

From: Nadege Tan, MSN, CFCS, ANP-C <nadege@nyotamedicalfootcare.com>

Sent: Sunday, March 1, 2026 6:31 PM

To: Sen. Urso, Lori <sen-urso@rilegislature.gov>; SLegislation <slegislation@rilegislature.gov>

Subject: Nadege Tan, MSN, ANP-C, CFCS/ Nyota Medical Footcare, PLLC Bill number S2116
Support for SENATE BILL # S2116

TO: Chairwoman Melissa Murray and members of the SENATE Health & Human Services
Committee

Email: SLegislation@rilegislature.gov

CC: Senator Lori Urso - State of Rhode Island General Assembly

Email: sen-urso@rilegislature.gov

From: Nadege Tan, MSN, ANP-C, CFCS, Nyota Medical Footcare, PLLC

RE: Support for **SENATE BILL # S2116**

DATE: 03/01/2026

I am writing in support of Bill S2116 and its recognition of the need for safe, timely, and high-quality foot care services for Rhode Island residents. This legislation appropriately affirms patient dignity, safety, and access to preventive foot care — an area that is critically important for older adults and individuals living with diabetes, peripheral vascular disease, neuropathy, and other chronic conditions.

S2116 includes several strong and positive provisions:

- It recognizes foot care as a nursing intervention.
- It establishes competency expectations for nurses providing home services foot care.
- It emphasizes assessment, infection control, and patient education.
- It promotes appropriate referral when conditions exceed nursing scope.
- It supports continuing education to maintain quality standards.

These elements demonstrate a thoughtful effort to protect the public while improving access to preventive services that can reduce hospitalizations, amputations, infections, and avoidable complications.

However, while I strongly support the intent of this bill, I respectfully request that the Committee consider several clarifying amendments to prevent unintended restrictions on registered nurses and patient access to care.

Clinical Experience and Community Need

In my fourteen years of practice as a Nurse Practitioner, I am contacted weekly to provide foot care services for patients in a wide range of settings. These include group homes, assisted living facilities, memory care units, and community-based locations such as churches, senior centers, and apartment buildings.

As nurses, we meet our patients where they are. Many Rhode Islanders who require foot care services particularly those who cannot access a podiatrist's office due to transportation barriers, frailty, cognitive impairment, or mobility limitations are not limited to private residential dwellings. They live throughout our communities.

Restricting nurses to providing care only within narrowly defined "home services" locations would unintentionally limit access for vulnerable populations and create barriers where none previously existed.

For this reason, I respectfully urge you to make this legislation inclusive and avoid restricting the settings in which nurses may practice, provided care is delivered safely and within professional standards.

Clarification of Scope of Practice

I would also like to offer a practical example to clarify why scope language must remain flexible and tied to nursing competency rather than specific tools.

As a Nurse Practitioner, when I go to see patients, I am often going in without prior visual assessment of the condition of their feet or toenails. I do not know what I will encounter until I assess the patient in person. On many first visits, I see patients with toenails measuring five to six centimeters in length, curled under the toe, or so overgrown that they have caused trauma to the surrounding nail bed. I have treated patients whose nails became caught in bedding or socks, resulting in bleeding and open areas.

In approximately 80–95% of my visits, I must use a nail nipper, an e-file, and curettage techniques to reduce thickened or deformed nails safely and effectively. If I were restricted to using only a basic nail file or simple nail clipper, I would not be practicing to the top of my license, nor would I be providing safe, effective care. More importantly, patients would continue to suffer from preventable injury, infection, and pain.

The same principle applies to registered nurses. Restricting the language of this bill to specific instruments or limited techniques could unintentionally prevent nurses from providing high-quality, evidence-based nursing care consistent with their education and competency.

For this reason, I respectfully recommend including language such as:

"Services provided within the RN scope of practice under § RN statute."

Additionally, where clinically appropriate, the bill should allow for: “Debridement consistent with nursing education and competency.” This approach ensures that care remains aligned with professional standards, Board of Nursing regulations, and individual nurse competency without creating artificial limitations.

Avoid Listing Specific Instruments

Clinical care must be guided by assessment and professional judgment. The tools required for safe care cannot always be predetermined before entering the home or community setting.

I respectfully recommend replacing instrument-specific language with:

“Use of appropriate instruments and techniques consistent with nursing education, competency, and recognized standards of practice.”

This language protects the public while preserving professional flexibility and ensuring safe, individualized care.

S2116 is a meaningful and positive step toward improving access to preventive foot care services in Rhode Island. By recognizing foot care as a nursing intervention and establishing competency expectations, the bill strengthens patient protections and supports quality care delivery.

With modest amendments to:

- Remove restrictive location limitations,
- Clarify scope through reference to the RN statute,
- Include language such as “debridement consistent with nursing education and competency,” and
- Avoid listing specific instruments,

the bill can both protect patients and preserve the full professional scope of registered nurses.

Rhode Islanders who need foot care services live throughout our communities. Nurses should not be restricted from meeting them where they are, nor prevented from practicing safely and competently within their licensed scope.

I respectfully urge you to support S2116 while ensuring it remains inclusive, flexible, and aligned with established nursing standards.

Thank you for your time and thoughtful consideration.

Kind Regards,

Nadege Tan, MSN, ANP-C, CFCS, Nyota Medical Footcare, PLLC



NADEGE TAN, ANP-C, CFCS

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