your Nurse Practitioner Business: A Guide for Success* for the NP of the twenty-first century.

The authors have threaded their model, “Elements of the Nurse Practitioner Role,” throughout the book and given realistic examples to explain the four elements of the NP role: Clinician, Leader, Manager, and Professional. The authors have combined their collective knowledge and experience to illustrate how these four elements can prepare an NP to start a business. Section III contains templates that the NP can individualize for his or her own practice setting. In addition, examples show how to develop many essential documents, including:

- Letter of intent for applying for a grant
- Résumé and biographical sketch
- Patient satisfaction tool
- Collaborative practice agreement

Everything needed to develop one’s own practice is generously shared, along with an explanation of the regulatory statutes for starting a business, managing a practice setting, budgeting and planning for financial stability, obtaining practice accreditation, evaluating staff, and generating high-quality patient outcomes.

In addition, the authors have woven reflective practice into their recommendations as a way for NPs to acquire further insight and skills. The book’s purpose, to generate excitement for learning a new way of thinking reflectively, of seeing things more holistically as opposed to in a detail-specific environment, and of collaborating with networks of people on a continuous basis to establish partnerships, comes through clearly and offers the reader a path to gain confidence and growth in each element of the NP role.

Resilience is one of the characteristics NPs embody, as they have the innate ability to persist and succeed in the face of adversity. In *How to Run Your Nurse Practitioner Business: A Guide for Success*, the authors reflect on how NPs need to practice the “art of possibility” (Zander & Zander, 2000), so that they are always prepared to answer the next question about management, address a clinical concern, or resolve a reimbursement issue with a creative plan. Grossman and O’Brien also recommend collaborative networking and partnering as opposed to the mentality that says “everyone for themselves” or “the fittest survive and the others lose.” NPs need to learn through collaboration. In this way, NPs will ultimately improve their leadership, management, professional, and practice skills.

Many healthcare work settings are led by managers who have been educated clinically, but often lack proactive leadership skills. Grossman and O’Brien advocate for change that will result in a win-win workplace that is led by NPs who are true leaders, not simply managers. They agree with Bennis and Nanus (1985), who remind us that “managers are people who do things right and leaders are people who do the right things” (p. 21). This is not one of those “okay, I read that new NP book” that you will put on a bookshelf, but rather a book that you will use time and again.

This is what NPs have been waiting for – a book that inspires them to energize their practices, provide a framework and reference to make their practices more rewarding, and to create work places where all can strive for best practice. Nurse practitioners must take the opportunities that come with these expanded practice and leadership responsibilities and be prepared to fulfill the exciting and challenging role of the twenty-first century NP.

Margaret Fitzgerald, DNP, FNP-BC, NP-C, FAANP, CSP
President, Fitzgerald Health Education Associates, Inc., North Andover, MA. Family Nurse Practitioner, Adjunct Faculty, Family Practice Residency Greater Lawrence (MA) Family Health Center

**References**


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**How to Run Your Nurse Practitioner Business: A Guide for Success**

This book serves as an authoritative reference designed for nurse practitioners (NPs), masters and doctoral level students, and administrators interested in developing and managing high-quality, cost-effective, and patient-accessible healthcare in NP settings.

[Read more about this book](#)
An Interview with Lori Martin-Plank, PhD, FNP-BC, GNP-BC, FAANP
by Emily Paquin, Editor

Dr. Lori Martin-Plank is a nurse practitioner health policy advocate from Pennsylvania (PA). She has served as an American Academy of Nurse Practitioner (AANP) group member and a Board member of the PA Coalition of NPs. She was influential in the writing of a White Paper, which became a Prescription for PA Healthcare Reform. She was also a vital force in crafting Act 48, a bill which gives NPs more power and responsibility in Pennsylvania. Martin-Plank has helped contribute to the numerous strides to level the political playing field between nurse practitioners and physicians. What follows is an informative question and answer session about how nurse practitioners can become involved in health policy.

Question: How did you get started as a health policy advocate?

Response: My first contact with health policy was as a student at the University of North Carolina (UNC)-Chapel Hill School of Public Health. This taught me to see the “big picture” of population health and the role of policy in shaping those agendas. After graduating from my nurse practitioner program at the University of Pennsylvania, I became active in the Philadelphia Area Nurse Practitioner Group. Nurse practitioners in Pennsylvania were under the “joint promulgation” regulation from the Board of Nursing and the Board of Medicine and we had been told that we did not have prescriptive authority. Our agenda was to be regulated solely by the State Board of Nursing and to be able to legally write prescriptions for our clients. I was assigned to attend the Board of Medicine meetings initially. As the issue evolved, it became necessary for us to give testimony to the Board of Nursing on how this inability to prescribe was adversely affecting our clients. It was inspiring to be one of many nurse practitioners who went to Harrisburg and told our stories for the clients. We were ultimately successful after quite a struggle but I realized that the power of many begins with the action of one.

The second mobilizing force that caused me to become involved in health policy was the Nurses’ March on Washington, DC, in the 1990s. I was teaching in associate degree program and a bus transported us to the capital. It was exciting to get the students on-board. That was a very powerful experience. Since then I have continued to work through professional groups and as an individual on changing policy. I try to keep in touch with my local and state policymakers and have also contacted Federal lawmakers and gone “on the Hill” to work on issues. I attended a Legislative Leadership training held by the AANP and that was a great help in focusing these efforts. We are fortunate that the American Academy of Nurse Practitioners, the American College of Nurse Practitioners, and the National Association of Pediatric Nurse Practitioners all work together to keep us informed on issues that affect our practice. The health policy course in my doctoral program at Duquesne University was also very practical and beneficial.

Question: Why should NPs get involved in health policy?

Response: Why not get involved? If NPs want to become licensed independent providers, we need to advocate for that. Although all major nursing organizations have signed on to the Consensus Document (available at https://www.ncsbn.org/7_23_08_Consensus_APRN_Final.pdf, accessed 9.24.10), policy and regulatory changes will need to occur in order to implement this. We must grab the wheel of the ship and steer it in the right direction. One comment that I hear frequently from my congressional representatives is that they do not know NPs and what our agendas are. They want to hear from us; we need to respond.

Question: You say that NPs lack lobby in Congress. Why do you think this is, and what can NPs do to change this?

Response: Some NPs have tunnel vision and are focused only on the day-to-day concerns of practice. They fail to see how these issues are a microcosmic piece of a larger problem. They are too busy to become involved in political issues, or it is out of their comfort zone. They don’t understand the value of a lobbyist. Many of us in Pennsylvania have learned that lesson, thanks to Morgan Plant, lobbyist for the Pennsylvania Coalition of NPs. Groups such as AANP, ACNP, and NAPNAP have helped us, but each NP needs to do his/her part. So, join your national, state and local NP organizations! Here are the websites for three of them (http://www.aanp.org/; http://www.acnpweb.org/; http://www.napnap.org/)

(Continued on next page)
**Need a Speaker?**

If you are interested in having Dr. Fitzgerald or one of our other talented associates speak at your school, local, regional or national conference, please e-mail: services@fhea.com for more information. Conference administrative services are also available.

**Fitzgerald Health Education Associates Raffle Winners!**

Fitzgerald Health Education recently held two raffles. The first was at the United Advanced Practice Registered Nurses of Georgia conference (UAPRN), the second was at the Illinois Society for Advanced Practice Nursing conference (ISAPN). One customer from each conference won the audio CD set *Treating Common Primary Care Problems* by Margaret Fitzgerald and associates—Debby Godwin (UAPRN winner), and Brenda Meintz (ISAPN winner). In addition, one customer from each conference won the book *Nurse Practitioner Certification Examination and Practice Preparation, 3rd Edition* by Margaret Fitzgerald—Kristie Lawson (UAPRN winner) and Christina Bambach (ISAPN winner). Congratulations to all of the winners and thanks to all who entered!

**12th ANNUAL Iowa Nurse Practitioner Society Conference**

**presented by:**

**Iowa Nurse Practitioner Society**

**Location:**

The Marriott at West Des Moines Hotel
1250 Jordan Creek Drive
Des Moines, IA 50266

**Dates:**

November 3-5, 2010

**Purpose:**

This CEU program is designed to provide ARNPs with the latest information related to a variety of practice settings.

**Objectives:**

1. Understand current and evolving information in health care
2. Identify concepts relevant to Individual practice
3. Interact with Iowa NPs to promote relationship building

**Keynote Speaker:** Wendy Wright will be presenting updates on drug changes and malpractice.

The highlights of the conference include, exciting Pre-Conference Boot Camps in 3 specialty areas. A variety of breakout sessions will appeal to all specialties.

Registration is available online at: http://www.iowanpsociety.org

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(Question and Answer with Lori Martin-Plank: Continued from page 5)

**Question:** What is Act 48 and how has it affected nurse practitioners in Pennsylvania?

**Response:** Act 48 is the final legislation affecting NPs that evolved from Governor Ed Rendell’s “Prescription for Pennsylvania” initiative. Ideas from a White Paper on Barriers to Practice for NPs in Pennsylvania, written by the Pennsylvania Coalition of NPs, formed some of the foundation for this legislation. I think a major effect was the national publicity and feeling of accomplishment that we all had in working closely with our state elected officials on this legislation. Passage of some provisions, such as the ability to order home health and hospice, was tempered by barriers to this at the Federal level that impacted us (which we are currently working on with Pennsylvania Representative Allyson Schwartz’s bill). We are now able to initiate referrals for physical and occupational therapy (PT, OT), dietary, and respiratory therapy, certify children for homebound schooling, perform disability assessments in the Temporary Assistance for Needy Families (TANF) program, and give oral orders in long-term care settings. Subsequent to the passage of Act 48, our nurse practitioner regulations were updated by the State Board of Nursing allowing expanded prescribing of Schedule II through V drugs.

**Question:** What advice would you give to the NP who wants to enact change but does not know where to start?

**Response:** Vote! Join a local, state, or national NP group. Look on the websites of these groups for information. Meet your legislator. If nothing else, make a contribution to the Political Action Committee Fund (PAC) for your area NP organization. When election time comes, read about the candidates’ stance on issues. If a particular issue concerning clients comes up in your practice, write or email about it and the impact that it has on client care. Your clients are also constituents for your legislator; tell their stories for them. Clients are also voters; ask them to advocate if they value your services. The best way to remain powerless is to do nothing!
Question and Answer with Dr. Fitzgerald: Information about Contact Hours

**Question:** I have been in practice and am certified, I would like to take your certification review course again, as a comprehensive update/review, if I do this, will I get continuing education credit?

**Answer:** Yes. There are three ways to take this course, you can take it live, on-line, or on audio CD. Each form of study is multi-media and includes:

- Slides
- Lectures
- Workbook
- Hundreds of sample questions
- On-line review of questions for content reinforcement
- Contact hours (varies by track. To see a breakdown of courses by track, click here).

**Question:** Do contact hours need to be approved or accredited by a national organization?

**Answer:** Yes. Both the AANP and the ANCC offer certification for family and adult NPs. Other organizations offer certification for specialities such as geriatric, pediatric, acute care, and women’s health NPs. If you have been ANCC certified since January 1, 2003, 50% of your contact hours must be provided by an ANCC accredited or approved provider. See the ANCC website for a list of approved organizations: [http://www.nursecredentialing.org](http://www.nursecredentialing.org).

Please note that the AANP, the accrediting organization for Fitzgerald Health Education Associates, is approved by the ANCC. Thus, continuing education hours earned from Fitzgerald Health qualify for both AANP and ANCC credit.

For an easy and convenient way to keep track of your contact hours, use FHEA’s Contact Hour Tracker (see AD on right).

Want to read more articles like this? Click here for more question and answer sessions with Dr. Fitzgerald

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**Upcoming Suturing Conference**

**The Art of Wound Repair—Suturing for NPs and PAs**

**Instructor:** Robert M. Blumm, MA, PA-C  
**Location:** New York, NY  
**Date:** February 2, 2011  
**Class hours:** 8:30AM - 4:30PM

Wound repair is a necessary skill for all NPs and PAs. It is usually placed into their academic curriculum with the knowledge that there will be an extensive period of practical application as they continue their studies and move forward into rotations. However, NPs and PAs graduate from their programs and pass their boards without acquiring this useful and billable skill.

This workshop will be a full-day course with the utilization of a pig’s foot, anesthesia tips, 4-0 nylon suture, and a disposable stapler. Dermabond and other newer products about to come on the market will be covered, as an introduction to the use of a bio-adhesive in the care of lacerations.

**Click here for more information**

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**Contact Hour Tracker**

**Never lose track of your certification, professional license and contact hour data again!**

Thousands of your colleagues have already discovered this time saving tool. Contact Hour Tracker is a no-cost internet service available on Fitzgerald Health Education Associates’ NP Expert website.

- Store all your certification and license documentation dates and CE requirements.
- Keep track of all your continuing education hours as they occur.
- Contact Hour Tracker logs FHEA earned contact hours automatically.
- Enter contact hours from any CE provider.
- Monitor deadlines and CE requirements for multiple agencies.
- Track your progress toward contact hour goals.
- Set up electronic “alarm clocks” to receive automatic e-mail reminders for all upcoming license and certification renewal dates.
- Print contact hour summaries by category and source to help complete certification and license renewal paperwork.

Go to [www.npexpert.com](http://www.npexpert.com) to register.
InfantRisk Center

Many mothers use medications during pregnancy and while breastfeeding. The InfantRisk Center is designed to provide information about the use of medications during pregnancy and breastfeeding. The goal of the InfantRisk Center is to reduce birth defects in infants and to reinforce healthy breastfeeding relationships.

Read more about the InfantRisk Center: [http://www.infantrisk.org/](http://www.infantrisk.org/)

Notable NPs:

The Nurse Practitioner Hall of Fame

Dr. Fitzgerald was recently recognized as a Notable NP by the Nurse Practitioner Degree website. Members are inducted into the website’s Nurse Practitioner Hall of Fame. Awards are given to NPs who “have stood out as shining examples of nursing advocacy and patient advocacy and treatment.”

Click here for more information and see a complete list of Notable NPs

Study with a Master

Dr. Margaret A. Fitzgerald's Speaker School
Fitzgerald Health Education Associates Conference Center
85 Flagship Dr, North Andover, MA 01845
March 3–4, 2011
Earn 14 Contact Hours!

If you have ever wanted to share your practice expertise by speaking to other providers, or if you just want to improve your “platform skills,” this is the seminar for you! This two-day intensive workshop will be led by Dr. Margaret Fitzgerald, one of the most experienced, well-known, and skilled NP speakers in the country. With more than one thousand presentations to her credit, she has been recognized by the NP community for her dynamic speaking abilities. Dr. Margaret Fitzgerald also earned the coveted Certified Speaking Professional (CSP) designation from the National Speakers Association.

Dr. Margaret A. Fitzgerald's Speaker School will make extensive use of recorded practice presentations prepared by participants, recorded in the FHEA studio, and critiqued by instructors and peers. Hands-on presentation preparation and slide development techniques will be covered. Also learn how to improve your "speaking voice." The workshop is limited to twenty participants. A personal laptop equipped with Microsoft PowerPoint will be required.

Click here for more information

Questions for Dr. Fitzgerald:

Advice for the New NP

Question: I am in the process of trying to get my first job as a nurse practitioner at a physician’s office. The physician has never hired an NP. Should I ask to be salaried or paid hourly? How much might I expect to earn?

Answer: Do some research on salary.com, Advance for NP, and AANP. These sites have salary and benefit information. I would not consider a job without 4 weeks vacation plus paid CE. Your employer needs to pay FICA on any additional salary; hence simply moving money from a benefit to salary is not attractive. I say this as an employer.

Question: How does the reimbursement work?

Answer: The reimbursement issue is complex. Please check Carolyn Buppert, NP, JD’s website for great information on this ([http://www.buppert.com/](http://www.buppert.com/)). To be blunt, unless you know how to generate income to cover your salary and benefits, do not take a position. Being the first NP in a practice is a great responsibility, as you need to guide your way and the practitioner’s way. I have done this and it is quite a challenge.

Question: Since I’ve been out of the job market for a long time and I’m not sure how to handle all this. Do you have any other advice that might be helpful?

Answer: Try to spend at minimum half of the day at the practice as an observational experience, then spend the other half of the day (all unpaid) discussing patients with the physician to see how your role will evolve. Develop a job description so that all expectations are clear. And remember, you will pave the path for all NPs who work in this practice, so excelling is critical!

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Educational Travel

Upcoming Course Location
Sheraton Maui Resort and Spa,
Lahaina, HI
March 15 and 16, 2011
8:00 a.m. to 1:00 p.m.

Due to the overwhelming success of the Pharmacology Update in Maui in March of this year, FHEA is offering the 2011 version of this seminar on Maui’s Ka’anapali beach at the Sheraton Maui Resort & Spa. Be sure to book your air and hotel reservations early as this is a very busy season in Hawaii!

Featuring:
- The latest in treatment options
- In-depth pharmacologic information on clinical conditions you encounter in practice

Click here for more information
5 ¾ Day Advanced Pathophysiology for NPs and Advanced Practice Clinicians

Manhattan, NY
July 18-23, 2011

Presented by:
Sally K. Miller, PhD, ACNP-BC, ANP-BC, FNP-BC, GNP-BC, CNE, FAANP
Margaret A. Fitzgerald, DNP, FNP-BC, NP-C, FAANP, CSP

Earn 45 Contact Hours!

- Presented by highly acclaimed clinician-educators who currently maintain clinical practice, thus bringing clinical relevance to the classroom in addition to their knowledge and teaching skills in pathophysiology.
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- On-line version allows students to proceed at their own pace and earn contact hours as they complete each module.

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This course addresses the growing need for a thorough course in the principles of pharmacotherapeutics. Prescribing has become a major part of the role of advanced practice nurses while at the same time, prescribing has become more complex and polypharmacy is more prevalent with the possibility of adverse interactions. Thus, a course of this caliber is critical to the preparation of advanced practice nurses.

The course is taught in an intensive format by two of the nation’s most respected NP educators. In addition, recorded lectures of this course form the basis for other university NP pharmacology courses including Pennsylvania State, Pace University, Neumann College, Georgia College and State University. The material constitutes the equivalent of a three credit university course in pharmacology.

Pharmacology contact hours: 45.0**
Code: PCON — standard $799; advance: $750¹; early bird: $699²

Can’t attend a live course? This program is also available on-line* Click here for more information

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Topics covered in this course:

- National legal and practice issues.
- Principles of safe prescribing: Pharmacokinetics, pharmacodynamics, pharmacogenomics, drug interactions.
- Prescribing in special populations: Pregnancy, lactation, children, older adults.
- Hormonal contraception and post menopausal hormone therapy.
- Pharmacologic management in type 1 and type 2 DM: Oral agents, insulin and non-insulin preparations.
- Principles of antimicrobial therapy: Intervention in bacterial infection.
- Drugs that affect the respiratory system: Beta2 agonists, methylxanthines, anticholinergics, mast cell stabilizers, inhaled and systemic corticosteroids, leukotriene modifiers, over-the-counter cough and cold medications.
- Evaluation and intervention in common thyroid disorders.
- Assessment and intervention in common anemias.
- Drugs that affect the cardiovascular systems: Antihypertensives, antianginals, dysrhythmics, medications used in the management of heart failure.
- Pharmacologic treatment of lipid abnormalities and drugs that affect clotting.
- Drugs that affect the GI system: H2 receptor antagonists, proton pump inhibitors, antacids, prokinetics, anti-diarrheals, including over-the-counter cough and cold medications.
- Management of viral, fungal and protozoal infection.
- Management of pain; opioids, NSAIDs and others including over-the-counter medications.
- Management of eye, ear, and skin disorders.

For more information visit: www.fhea.biz

Note 1: Registrations received or postmarked between two months and two weeks prior to the start of the course qualify for this rate.
Note 2: Registrations received or postmarked more than two months prior to the start date of the course qualify for this rate.

Upon receipt of your enrollment and full payment, you will receive a confirmation of registration and directions to the course. A fee of $50.00 will be charged for cancellation. No refunds will be granted within two weeks of the starting date. All cancellations and changes must be received in writing.

* Contact hours differ from the live course. See www.fhea.biz for details.

**Because states’ requirements vary, it is important that you contact your Board for details regarding educational requirements for prescriptive authority.
### Dr. Margaret Fitzgerald’s Upcoming Speaking Engagements

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