To Whom It May Concern,

As the Medical Director of Kimball Health Services in the Nebraska Panhandle, I write in strong support of expanding the scope of practice for nurse practitioners (NPs), specifically to include the use of fluoroscopic imaging during emergency orthopedic procedures. Critical Access Hospitals (CAHs) like ours serve rural populations that are medically underserved and geographically isolated. In our region, where distances between towns and full-service hospitals can exceed 100 miles, timely access to advanced imaging and orthopedic care is often limited. Granting NPs the authority to use fluoroscopy in these critical situations will improve our ability to deliver rapid, effective care and reduce the need for unnecessary patient transfers.

The Nebraska Panhandle spans 14 counties and over 14,000 square miles, yet it is home to fewer than 85,000 residents. Within this vast region, 13 CAHs serve as the primary access points for emergency medical care. These hospitals are frequently staffed by certified, competent and capable nurse practitioners who provide continuous coverage, particularly during evenings, weekends, and in the absence of a full-time on-site physician. In emergency orthopedic situations, such as shoulder or hip dislocations and long bone fractures, access to fluoroscopy can be essential for accurate and safe joint reductions or stabilization. Without it, we are often forced to transfer patients long distances to larger hospitals, delaying care and increasing risk.

Nurse practitioners practicing in Nebraska's rural hospitals are highly skilled clinicians, many with advanced training in emergency and acute care. Their roles are especially critical in the Panhandle, where recruiting and retaining board-certified emergency physicians continues to be a significant challenge. With proper protocols, oversight, and training, the use of fluoroscopic imaging by NPs in specific emergency orthopedic procedures is not only feasible but also safe and effective. States that have adopted similar expanded scopes for advanced practice providers report improved rural patient outcomes and provider satisfaction without any compromise in quality or safety.

In summary, expanding the scope of practice for NPs to include the use of fluoroscopy for orthopedic procedures in Nebraska's CAHs is a necessary evolution in rural healthcare delivery. It enhances our ability to treat patients locally, efficiently, and with the level of care they deserve — especially in geographically remote areas like the Panhandle. I urge state regulators and policymakers to support this expansion in scope and help us provide the best care possible to our rural residents.

Sincerely,
Trevor Bush, MD
Medical Director
KHS