

Journal of the American Association of Nurse Practitioners

Guidelines for Advertising

September 2018

Mission

The mission of the American Association of Nurse Practitioners (AANP) is to empower all nurse practitioners to advance quality health care through practice, education, advocacy, research and leadership.

Background

Nurse practitioners and other advanced practice nurses are full partners in directing, managing, implementing, and coordinating patient care. In many states within the United States, nurse practitioners are recognized by law as independent practitioners. Many types of advanced practice nurses work independently in delivering and overseeing patient care, and many also own and operate businesses where healthcare is delivered. This authority and responsibility should be reflected in the advertising language directed at these and all other healthcare professionals.

Guidance from AANP

The use of terms such as “mid-level provider” and “physician extender” in reference to nurse practitioners (NPs) individually or to an aggregate inclusive of NPs is inaccurate and misleading. The American Association of Nurse Practitioners opposes the use of these terms and calls on employers, policy-makers, health care professionals and other parties to refer to NPs by their title. In 2010, the IOM developed a blueprint for the future of nursing. A key recommendation of this report is that NPs should be full partners with physicians and other health care professionals. Achieving this recommendation requires the use of clear and accurate nomenclature of the nursing profession.

In addition to the terms cited above, other terms that should be avoided in reference to NPs include “limited license providers,” “non-physician providers,” and “allied health providers.” As it would be inappropriate to call physicians non-nurse providers, it is similarly inappropriate to call all providers by something that they are not. Similarly, the usage of the term “allied health provider” has no clear definition or purpose in today’s environment.

Excerpted from: AANP. *White paper: Use of Terms Such as Mid-Level Provider and Physician Extender*. AANP, 2015.

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1. Advertising content should include language that is inclusive of all providers who assess, manage, prescribe, and order treatments for patients. The use of terms such as “provider”, “ordering provider”, and “health care provider” is encouraged.
2. In cases in which advertising is aimed solely at nurse practitioners and/or advanced practice nurses, those titles should be used.
3. Exclusionary language is not appropriate. Examples of exclusionary language include “doctor” and “physician” when these are used as the sole reference to ordering providers. As an alternative to exclusionary language, advertisers may choose to list nurse practitioners, physicians, et cetera, or to use inclusive language such as that listed in #1 above.
4. The use of the following terms is not appropriate: mid-level provider, physician extender, limited license provider, non-physician provider, and allied health provider. The use of any terms that imply inferiority of any type of ordering provider when compared to another is not consistent with AANP values.
5. Use of the term “doctor”: Many types of healthcare providers such as nurse practitioners, other advanced practice nurses, allopathic physicians, osteopathic physicians, pharmacists, psychologists, physical therapists and others have earned doctoral level degrees. Some advertisements are still found that use the term “doctor” when referencing allopathic and osteopathic physicians. When used in this manner, the term is vague and inaccurate, and may be misleading to patients. Each type of provider should be referred to using the title that is reflective of the provider’s licensure (physician, nurse practitioner, et cetera) rather than a broad and nonspecific academic credential.

Drafted by K. Curry

Reviewed by AANP management