What is a Physician Assistant (PA)?

Physician Assistants or Physician Associates (PAs) typically obtain medical histories, perform examinations and procedures, order treatments, diagnose diseases, prescribe medication, order and interpret diagnostic tests, refer patients to specialists as required, and first or second-assist in surgery. They work in hospitals, clinics and other types of health facilities, or in academic administration, and exercise autonomy in medical decision making. PAs practice primary care or medical specialties, including emergency medicine, surgery, cardiology, etc., according to a legal scope of practice that may vary across jurisdictions. PAs perform these roles within a scope of practice established by the supervising doctor in accordance with the state regulations; generally speaking, PAs can perform any task delegated by the doctor. A period of extensive clinical training precedes obtaining a license to practice as a physician assistant, and similar to physician training but shorter in duration, includes all systems of the human body. Renewal of licensure is necessary every few years, varying by jurisdiction. Physician assistants may also complete residency training, similar to physicians’ residencies but significantly shorter, in fields such as OB/GYN, emergency medicine, critical care, orthopedics, neurology, surgery, and other medical disciplines.

What is a Nurse Practitioner (NP)?

Nurse practitioners (NPs) manage acute and chronic medical conditions, both physical and mental, through history and physical exam and the ordering of diagnostic tests and medical treatments. NPs are qualified to diagnose medical problems, order treatments, perform advanced procedures, prescribe medications, and make referrals for a wide range of acute and chronic medical conditions within their scope of practice. In addition to building upon and expanding their nursing knowledge and skills, the nurse practitioner also learns medicine and uses medical diagnoses and medical treatments in their practice.

Depending upon the state in which they work, nurse practitioners may or may not be required to practice under the supervision of a physician. In consideration of the shortage of primary care/internal medicine physicians, many states are eliminating "collaborative practice" agreements and nurse practitioners are able to function independently. NPs—particularly in the area of primary care/internal medicine—fulfill a vital need for patient healthcare services, and the nurse practitioner works with physicians, medical/surgical specialists, pharmacists, physical therapists, social workers, occupational therapists, and other healthcare professionals to achieve the best outcomes for patients.

NPs may serve as a patient's primary healthcare provider and they may treat patients of all ages depending upon their specialty. With commensurate education and experience, nurse practitioners may specialize in areas such as cardiology, dermatology, oncology, pain management, surgical services, orthopedics, women's health, and other specialties. Similar to all healthcare professions, the core philosophy of the nurse practitioner role is individualized care that focuses on a patient's medical issues as well as the effects of illness on the life of a patient and his or her family. NPs tend to concentrate on a holistic approach to patient care, and they emphasize health promotion, patient education/counseling, and disease prevention. The main classifications of nurse practitioners are: adult (ANP); acute care (ACNP); gerontological (GNP); family (FNP); pediatric (PNP); neonatal (NNP); and psychiatric-mental health (PMHNP). Adult-gerontology primary care nurse practitioner (AGPCNP) is a classification that has recently evolved.

In addition to providing a wide range of healthcare services, nurse practitioners may conduct research, teach, and are often active in patient advocacy and in the development of healthcare policy at the local, state, and national level.