

AANP

American Association of  
NURSE PRACTITIONERS®

24

Nurse  
Practitioner

Practice Report

# Table of Contents

A Letter From AANP .....	4
Methodology .....	5
NPs Are Critical to Health Care .....	6
<b>SECTION 1: Characteristics of NPs.....</b>	<b>7</b>
Figure 1.1. Distribution of NPs by Gender.....	8
Figure 1.2. Distribution of NPs by Race and Ethnicity.....	8
Figure 1.3. Distribution of NPs by Age.....	9
Figure 1.4. Distribution of NPs by Years of Experience .....	9
Figure 1.5. Distribution of NPs by Community Population Size.....	10
Figure 1.6. Distribution of NPs per Capita by State (2022) .....	11
Table 1.1. Distribution of NPs by Initial NP Education Level.....	12
Table 1.2. Distribution of NPs by Highest Degree Awarded .....	12
Table 1.3. Distribution of NPs by Advanced Certification Area .....	12
Table 1.4. Distribution of NPs by Population Certification Area .....	13
Table 1.5. Distribution of NPs With Additional Specialty Practice Certification.....	13
Table 1.6. Distribution of NPs by Top 10 Clinical Focus Areas .....	14
Table 1.7. Top 10 Work Site Settings by Top Clinical Focus Areas .....	14
Table 1.8. Distribution of NPs by Professional Role.....	15
Table 1.9. Distribution of NPs by Military Status .....	15
Table 1.10. Nursing Home and Hospital Privilege .....	15
Table 1.11. Employment Arrangement .....	16
Table 1.12. Employment Characteristics .....	16
<b>SECTION 2: Patient Characteristics, NP Billing and Conditions Treated .....</b>	<b>17</b>
Table 2.1. Percent of NPs Treating Patients Below the Poverty Line by Community Size .....	18
Table 2.2. Mean and Median Number of Patients Seen per Day by NP Work Site Setting.....	18
Table 2.3. Mean and Median Number of Patients Seen per Day by NP Clinical Focus.....	19
Table 2.4. Frequency of Patients Provided NP Services.....	19
Table 2.5. Percent of Patients Receiving Home Health Services and Hospice Care .....	20
Table 2.6. Percent of NPs Consulting with Other Health Care Providers by Clinical Focus.....	20
Table 2.7. Top Three NP Referrals by Top 10 Work Site Settings .....	21
Table 2.8. Percent of All NPs by Conditions Treated.....	22
Figure 2.1. Percent of NPs Who Deliver Health Care by Patient Age Group.....	23
Figure 2.2. Percent of NPs Who Accept and See Patients by Insurance Type .....	23

<b>SECTION 3: Prescribing Patterns of NPs .....</b>	<b>24</b>
Table 3.1. Mean and Median Prescriptions per Day by Population Certification Areas.....	25
Table 3.2. Mean and Median Prescriptions per Day by Community Size.....	25
Table 3.3. Prescribing Patterns by Top 25 NP Work Site Setting.....	26
Table 3.4. Top 10 Agents Prescribed Regularly (Greater Than 15 Times per Week) by NPs .....	27
Figure 3.1. Sources of Information on New Medications.....	27
Figure 3.2. Mean Prescriptions Written or Refilled Per Day by Patient Volume Category .....	28
Figure 3.3. Mean Prescriptions Written or Refilled Per Day by Patient Volume .....	28



# A Letter From AANP



Dear Current and Future Nurse Practitioners,

The American Association of Nurse Practitioners® (AANP) is pleased to provide nurse practitioners (NPs) across the U.S. with an updated resource on NP practice based on AANP's 2024 Workforce Surveys. This report is a unique and comprehensive resource summarizing data on NP characteristics, treatment and prescribing patterns as well as patient characteristics. This information is critical to understanding the day-to-day practice of NPs and their important role in our health care system.

Below are a few highlights from the data in this report:

- Although the highest degree awarded to most NPs is a master's degree in nursing (78.4%), NPs are increasingly pursuing a Doctorate in Nursing Practice (DNP). In 2024, 17.6% of NPs held DNPs compared to 15.7% in 2022.
- The three most commonly treated conditions by NPs are anxiety (64.5%), hypertension (64.0%) and pain (63.6%).
- The top three medications regularly prescribed by NPs are antihypertensives, diabetic agents (other than insulin) and dyslipidemic agents, which are all used to manage chronic conditions.

AANP is committed to developing and maintaining resources for NPs at all career stages and we hope you find this report a useful addition to AANP's robust suite of member benefits. Any questions or feedback can be directed to the AANP Research Department at [research@aanp.org](mailto:research@aanp.org).

We gratefully acknowledge the AANP Research Analysts who produced this report. Mitchell Sellers, PhD, MPH, MPA, MA, led survey administration, data management and analysis, and David Wittkower, PhD, MA, provided critical input on survey instruments, institutional review board materials and methodological decisions.

Sincerely,  
Jon and Kate



**Jon Fanning, MS, CAE, CNED**  
Chief Executive Officer



**Kate Bradley, PhD, MBA**  
Vice President of Research



# Methodology

Data for this report were collected through the 2024 AANP NP Workforce Surveys between March 20, 2024, and May 19, 2024. Our sampling frame included all AANP members and nonmembers in the AANP National NP Database. We removed all individuals without a valid email address and those with member categories indicating they were not currently practicing in the United States, including those who were retired, students without licenses, associate members, corporate members and international members. We also excluded NPs who had previously opted out of receiving AANP surveys. The remaining NPs were randomly sorted into one of two groups. Both groups received questions on compensation, while only one group received questions on practice. Information on NP characteristics in Section 1 combines both groups for a total sample of 10,275 NPs. Information on NP practice in Sections 2 and 3 is based on a sample of 3,181 NPs, although the number responding to each question varies. All survey links were individualized to each respondent, and no global links were distributed via the AANP website or social media.

Data tables in Sections 1 and 2 include all respondents, unless otherwise noted. Section 3 includes only full-time NPs, defined as those who reported working 35 or more hours per week. This provides a better understanding of how often NPs are prescribing to patients. Primary reasons for omission from the analysis were missing data, not currently working and volunteering as an NP.

## Data Disclaimers

- Cells with fewer than five respondents reporting are left blank; however, all applicable data are included in calculations for national and state statistics.

- “Median” earnings are those at the 50th percentile, i.e., 50% of respondents are above the median and 50% are below the median.
- “Mean” patients/prescriptions are the average patients treated/prescriptions written by all respondents, unless otherwise noted.
- Take caution when interpreting statistics around prescriptions per day. Frequently, patients refill their medications without scheduling an appointment. Consequently, we do not provide an average prescription per patient ratio.

## About AANP

AANP is the largest professional membership organization in the U.S. for NPs of all specialties, representing the interests of more than 385,000 licensed NPs practicing throughout the country. AANP empowers all NPs to advance accessible, person-centered, equitable, high-quality health care for diverse communities through practice, education, advocacy, research and leadership. AANP promotes excellence in practice, education and research; establishes standards that best serve NPs' patients and other health care consumers; and provides legislative leadership to advance health policy at the local, state and national levels. To locate an NP in your community, visit [npfinder.com](https://npfinder.com). For more information about NPs and AANP's latest efforts, visit [aanp.org](https://aanp.org).

# NPs Are Critical to Health Care

NPs are advanced practice registered nurses (APRNs) who provide primary, acute, chronic and specialty care to patients of all ages and backgrounds. Daily practice includes assessment; ordering, performing, supervising and interpreting diagnostic and laboratory tests; making diagnoses; initiating and managing treatment, including prescribing medication and non-pharmacological treatments; coordinating care; counseling; and educating patients and their families and communities.

NPs are educated and clinically trained to provide high-quality health care, and they play a pivotal role in our current and future health care system. **NPs hold prescriptive authority** in all 50 states and the District of Columbia (D.C.) and **perform more than 1 billion patient visits annually**. As of June 2024, 27 states, D.C. and two U.S. territories have adopted Full Practice Authority (FPA), granting patients full and direct access to NP-delivered care.

NPs are prepared at the master's or doctoral level. Graduate degree programs for nursing must be accredited and are held accountable to ensure that core content and national education standards are enforced as defined by the Commission on Collegiate Nursing Education, Accreditation Commission for Education in Nursing and National

League for Nursing Commission for Nursing Education Accreditation. These accreditors must maintain approval by the National Advisory Committee on Institutional Quality and Integrity, which advises the U.S. Secretary of Education, and they are also accountable to the Department of Education for maintaining accreditation standards.

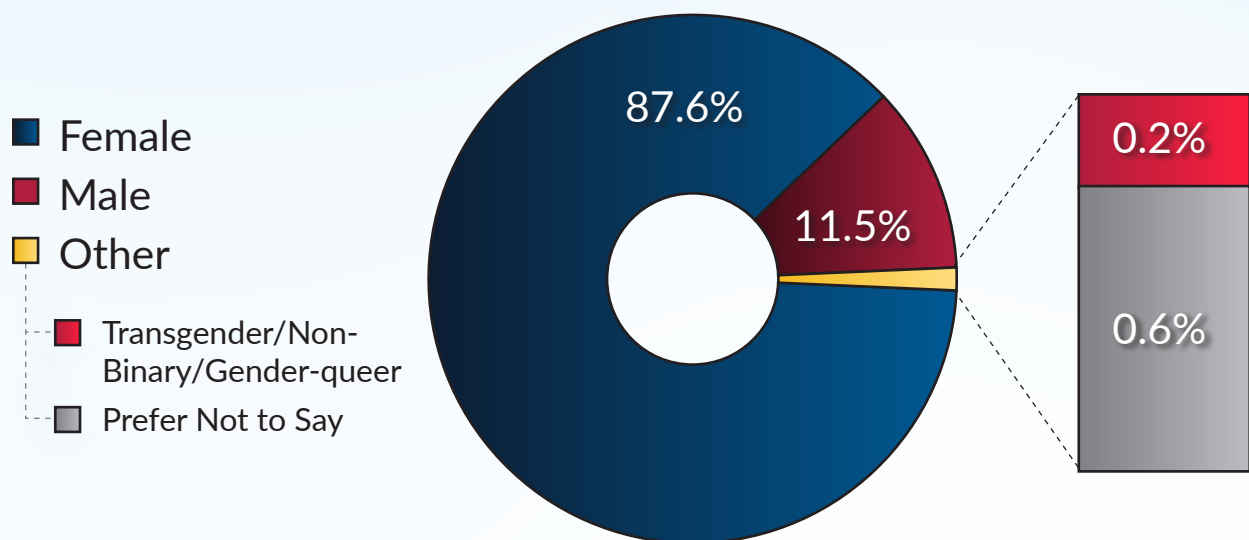
Additionally, all NP programs should include NP-specific criteria for the quality of curriculum, faculty and clinical practicums as defined by the National Organization of Nurse Practitioner Faculties and National Task Force of Quality Nurse Practitioner Education. NPs are educated under the nursing model, and clinical training is integrated into their core curriculum. NP programs are competency-based, not time-based. A student must demonstrate mastery of content before advancing. NPs must pass standardized national certification exams. These exams are psychometrically-sound, legally defensible, competency-based examinations of knowledge and proficiency in patient care as advanced clinicians. These certification programs must maintain accreditation by the Accreditation Board of Specialty Nursing Certification and the National Commission for Certifying Agencies, and they must be evaluated regularly through practice input and analysis. NP certification is good for five years, at which point documentation of practice hours and 100 hours of continuing education (CE) must be provided. NPs must also obtain a state license in order to practice.



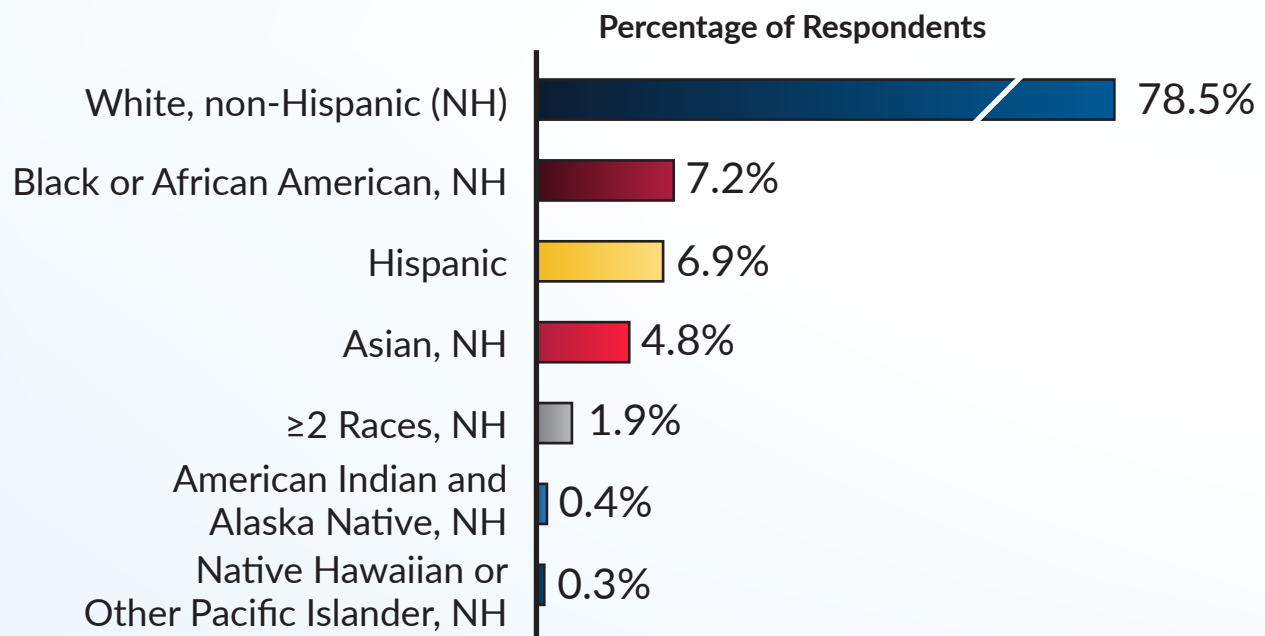
# SECTION 1

## Characteristics of NPs

**Figure 1.1. Distribution of NPs by Gender**



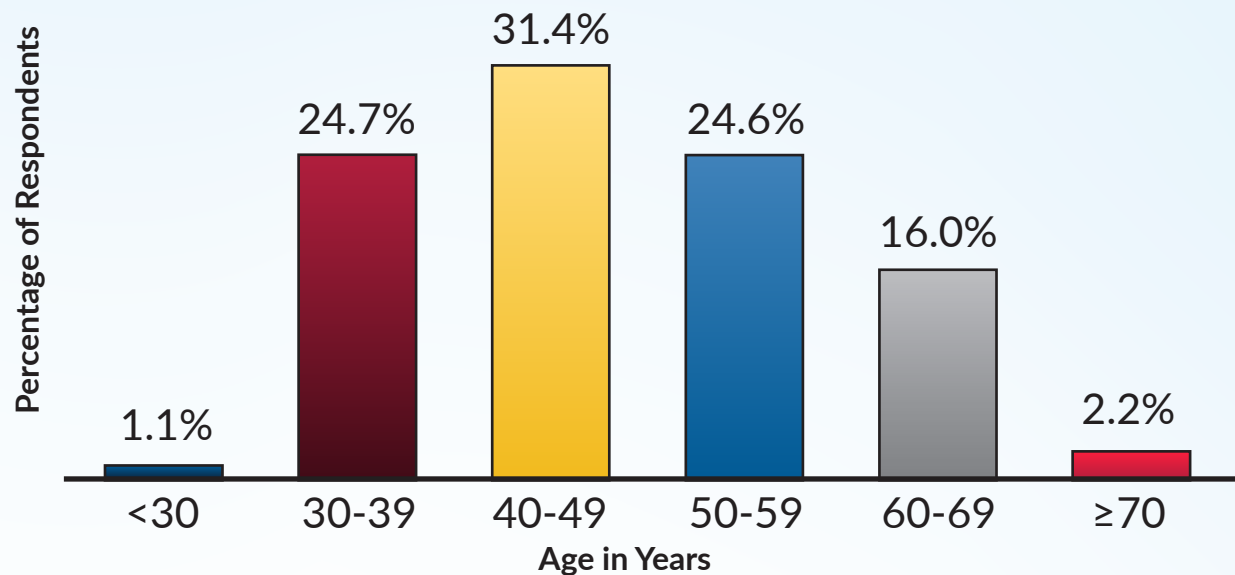
**Figure 1.2. Distribution of NPs by Race and Ethnicity**



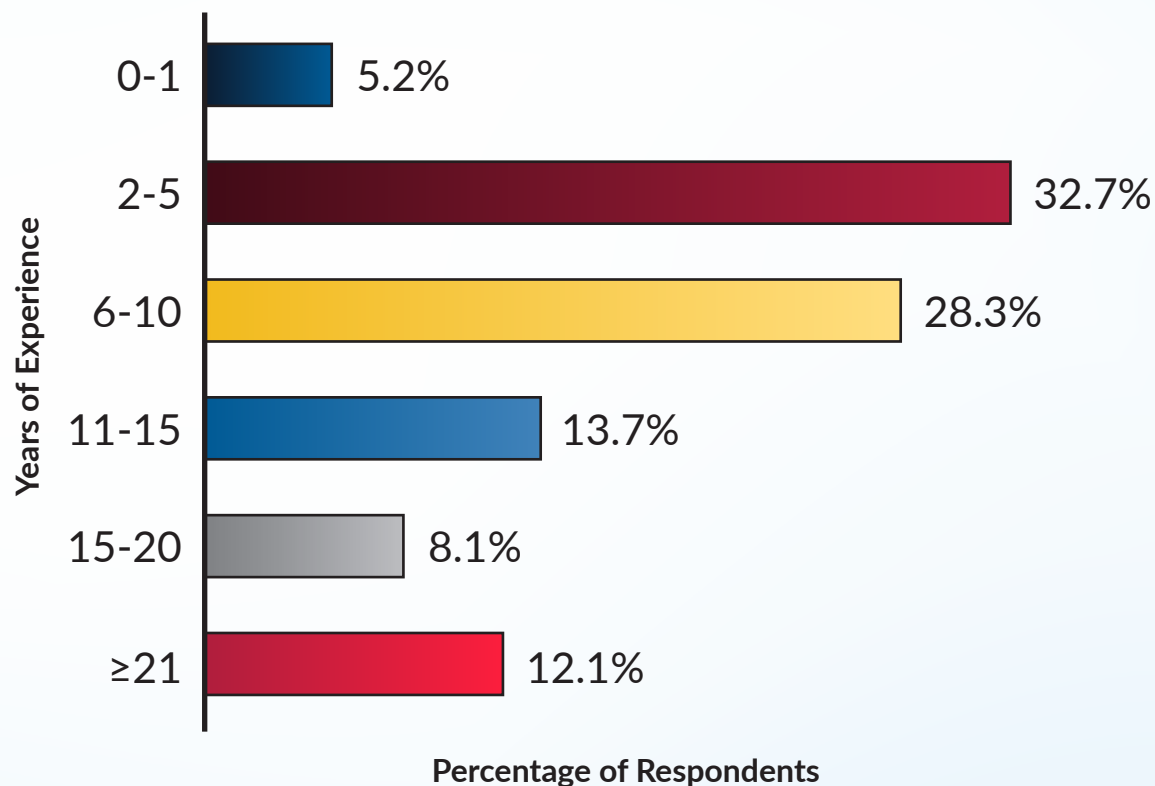
**Note:** Race and ethnicity were two separate questions on the 2024 AANP Workforce Surveys and based on standardized questions from the U.S. Office of Management and Budget at the time of the surveys. Data from these two questions were recoded to indicate two or more races and combined with the question related to ethnicity to align race results with reporting from other nursing surveys.



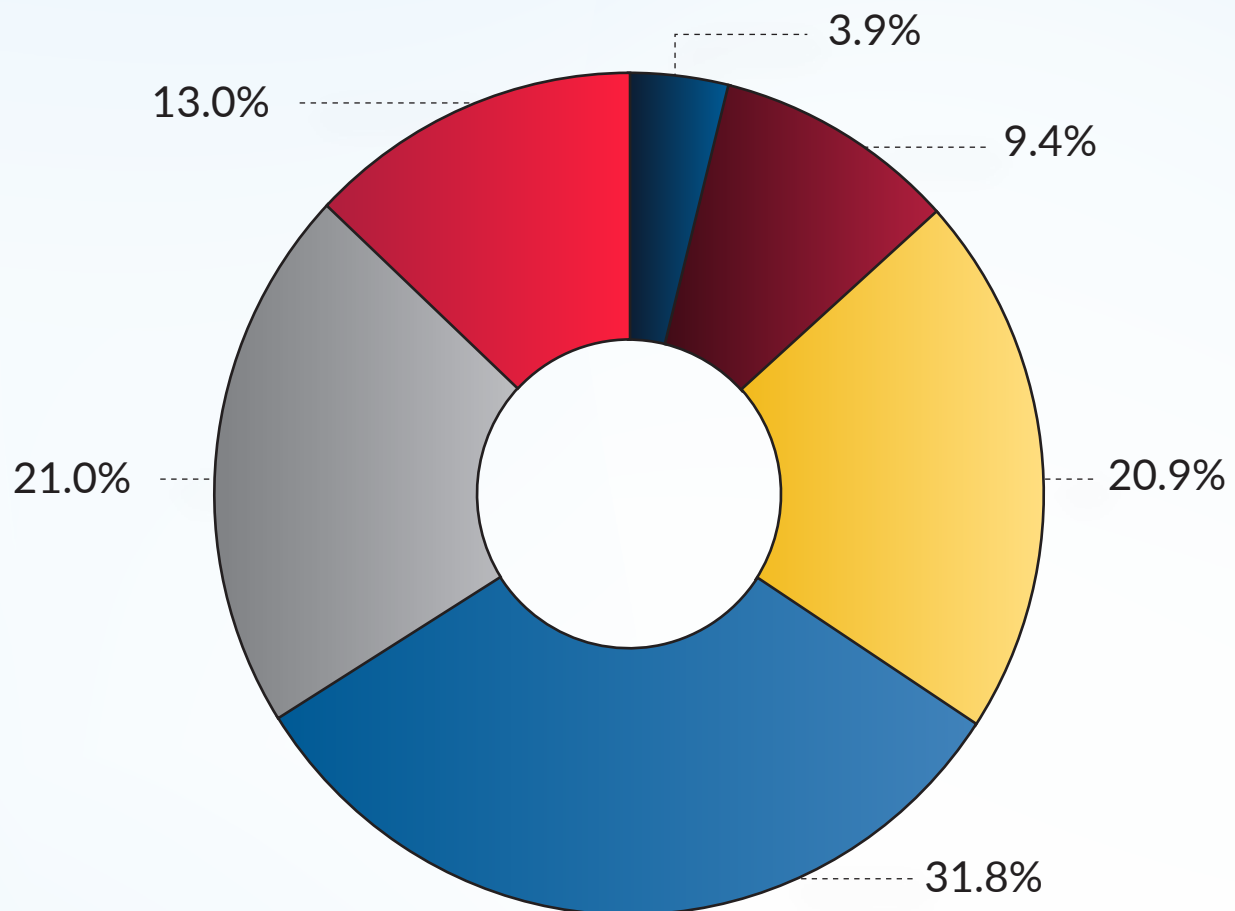
**Figure 1.3. Distribution of NPs by Age**



**Figure 1.4. Distribution of NPs by Years of Experience**



**Figure 1.5. Distribution of NPs by Community Population Size**



**Community Population Size**

- <2,500
- 2,500–9,999
- 10,000–49,999
- 50,000–249,999
- 250,000–999,999
- ≥1,000,000

Licensed NPs practice in every state, territory and the District of Columbia. Some states have more NPs than others due to factors like demand for providers and the number of colleges and universities with NP programs. **Figure 1.6** below highlights the NP workforce in relation to each state's population in 2022, the year for which we have the most complete data on licensed NPs (acquired from each state's board of nursing).

Of note, the states with the highest ratio of NPs per 100,000 population were Tennessee (188 per 100,000), Mississippi (175 per 100,000) and Kentucky (175 per 100,000). The states with the lowest ratios were Oregon (26 per 100,000), Hawaii (69 per 100,000) and California (72 per 100,000).

**NPs per 100,000 Population**

≤75	101-125	≥151
76-100	126-150	

**Table 1.1. Distribution of NPs by Initial NP Education Level**

Initial NP Program Type	Percent (%)
Certificate	1.4
Bachelor's	1.3
Master's	83.6
Post-Master's Certificate	7.1
Doctoral	6.7

**Table 1.2. Distribution of NPs by Highest Degree Awarded**

Highest Degree Received	Percent (%)
Nursing Master's	78.4
Non-Nursing Master's	0.8
DNP	17.6
Nursing PhD	1.2
Other Nursing Doctorate	0.2
Non-Nursing Doctorate	1.3
Other	0.5

**Table 1.3. Distribution of NPs by Advanced Certification Area**

Credentials	Percent (%)
Has Clinical Nurse Specialist	3.5
Has Certified Nurse-Midwife	0.7
Has Certified Registered Nurse Anesthetist	0.0
No Other Advanced Practice Registered Nurse	95.8



**Table 1.4. Distribution of NPs by Population Certification Area**

Certification	Percent (%)
Family*	68.7
Adult—Gerontology Primary Care*	7.9
Psychiatric/Mental Health	7.1
Adult*	7.0
Adult—Gerontology Acute Care	6.1
Acute Care	3.9
Pediatric—Primary Care*	2.9
Women's Health*	2.0
Gerontology*	0.9
Neonatal	0.9
Pediatric—Acute Care	0.7
No Certification	0.6

**Note:** \*Indicates a primary care certification. The sum of all percentages is greater than 100% because some NPs hold multiple certifications.

**Table 1.5. Distribution of NPs With Additional Specialty Practice Certifications**

Certification	Percent (%)
Wound Care	1.3
Hospice and Palliative Care	1.3
Emergency	1.1
Oncology	0.9
Diabetes Management-Advanced	0.7
Addictions Advanced Practice	0.7
Pediatric-Primary Care Mental Health	0.4
Occupational Health	0.3
Dermatology	0.3
Orthopedics	0.3
Nephrology	0.2
Genetics Advanced Nurse	0.1
School Health	0.1
No Advanced Certification	92.8

**Note:** The sum of all percentages is greater than 100% because some NPs hold multiple certifications.

**Table 1.6. Distribution of NPs by Top 10 Clinical Focus Areas**

Clinical Focus	Percent (%)
Family Practice*	16.9
Primary Care*	9.4
Psychiatry/Mental Health	5.9
Urgent Care	5.8
Cardiology	4.2
Internal Medicine*	4.2
Geriatrics*	3.3
OBGYN Women's Health*	3.0
Oncology/Hematology	2.7
Pediatrics-General	2.6

**Note:** \*Indicates a primary care clinical focus area.

**Table 1.7. Top 10 Work Site Settings by Top Clinical Focus Areas**

Setting	Percent (%)	Top Clinical Focus	Percent (%)
Hospital Outpatient Clinic	14.4	Family Practice	11.6
Hospital Inpatient Unit	11.5	Hospitalist	19.5
Private Group Practice	10.4	Family Practice	21.8
Private Physician Practice	6.7	Family Practice	23.8
Urgent Care	4.9	Urgent Care	92.0
Federally Qualified Health Center	4.2	Family Practice	47.6
Employer/Corporate Clinic	3.2	Family Practice	37.8
Rural Health Clinic	3.1	Family Practice	62.7
Private NP Practice	3.1	Family Practice	30.1
Community Health Center	2.9	Family Practice	42.1

**Note:** The top clinical focus refers to the most common clinical focus in a specific work setting. For example, 14.4% of respondents work in a hospital outpatient clinic. Among NPs who work in a hospital outpatient setting, 11.6% have a family clinical focus.

**Table 1.8. Distribution of NPs by Professional Role**

Role	Percent (%)
Administrative Role	9.9
Clinical Role	82.5
Faculty Role	4.2
Research Role	3.4

**Note:** The sum of all percentages is greater than 100% because some NPs perform multiple roles.

**Table 1.9. Distribution of NPs by Military Status**

Veteran Status	Percent (%)
Never Served in the Military	94.4
Only on Active Duty for Training in the Reserves or National Guard	1.2
Currently on Active Duty	0.3
On Active Duty in the Past, but Not Presently	4.1

**Table 1.10. Nursing Home and Hospital Privileges**

Privileges	Percent (%)	Percent With Hospital Privileges (%)
Has Nursing Home Privileges	10.1	–
Has Hospital Privileges	40.6	–
Admitting Privileges	–	45.8
Discharge Privileges	–	48.5
Ordering Privileges	–	69.9
Ordering Privileges with Physician	–	38.7
Committee Representation	–	28.7
Board of Directors Vote	–	8.8

**Note:** The findings for nursing home and hospital privileges include only NPs who work clinically and who worked full-time (35 hours or more per week) in 2023. Participants could report both nursing home and hospital privileges. Due to question branching, the column "Percent With Hospital Privileges (%)" provides statistics only for full-time, clinically practicing NPs who reported having hospital privileges. For example, Table 1.10 shows that of the 40.6% of NPs who indicated having hospital privileges, more than half of them (69.9%) have ordering privileges.

**Table 1.11. Employment Arrangement**

Employment Arrangement	Percent (%)
Owner	2.9
Full/Part-time staff or faculty	72.2
Per Diem	2.3
Other	2.9
Contract	19.7

**Table 1.12. Employment Characteristics**

Employment Characteristic	Percent (%)
Employment Contract	65.2
Patient Panel	56.4
National Provider Identifier Number	99.5
Credentials With Commercial Insurance	62.6

**Note:** The sum of all percentages is greater than 100% because NPs could select more than one option.





# SECTION 2

## Patient Characteristics, NP Billing and Conditions Treated

**Table 2.1. Percent of NPs Treating Patients Below the Poverty Line by Community Size**

Community Size	Percent of Patients in Poverty Reported by NPs (%)				
	Any	20% or More	50% or More	80% or More	100%
Less than 2,500	88.6	71.4	47.6	24.8	3.8
2,500 to 9,999	95.6	74.7	44.0	14.8	1.7
10,000 to 49,999	95.0	68.5	37.4	10.3	1.8
50,000 to 249,999	92.4	64.8	27.3	8.8	1.9
250,000 to 999,999	93.1	61.4	31.0	11.1	1.2
1,000,000 or more	91.6	65.7	40.1	12.6	2.7
All NPs	93.1	66.3	34.4	11.5	1.9

**Note:** Poverty is defined as an annual income of \$14,580 or less for an individual, and \$30,000 for a family/household of four in 2023 by the U.S. Census Bureau. Table 2.1 shows that of the NPs who work in communities with fewer than 2,500 people, 3.8% have all of their patients living in poverty, and approximately half (47.6%) report that at least half of their patients are living in poverty.

**Table 2.2. Mean and Median Number of Patients Seen per Day by NP Work Site Setting**

Work Setting	Mean	Median
Dialysis Center	33	30
Urgent Care	32	35
Retail Clinic	23	23
Pain Management	23	22
Emergency Room	20	20
Private Physician Practice	19	18
Rural Health Clinic	18	17
Private Group Practice	18	18
Family Planning Clinic	18	18
Private NP Practice	17	16

**Note:** The data include only NPs who work clinically and who worked full-time (35 hours or more per week) in 2023.

**Table 2.3. Mean and Median Number of Patients Seen per Day by NP Clinical Focus**

Clinical Focus	Mean	Median
Urgent Care	30	30
Dermatology	27	27
Orthopedics	21	20
Emergency Care	21	20
Nephrology/Renal	20	18
Pediatrics-General	20	20
Pain Management	20	20
Telehealth	18	15
Otolaryngology	18	18
Family Practice	17	17

**Note:** The data include only NPs who work clinically and who worked full-time (35 hours or more per week) in 2023.

**Table 2.4. Frequency of Patients Provided NP Services**

Services	Most (%)	None (%)
Coordination of Care	55.8	11.0
Diagnosis and Management of Acute Conditions	56.2	7.6
Diagnosis and Management of Chronic Conditions	65.8	8.8
Education and Counseling	83.6	3.5
Patient History and Physicals	35.2	30.9
Preventive Screening and Immunizations	40.2	30.8
Order, Perform and Interpret Labs, X-rays and Diagnostics	78.0	5.1
Perform Procedures	16.5	33.0

**Note:** "Most" includes respondents who reported providing these services to more than 50% of their patients, whereas "None" includes respondents who reported never providing this service to patients.

**Table 2.5. Percent of Patients Receiving Home Health Services and Hospice Care**

Service/Care Received	Percent (%)	Average Percent of Patients (%)
Home Health Services	64.8	22.4
Hospice Care	49.5	10.7

**Note:** The Percent (%) represents the proportion of NPs who have patients receiving Home Health Services or Hospice Care. The right-hand column shows the average percent of patients in an NP's patient panel who are receiving the specialized care in each row.

**Table 2.6. Percent of NPs Consulting with Other Health Care Providers by Clinical Focus**

Clinical Focus	Primary Care Percent (%)	Non-Primary Care (%)	All NPs (%)
Specialist Physician	83.3	75.2	77.0
Physical Therapist	84.3	65.4	69.6
Psychologist	77.8	62.1	65.6
Dietician	64.0	49.7	52.9
Podiatrist	70.8	40.3	47.1
Occupational Therapist	57.1	43.6	46.6
Social Work	39.7	43.0	42.3
Audiologist	55.2	27.9	34.0
NP	31.7	34.6	34.0
Primary Care Physician	16.3	38.7	33.7
Speech Therapist	41.4	30.8	33.2
Complementary/Alternative Medicine (e.g., Acupuncture, Chiropractic, Massage, Naturopathy)	29.6	20.1	22.2
Pharmacist	21.3	17.7	18.5
Other Health Professionals	5.1	7.4	6.9
Certified Nurse-Midwife	7.4	3.0	4.0
Certified Registered Nurse Anesthetist	1.7	1.6	1.6
Clinical Nurse Specialist	0.0	0.7	0.6

**Note:** The sum of all percentages is greater than 100% because NPs generally consult with many different practitioners. For example, Table 2.6 indicates that 83.3% of primary care NPs consult with specialist physicians as opposed to non-primary care NPs who consult with specialist physicians 75.2% of the time. Among all types of NPs, 77.0% report consulting with specialist physicians.



**Table 2.7. Top Three NP Referrals by Top 10 Work Site Settings**

Work Site Setting	Health Professional	Percent of Cases (%)
Hospital Outpatient Clinic	Specialist Physician	83.5
	Physical Therapist	77.7
	Dietician	68.3
Hospital Inpatient Clinic	Specialist Physician	78.6
	Physical Therapist	68.3
	Social Work	63.0
Private Group Practice	Specialist Physician	83.3
	Physical Therapist	79.6
	Psychologist	72.4
Private Physician Practice	Specialist Physician	80.3
	Physical Therapist	78.4
	Psychologist	65.4
Urgent Care	Specialist Physician	80.9
	Primary Care Physician	69.6
	Physical Therapist	60.9
Federally Qualified Health Center	Psychologist	90.8
	Physical Therapist	81.6
	Specialist Physician	79.6
Employer/Corporate Clinic	Physical Therapist	84.6
	Specialist Physician	84.6
	Psychologist	73.9
Rural Health Clinic	Specialist Physician	92.2
	Physical Therapist	88.3
	Psychologist	87.0
Private NP Practice	Psychologist	78.9
	Specialist Physician	69.7
	Physical Therapist	63.3
Community Health Center	Psychologist	76.3
	Physical Therapist	72.4
	Specialist Physician	72.4

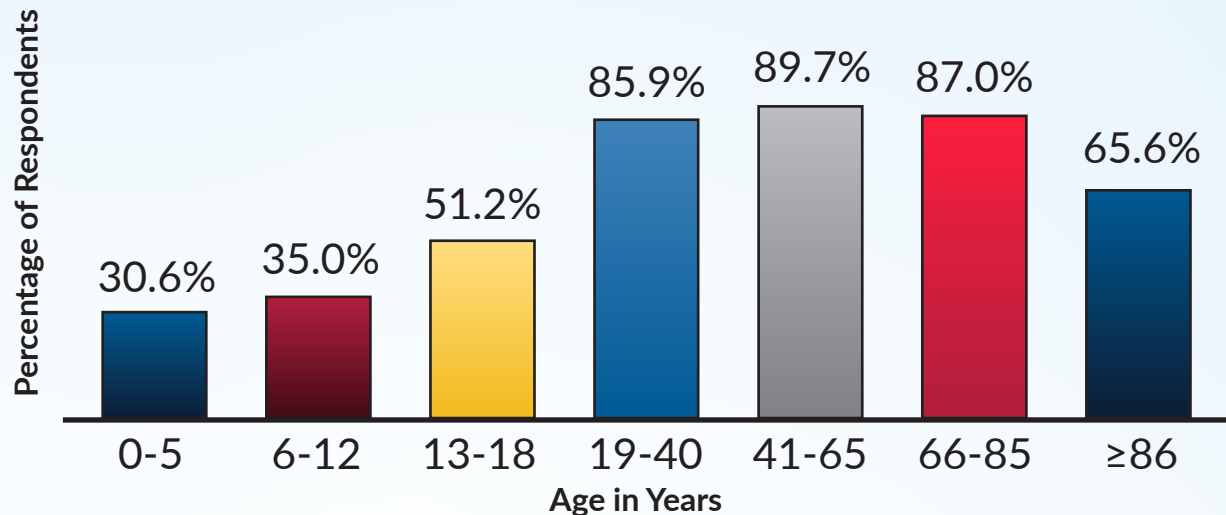
**Note:** The sum of all percentages is greater than 100% for all work settings because NPs could select multiple types of providers.

**Table 2.8. Percent of All NPs by Conditions Treated**

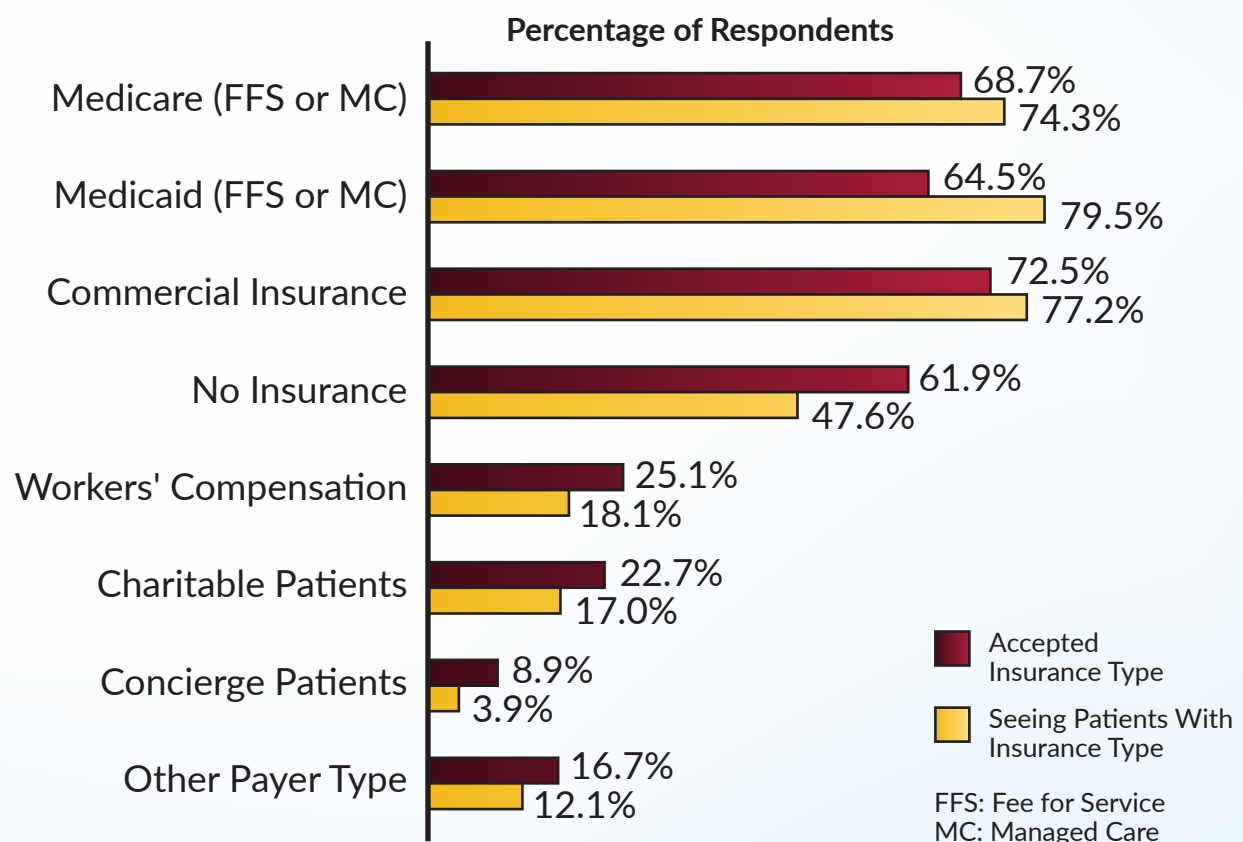
Condition Treated	Percent (%)	Condition Treated	Percent (%)
Anxiety	64.5	Lacerations/Contusions	42.0
Hypertension	64.0	Heart Failure	41.9
Pain	63.6	CAD/IHD/Angina	40.0
Abdominal Pain	63.4	Arrhythmia	39.7
Urinary Tract Infection	63.4	Acne/Rosacea	38.2
Constipation	63.2	Benign Prostatic Hyperplasia	37.3
Back or Neck Pain	62.3	Dementia	36.5
Depression	61.8	Fibromyalgia/Myalgia	34.3
Acute Upper Respiratory	61.7	Peripheral Artery Disease	34.0
GERD/Heartburn	60.8	ADHD	32.9
Migraine	60.7	Stroke	32.3
Acute Lower Respiratory	59.5	Substance/Opioid Use Disorders	31.7
Diabetes	57.7	Menopause	31.1
Anemia	57.4	PTSD	31.0
Asthma	57.2	Bipolar Disorder	29.7
Dizziness/Vertigo	55.4	Cancer	24.2
Sinusitis	54.9	Hepatitis	22.6
COVID-19	54.4	Epilepsy	21.6
Influenza	53.6	Schizophrenia	20.4
Insomnia	53.0	HIV/AIDS	15.1
Hyperlipidemia	52.9	Other	14.5
Obesity	52.3	Pregnancy	12.0
Allergic Respiratory	51.9	Prenatal Care	11.3
Sprains/Strains	51.5		
Dermatitis	51.3		
Otitis Media	50.6		
COPD	50.4		
Thyroid Disease	50.2		
Vaginitis	50.1		
STD/STI	49.3		
Wound Care	48.6		
Acute Sprain/Strain	48.4		
Arthritis (OA and RA)	48.1		
Chronic Kidney Disease	44.3		

**Abbreviations:** ADHD: Attention-Deficit/Hyperactivity Disorder, AIDS: Acquired Immunodeficiency Syndrome, CAD: Coronary Artery Disease, COPD: Chronic Obstructive Pulmonary Disease, GERD: Gastroesophageal Reflux Disease, HIV: Human Immunodeficiency Virus; IHD: Ischemic Heart Disease, OA: Osteoarthritis; PTSD: Post-Traumatic Stress Disorder, RA: Rheumatoid Arthritis; STD/STI: Sexually Transmitted Disease/Infection.

**Figure 2.1. Percent of NPs Who Deliver Health Care by Patient Age Group**



**Figure 2.2. Percent of NPs Who Accept and See Patients by Insurance Type**





# SECTION 3

## Prescribing Patterns of NPs



**Table 3.1. Mean and Median Prescriptions per Day by Population Certification Areas**

Population Certification Area	Percent Prescribing (%)	Prescriptions Per Day	
		Mean	Median
Family*	96.4	23	15
Adult-Gerontology Primary Care*	95.6	18	10
Psychiatric/Mental Health	98.5	26	20
Adult—Gerontology Acute Care	95.4	17	10
Adult*	93.8	19	10
Acute Care	100.0	17	12
Pediatric—Primary Care*	94.0	16	10
Women's Health*	96.7	18	14
Gerontology*	100.0	14	10
Pediatric—Acute Care	100.0	18	10

**Note:** \*Indicates a primary care certification.

**Table 3.2. Mean and Median Prescriptions per Day by Community Size**

Community Size	Prescriptions Per Day	
	Mean	Median
Less than 2,500	21	20
2,500 to 9,999	25	20
10,000 to 49,999	23	15
50,000 to 249,999	21	15
250,000 to 999,999	19	15
1,000,000 or more	19	10
<b>All Full-Time NPs</b>	<b>21</b>	<b>15</b>

**Table 3.3. Prescribing Patterns by Top 25 NP Work Site Settings**

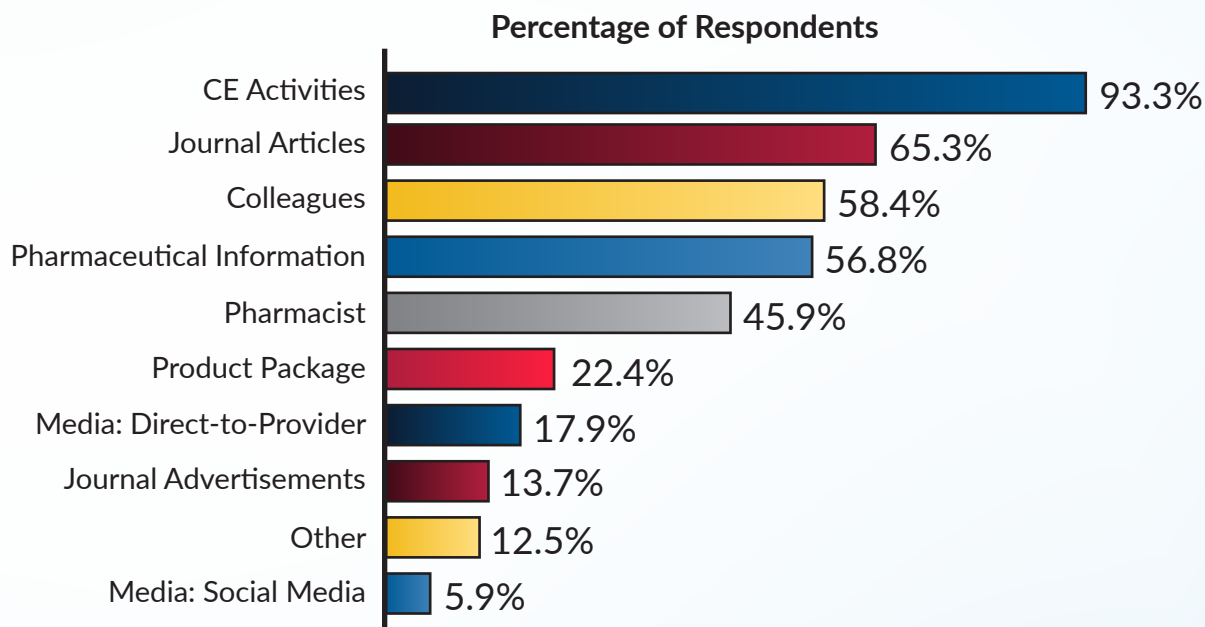
Work Site Setting	Percent Prescribing (%)	Mean	Median
Hospital Outpatient Clinic	98.4	18	10
Hospital Inpatient Unit	97.8	15	10
Private Group Practice	98.3	23	20
Private Physician Practice	98.1	29	20
Urgent Care	99.0	35	30
Federally Qualified Health Center	100.0	29	20
Rural Health Clinic	100.0	27	20
Employer/Corporate Clinic	96.2	16	10
Community Health Center	98.1	32	25
Veterans Affairs Facility	94.2	21	15
Private NP Practice	98.5	25	20
Other Clinic (e.g., Free Clinic, Walk-in Clinic, Community Clinic)	94.0	21	15
Emergency Room	100.0	20	20
Behavioral Health/Addiction	100.0	27	20
Hospital Surgical Settings	83.3	6	5
Telehealth	92.0	27	18
Occupational Health Clinic	86.2	3	2
Long-term Care Facility	96.8	16	10
Home Care Agency	66.7	7	2
Psych/Mental Health Facility	100.0	29	28
University (e.g., Faculty)	95.0	17	14
Hospice/Palliative Care	92.3	10	8
Correctional/Prison Facility	100.0	22	15
College Student Health	92.3	9	5
Post-Acute Care/Skilled Nursing Facility	100.0	13	7

**Table 3.4. Top 10 Agents Prescribed Regularly (Greater Than 15 Times Per Week) by NPs**

Medication	Percent (%)
Antihypertensives	29.1
Diabetic Agents, Other	21.4
Dyslipidemic Agents	20.9
Analgesics, Non-Steroidal Anti-Inflammatory Drug	16.0
Antibiotics	16.0
Antidepressants	15.5
Diabetic Agents, Insulin	14.7
Vaccines/Immunization	14.6
Gastroesophageal Reflux Disease/Peptic Ulcer Disease Agents	14.3
Antihistamines	12.3

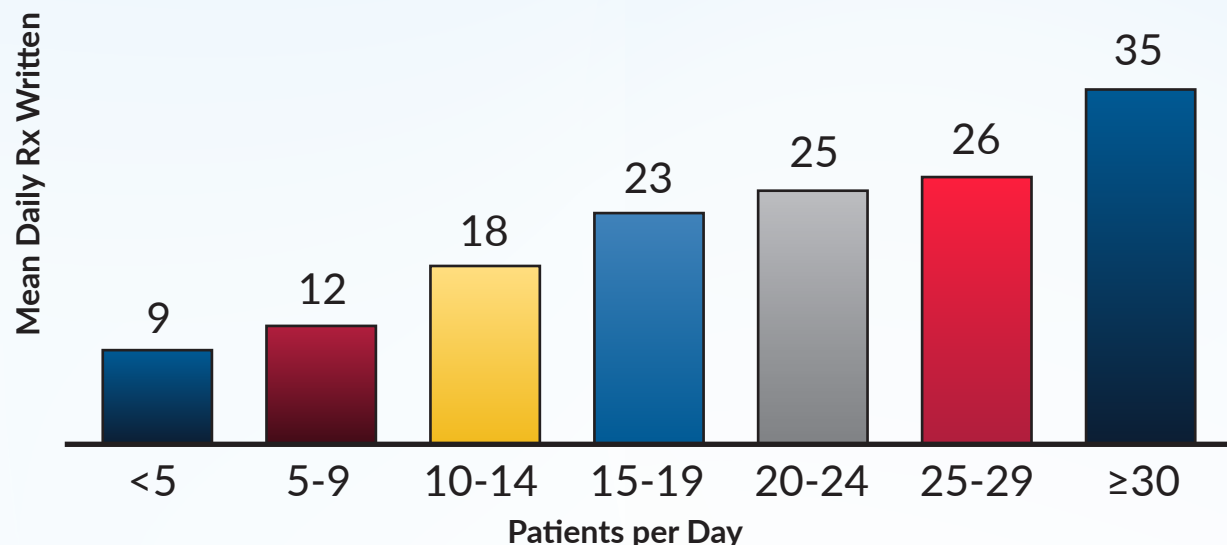
**Note:** "Regularly" prescribing medications means that on average the NP writes at least 15 prescriptions a week. Participants could select multiple medications that are regularly prescribed.

**Figure 3.1. Sources of Information on New Medications**



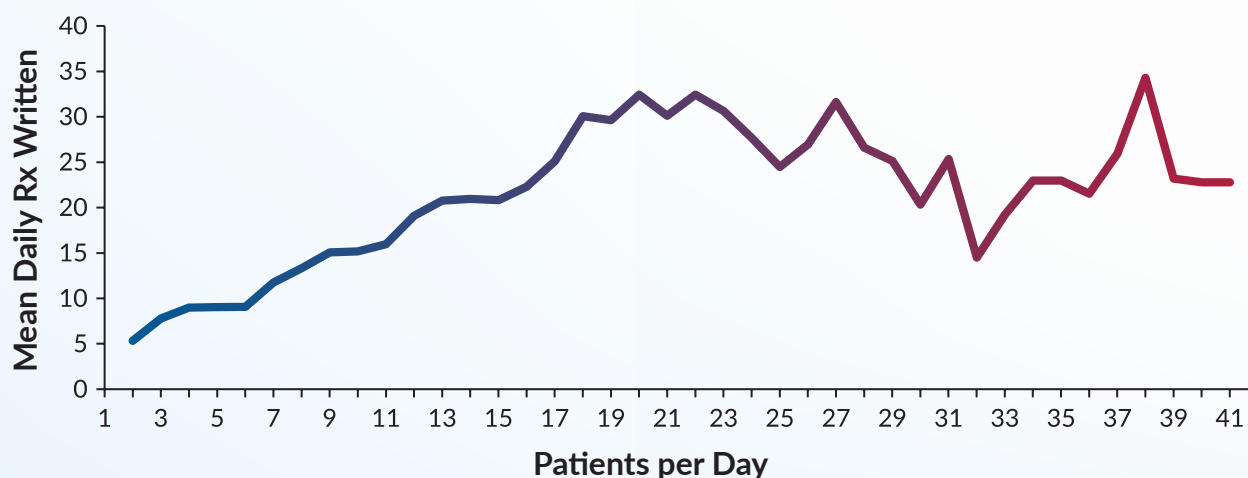
**Note:** The sum of all percentages is greater than 100% because participants could select multiple sources of information.

**Figure 3.2. Mean Prescriptions Written or Refilled per Day by Patient Volume Category**



**Note:** The data include only NPs who were clinically practicing and worked full-time (35 hours or more per week) in 2023. **Abbreviation:** Rx: Prescription.

**Figure 3.3. Mean Prescriptions Written or Refilled per Day by Patient Volume**



**Note:** The data include only NPs who were clinically practicing and worked full-time (35 hours or more per week) in 2023. This graph shows a moving average of the prescriptions per day for the average number of patients. **Abbreviation:** Rx: Prescription.

# AANP

# American Association of NURSE PRACTITIONERS®

## Our Mission

To empower all NPs to advance accessible, person-centered, equitable, high-quality health care for diverse communities through practice, education, advocacy, research and leadership.



### National Headquarters

P.O. Box 12846  
Austin, TX 78711  
512-442-4262  
[admin@aanp.org](mailto:admin@aanp.org)  
[research@aanp.org](mailto:research@aanp.org)

### Government Affairs Office

1400 Crystal Drive  
Suite 540  
Arlington, VA 22202

[aanp.org](http://aanp.org)

