

A large banner hangs from a building, featuring the text 'COLUMBIA UNIVERSITY' and 'SCHOOL OF NURSING' in a serif font. The banner is dark with light-colored text. The background of the entire cover is a photograph of a building facade with a banner, partially obscured by trees and a blue sky.

Case Studies

THE DOCTOR OF NURSING PRACTICE DrNP

Setting a New Standard in Health Care

Columbia University School of Nursing
2005

In Conjunction with the Hope Heart Institute



Competencies of a Doctor of Nursing Practice (DrNP)

The DrNP graduate demonstrates expertise in the provision, coordination, and direction of care to patients, including those who present in healthy states and those who present with complex, chronic, and/or comorbid conditions, across clinical sites and over time. DrNP competencies build upon established competencies at the master's degree level and national certification.

DrNP graduates:

- Provide health promotion, anticipatory guidance, counseling, and disease prevention services to healthy or sick patients in any clinical setting based on age, developmental stage, family history, ethnicity, and individual risk, including genetic profile.
- Apply principles of epidemiology, environmental health, and biostatistics to identify population or geographically based risks to health of specific patients, and take action to reduce their risk.
- Formulate diagnostic strategies to deal with ambiguous or incomplete data in developing differential diagnosis for patients that present with new conditions and those with complex illnesses, comorbid conditions, and potential multiple diagnoses with attention to scientific evidence, safety, cost, invasiveness, simplicity, acceptability, adherence, and efficacy in all clinical settings.
- Determine the need for emergency evaluation and/or inpatient admission, and manage/co-manage and coordinate the care of patients in the emergency, acute, and subacute setting.
- Identify and select appropriate interventions that incorporate cultural values that meet the needs of specific patients at all levels of acuity in the most appropriate setting.
- Establish and utilize a collaborative network of specialists while maintaining primary responsibility for patient care; and accept referrals from other health professionals and agencies to provide optimum care.
- Manage chronic illness utilizing specialists, other disciplines, community resources, and family, to provide a seamless flow of patient data and continuity of care when the focus of care shifts among office, hospital, home, chronic care facility, or community settings.
- Identify gaps in access and/or reimbursement that compromise patients' optimal care and apply current knowledge of the organization and financing of health-care systems in order to ameliorate negative impact and/or reduce barriers to patient access.
- Introduce and guide the process of planning end-of-life care by facilitating understanding of diagnoses and prognosis, clarifying patient desires and priorities, promoting informed choices through discussion with patient, family, and members of the health-care team.
- Utilize the principles of legal and ethical decision-making to identify and analyze dilemmas that arise in patient care, interprofessional relationships, research, and practice management; take action to resolve the issues.
- Utilize and synthesize evidence from practice and patient databases, perform data mining, and analyze data to generate evidence from practice to improve patient care.