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From Medscape Nurses

## **US Nurse Practitioner Prescribing Law: A State-by-State Summary**

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Variations in state nurse practitioner (NP) prescribing law have become less pronounced in the years since this Medscape resource was first created. Current differences among many states are subtle to negligible. For NPs in 2 states, though, authority to prescribe any schedule of controlled substances is not allowed. Two other states are waiting for final rulemaking before their legislative acts enabling NPs to prescribe controlled substances become effective. For NPs in several states, a variety of restrictions on controlled substances prescribing remains.

This summary is designed to allow easy identification of NP prescriptive authority throughout the United States. The information is updated annually and verified through online review of state statutes and regulations and/or by direct communication from state Boards of Nursing. States are encouraged to send interim updates to the [editor](#).

Each link on the map provides a summary of the NP's general authority to prescribe and particular authority to prescribe controlled substances in that jurisdiction. Also shown are any specified elements of a written prescription beyond the standard requirements. Since a few broad principles apply to all states and DC, they are listed as follows rather than at each link:

- Any prescription written for a controlled substance will include the NP prescriber's federal US Drug Enforcement Administration (DEA) number, denoting the NP's independent or plenary authority to prescribe in accordance with state scope of practice.
- It is assumed that every prescription will include the standard information expected from all authorized prescribers, such as the prescriber's name, title, license/specialty, ID/Rx number as applicable, practice address, and phone number; the patient's name; the date of the prescription; and the name of the drug, strength, dosage, route, specific directions, quantity, number of refills, and instructions regarding generic substitution.
- The cosignature of a collaborating physician is *not* required in any state on any prescription that an NP is authorized to write.

Other useful resources related to this information may be found at the Web sites of state boards of nursing and pharmacy, which are accessible through the [National Council of State Boards of Nursing](#) and the [National Association of Boards of Pharmacy](#), respectively.

## **Alabama**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #
- All prescriptions must show collaborating physician's name and address
- Authority to prescribe controlled substances is not granted

## **Alaska**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances includes Schedule II-V

## **Arizona**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #
- Authority to prescribe controlled substances includes Schedule II-V

## **Arkansas**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #
- Authority to prescribe controlled substances includes Schedule III-V

## **California**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #
- Authority to prescribe controlled substances includes Schedule II-V as specified in collaborative practice agreement

## **Colorado**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative prescriptive agreement; prescriber's state-issued Rx # may be, but is not required to be, included on prescription
- Authority to prescribe controlled substances includes Schedule II-V

## **Connecticut**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative prescriptive agreement
- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **Delaware**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #
- Authority to prescribe controlled substances includes Schedule II-V

## **District of Columbia**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances includes Schedule II-V; district registration requirements (in addition to federal DEA registration) are contained in rules

## **Florida**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title, and as outlined in the prescriber's collaborative practice agreement
- Authority to prescribe controlled substances is not granted

## **Georgia**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- All prescriptions must show collaborating physician's name
- Authority to prescribe controlled substances includes Schedule III-V

## **Hawaii**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #
- Scope of prescriptive authority is limited by exclusionary formulary
- All prescriptions must show collaborating physician's name and phone #
- Authority to prescribe controlled substances under a collaborative agreement is not operational until the BON amends R&R to include the requirements relating to prescribing controlled substances

## **Idaho**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #
- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **Illinois**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- All prescriptions must show collaborating physician's name
- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **Indiana**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #, and as outlined in the prescriber's collaborative practice agreement
- Authority to prescribe controlled substances includes Schedule II-V unless expressly prohibited in the prescriber's collaborative practice agreement; state registration requirements (in addition to federal DEA registration) are contained in rules
- Authority to prescribe controlled substances does not extend to prescriptions for purposes of weight management

## **Iowa**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title

- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

### **Kansas**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in state Board of Pharmacy statute under collaborative prescriptive agreement
- All prescriptions must show collaborating physician's name, address, and phone #
- Authority to prescribe controlled substances includes Schedule II-V as outlined in Board of Pharmacy statute

### **Kentucky**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative prescriptive agreement
- Authority to prescribe controlled substances includes Schedule II-V, with varying limitations on initial length of supply and subsequent refill authority

### **Louisiana**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- All prescriptions must show the collaborating physician's name
- Authority to prescribe controlled substances includes Schedule III-V; state registration requirements (in addition to federal DEA registration) are contained in rules
- Authority to prescribe controlled substances may include Schedule II for ADD/ADHD if relevant to practice
- Authority to prescribe controlled substances does not extend to prescriptions for purposes of weight management or control of chronic, intractable pain

### **Maine**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances consistent with practice specialty includes Schedule II-V

## **Maryland**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **Massachusetts**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative prescriptive guidelines
- All prescriptions must show collaborating physician's name
- Authority to prescribe controlled substances includes Schedule II-V with varying limitations on length of supply and refill authority; state registration requirements (in addition to federal DEA registration) are contained in rules

## **Michigan**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances includes Schedule III-V as outlined in the prescriber's collaborative prescriptive agreement
- Authority to prescribe controlled substances includes Schedule II only if practice is carried out within a hospital, surgicenter, oncology practice, or hospice; limited to 7-day postdischarge supply
- Prescriptions for scheduled drugs must show the name and DEA number of both the prescriber and the collaborating physician

## **Minnesota**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's joint prescriptive agreement
- Authority to prescribe controlled substances includes Schedule II-V

## **Mississippi**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- Authority to prescribe controlled substances includes Schedules II-V, as separately approved by the BON

## **Missouri**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- All prescriptions must show collaborating physician's name, practice address, and phone #
- Authority to prescribe Schedule III-V controlled substances, although passed by the legislature, is not operational until the state's drug control board has rules in place related to the act (SB724)

## **Montana**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances includes Schedule II-V, limited to initial maximum 3-month supply for CSIII-V with refills in writing, and per DEA limitations for CSII

## **Nebraska**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- Authority to prescribe controlled substances includes Schedule II-V

## **Nevada**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement and in state Board of Pharmacy regulations
- Authority to prescribe controlled substances includes Schedule II-V

## **New Hampshire**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances includes Schedule II-V

## **New Jersey**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and certification #, and as outlined in the prescriber's collaborative prescriptive agreement
- All prescriptions must be written on state-authorized prescription blanks printed with the prescriber's NPI serialized by the vendor, and must include the collaborating physician's name, license #, address, and phone #
- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **New Mexico**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and certificate #
- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **New York**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #, and as outlined in the prescriber's collaborative practice protocols
- Authority to prescribe controlled substances includes Schedule II-V, with varying limitations on length of supply and refill authority; state registration requirements (in addition to federal DEA registration) are contained in rules
- Prescriptions for Schedule II (including anabolic steroids) and benzodiazepines must be written on official prescription forms

## **North Carolina**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #, and as outlined in the prescriber's collaborative practice agreement
- All prescriptions must show collaborating physician's name
- Authority to prescribe controlled substances includes Schedule II-V, with varying limitations on length of supply and refill authority

## **North Dakota**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative prescriptive agreement
- Authority to prescribe controlled substances includes Schedule II-V

## **Ohio**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #, and as outlined in the prescriber's collaborative practice agreement and established by state formulary
- Authority to prescribe controlled substances includes Schedule III-V as specified in state formulary
- Authority to prescribe controlled substances may include Schedule II in emergency situations for terminally ill patients, limited to a 24-hour supply

## **Oklahoma**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative agreement
- Scope of prescriptive authority is limited by state exclusionary formulary
- All prescriptions must show collaborating physician's name
- Authority to prescribe controlled substances includes Schedule III-V except as excluded by state formulary, limited to a 30-day supply; state registration requirements (in addition to federal DEA registration) contained in rules

## **Oregon**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and designation "PP" appended to prescriber's state license #
- Authority to prescribe controlled substances includes Schedule II-V as specified in state formulary (*Drug Facts and Comparisons*, notable exceptions listed, updates periodically reviewed and submitted for approval by state BON)
- Prescriptions for controlled substances may not be written to treat narcotic addiction
- Prescriptions for Schedule II drugs may not be written for weight management

## **Pennsylvania**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and certification #, and as outlined in the prescriber's collaborative prescriptive agreement
- Authority to prescribe controlled substances includes Schedule II-V

## **Rhode Island**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title, and as outlined in the prescriber's collaborative guidelines
- Authority to prescribe controlled substances includes Schedule II-V and as specified in state formulary; state registration requirements (in addition to federal DEA registration) are contained in rules

## **South Carolina**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx #, and as outlined in the prescriber's collaborative prescriptive agreement
- All prescriptions must show the collaborating physician's name, address, and phone #
- Authority to prescribe controlled substances includes Schedules III-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **South Dakota**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and as outlined in the prescriber's collaborative practice agreement
- Authority to prescribe controlled substances includes Schedule II-V; state registration requirements (in addition to federal DEA registration) are contained in rules

## **Tennessee**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title, and as documented by state-issued APN certificate, including certificate of fitness to prescribe and identification number on file with state
- All prescriptions must show collaborating physician's name
- Authority to prescribe controlled substances includes Schedule II-V as outlined in the collaborating physician's supervisory rules and the prescriber's prescriptive formulary

## **Texas**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx # and as outlined in the prescriber's collaborative practice protocols
- All prescriptions must show collaborating physician's name, address, and phone #
- Authority to prescribe controlled substances includes Schedule III-V; state registration requirements (in addition to federal DEA registration) are contained in rules
- Prescriptions for scheduled drugs must show the name and DEA # of both the prescriber and the collaborating physician

## **Utah**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances includes Schedule IV-V; state registration requirements (in addition to federal DEA registration) are contained in rules
- Authority to prescribe controlled substances may include Schedule II-III in accordance with a consultation and referral plan
- Prescriptions of Schedule II-III drugs may not be written for weight management
- Prescriptions for cocaine HCL limited to topical preparations

## **Vermont**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title, license #, and as outlined in the prescriber's collaborative practice guidelines
- Authority to prescribe controlled substances includes Schedule II-V

## **Virginia**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx # and as outlined in the prescriber's collaborative practice agreement
- Authority to prescribe controlled substances includes Schedule II-V

## **Washington**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title

- Authority to prescribe controlled substances includes Schedule II-V

### **West Virginia**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title and state-issued Rx # and as outlined in the prescriber's collaborative prescriptive agreement
- Authority to prescribe is limited by exclusionary formulary covering general anesthetics, anticoagulants, antineoplastics, and radiopharmaceuticals
- Authority to prescribe controlled substances includes Schedule III-V, with varying limitations on length of supply and refill authority

### **Wisconsin**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's APNP title and as outlined in the prescriber's collaborative prescriptive agreement
- Authority to prescribe controlled substances includes Schedule II-V, with limitations in regard to conditions for which certain CII stimulants may be prescribed

### **Wyoming**

- General authority to prescribe is evidenced by inclusion on the prescription of the prescriber's title
- Authority to prescribe controlled substances includes Schedule II-V

