

In these times of rising medical costs, high unemployment and many uninsured individuals, finding affording health care can be a challenge. Whereas a visit to the doctor can set you back a few hundred dollars, a nurse practitioner might offer the same service at a fraction of the price.

Nurse practitioners are nurses with master's degrees and advanced training who can perform many of the same functions as physicians. Depending on their training, NPs can diagnose illnesses, prescribe medication, give pap smears and perform minor surgery in their offices. A family practice nurse practitioner works in much the same way a family practice physician works. They even take most health insurance plans.

Teri Bunker is one such NP. The out lesbian family nurse practitioner recently opened Bridge City Family Medical Clinic in Northeast Portland. She sees patients of all ages, from newborns to elderly adults.

Bunker says some people prefer NPs to regular medical doctors. "I think what you find with nurse practitioners is that because we come from a base of nursing, it tends to be a more holistic approach to health care. People say that we listen better to them and we spend more time with them."

Nurse practitioners can specialize, much like doctors, in areas such as geriatric, pediatric or psychiatric care. Certified nurse-midwives specialize in pregnancy, deliver babies and tend to newborn health care.

The first nurse practitioners were trained at University of Colorado Health Sciences Center in Denver in 1965. A shortage in health care providers led a nurse educator and a physician to establish a program to give nurses the skills needed to take on more responsibilities. At the time, the only way nurses could advance in their careers

THE CURE

Nurse practitioners help fill medical gap by Kathy Belge

was to go into administration or teaching. This was also the era of President Lyndon Johnson's War on Poverty. Neighborhood health clinics were being established, but there was not adequate medical staff to run them. Training nurse practitioners helped fill the medical gap and allowed nurses the opportunity to grow in their careers.

Today more than 850 nurse practitioners are licensed in Oregon. The laws that guide NPs differ from state to state. In order to be certified in Oregon, NPs must be licensed as a registered nurse, obtain a master's degree in nursing and receive certification from an approved school. In Oregon, NPs are allowed independent practices and can admit patients to hospitals. In fact, in many parts of rural Oregon where there simply are not enough doctors, nurse practitioners fill health care gaps.

Nurse practitioners can be an affordable option for those without health insurance. Often people with no insurance cannot get in to see a doctor.

"My phone has been ringing off the hook with those people who can't get health care anywhere else," Bunker says. In a time when many providers are not seeing patients who are on the Oregon Health Plan, she does. She also takes many other insurance plans like Blue Cross Blue Shield and Providence.

To the insurance companies, it doesn't matter whether patients see an NP or an MD. "They consider me to be a primary care provider, just



PHOTO BY MARTY DAVIS

like the physician," Bunker says. "I am an equal choice, not a lesser-than choice."

Bunker can prescribe most medications, treat most ailments and advise on most preventative health care. There are only a few medications she cannot prescribe. Although some practitioners have hospital admitting privileges, she chooses not to but works with several physicians who can hospitalize her patients when they need it.

Prior to opening her own clinic, Bunker spent four years working for the Clackamas County Health Department. Although she is trained to treat most illnesses, she has received special recognition for her collaborative work with diabetics; last year the Oregon Primary Care Association presented her with an outstanding clinician award. "It was a big deal," she says.

Bunker claims not to have run into any homo-

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phobia in her career, but she has had some awkward moments. One time, right in the middle of

a pap smear, a patient with her legs wide open in the stirrups asked her, "So, are you married?" "I'm thinking, I don't know if this is really a good time to tell you I'm a lesbian," Bunker laughs.

She also struggles with her identity as a nurse practitioner. Many of her patients call her "doctor."

"It gets hard to always correct that," she says. "Yet, when I don't, I only contribute to my own invisibility."

She asks her patients to call her Teri. "I don't like to look at my relationship [with my patients] as I'm up here and they're down there," she adds. "I really think I am this person you can come to and together we can come to a solution about what's right for you." □

KATHY BELGE is your guide to lesbian life at lesbianlife.about.com.

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