

JEFFREY LOURIE, MSN, APRN, FNP-BC, PMHNP-BC

Dual-Certified Family & Psychiatric-Mental Health Nurse Practitioner

Integrated Outpatient Care · Clinical Operations · Health Informatics

PROFESSIONAL SUMMARY

Dual-certified Family and Psychiatric-Mental Health Nurse Practitioner with 16+ years in rural primary care, integrated behavioral health, and addiction medicine, and the founder and sole provider of an integrated outpatient practice. Combines hands-on clinical care with the operational and informatics work of running a small clinic — access and recall design, EHR and telehealth workflows, documentation integrity, and privacy-aware IT. Grounds decisions in how care is actually delivered, with a working interest in clinical reasoning, decision-making under uncertainty, and the cognitive science behind both.

AREAS OF EXPERTISE

Clinical & Behavioral Health — Primary care across the lifespan · Psychiatric assessment & DSM-5 formulation · Medication initiation, titration & risk counseling · TRD/PTSD ketamine protocols · OAT/MAT, harm reduction & withdrawal management · Crisis assessment & safety planning

Operations & Care Delivery — Workflow design from real clinical constraints · Patient access & asynchronous-care models · Quality improvement, registries & recall logic · Ethics, consent, privacy & patient-safety lens · Clinical content & decision-support review · Cross-functional clinical communication

Informatics & Systems — EHR optimization & documentation standards · Telehealth & secure-messaging operations · Clinical data hygiene & panel management · Privacy/security-aware IT operations · Vendor & tool evaluation · Hands-on office IT troubleshooting

CAREER HIGHLIGHTS

- **2,000+ patient panels** managed in rural, hospital-based primary care while sustaining days-level access through triage, open-access scheduling, and recall workflows.
- **~30% OUD panel volume** delivering addiction medicine (OAT/MAT, harm reduction) in a high-volume substance-use treatment setting.
- **16+ years** as an advanced practice clinician spanning primary care, psychiatry, and addiction medicine across rural and integrated settings.
- **15 years precepting** NP students and mentoring early-career clinicians and physicians.

PROFESSIONAL EXPERIENCE

Founder & Lead Provider — Family NP & Psychiatric-Mental Health NP

North Branch Health Montpelier, VT · 2018–Present

- Built and operate an integrated outpatient clinic delivering primary care, psychiatric medication management, telehealth, secure messaging, chronic-disease follow-up, treatment-resistant depression care, and care coordination.
- Designed access, recall, registry, and follow-up workflows supporting low appointment wait times, continuity of care, and proactive outreach for chronic disease, preventive care, and mental-health monitoring.
- Developed protocolized ketamine therapy for treatment-resistant depression and PTSD — screening, informed consent, monitoring, aftercare, relapse-prevention pathways, and safety planning.
- Serve as the clinical, operational, and technology lead, owning EHR workflows, telehealth/messaging operations, documentation standards, privacy practices, troubleshooting, and vendor coordination.

Family Nurse Practitioner — Substance Use Disorder Treatment

Treatment Associates Morrisville & Montpelier, VT · 2018–2020

- Delivered evidence-based OAT/MAT care for a high-volume OUD population, including buprenorphine/naloxone induction, long-acting injectables, alcohol-use pharmacotherapy, withdrawal monitoring, and relapse-prevention planning.
- Combined trauma-informed care, harm reduction, urine-drug-testing interpretation, PDMP review, diversion mitigation, and motivational interviewing with coordination across courts, probation, housing, social work, psychiatry, and peer recovery.

Family Nurse Practitioner / Lead Provider

Gifford Health Center at Berlin, Gifford Medical Center Berlin & Randolph, VT · 2013–2018

- Managed 2,000+ patient panels in rural, hospital-based primary care while preserving days-level access through triage pathways, open-access templates, nurse-led workflows, and rapid post-ED/hospital follow-up.
- Led chronic-disease management, preventive-care outreach, behavioral-health screening, transitions of care, outpatient procedures, documentation integrity, and interprofessional coordination.
- Chaired the Medical Ethics Committee, providing rapid, practical recommendations on consent, high-acuity decisions, and care-team conflict.

Family Nurse Practitioner

Berlin Family Practice / Fletcher Allen Healthcare Berlin, VT · 2013–2014

- Delivered academic health-system family medicine across acute care, chronic disease, prevention, behavioral-health screening, outpatient procedures, secure messaging, and team-based care.

Family Nurse Practitioner

Wilton Family Practice Wilton, ME · 2010–2013

- Practiced rural family medicine across the lifespan: prevention, chronic-disease management, women's and men's health, pediatrics, procedures, behavioral-health screening, care transitions, and EHR-based panel management.

Expert Witness & Consultant

Independent Multi-location · 2016–Present

- Review clinical documentation, standards of care, scope-of-practice issues, policies, and patient-safety questions; provide expert testimony and help legal teams understand clinical and regulatory context.

EDUCATION

Post-Master's Certificate, Psychiatric-Mental Health Nurse Practitioner — Regis College, 2023

MSN, Family Nurse Practitioner — University of Southern Maine, 2010

BS/BA, Organic Chemistry & Anthropology — The Evergreen State College, 2002

LICENSURE & CERTIFICATIONS

- **Psychiatric-Mental Health Nurse Practitioner (PMHNP-BC)** — American Nurses Credentialing Center, 2024–Present
- **Family Nurse Practitioner (FNP-BC)** — American Association of Nurse Practitioners, 2010–Present
- **Vermont APRN**, full prescriptive authority; DEA Schedule II–VI prescriber; BLS/ACLS — Current

TECHNICAL & SYSTEMS SKILLS

- **EHR / Clinical Systems:** Practice Fusion, Epic, eClinicalWorks, Avatar, CPSI, Meditech — registry workflows, documentation standards, secure messaging, telehealth, panel management, and clinical data hygiene.
- **Office Technology & Operations:** device/network troubleshooting, privacy-conscious access workflows, scanning/printing and archival storage, backup and continuity planning, vendor evaluation, and end-user support for staff and patients.

Curriculum Vitae — Appendix

Jeffrey Lourie, MSN, APRN, FNP-BC, PMHNP-BC

OVERVIEW

Clinical Practice & Integration

Dual-certified FNP/PMHNP who blends family medicine, psychiatric care, addiction medicine, crisis planning, and chronic-disease management in accessible outpatient models.

Clinical Operations & Access

Operator who has designed scheduling, triage, recall, registry, secure-messaging, telehealth, documentation, and follow-up workflows to improve access and continuity without relying on theoretical care models.

Ethics, Safety & Governance

Former Medical Ethics Committee chair with practical experience translating autonomy, consent, harm reduction, risk management, capacity, privacy, and safety into fast clinical decisions.

Informatics & Health Technology

Hands-on technology lead for a small healthcare practice who can evaluate whether tools fit real-world clinical work — supporting safe decisions, reducing cognitive burden, and integrating with privacy, consent, documentation, and workflow constraints.

DETAILED CLINICAL SCOPE

Primary Care

- Comprehensive lifespan primary care: acute concerns, preventive care, chronic-disease management, pediatric/adolescent health, women's and men's health, geriatric care, and care transitions.
- Chronic-disease management including diabetes, hypertension, dyslipidemia, obesity, COPD/asthma, thyroid disease, and multimorbidity with medication optimization and pragmatic self-management planning.
- Preventive-care systems including immunization planning, cancer screening, cardiovascular risk reduction, recall logic, registry cleanup, and standing-order workflows.
- Office procedures including vaccinations, medication injections, basic wound care, suturing, cryotherapy, incision and drainage, splinting, joint/soft-tissue injections, and point-of-care testing.
- Care coordination with hospitals, emergency departments, specialists, therapists, pharmacies, labs, social work, community agencies, and state/federal support programs.

Psychiatric-Mental Health

- Comprehensive psychiatric assessment, DSM-5 diagnostic formulation, psychopharmacology, shared decision-making, medication titration, safety monitoring, and longitudinal follow-up.
- Clinical experience with depression, anxiety disorders, ADHD, bipolar-spectrum conditions, PTSD, insomnia, neurodivergence, and medically complex patients with overlapping psychiatric and primary-care needs.
- Use of validated scales including PHQ-9, GAD-7, ASRS, MDQ, and C-SSRS to support monitoring, communication, and outcome tracking.
- Brief psychotherapeutic interventions including motivational interviewing, CBT-informed strategies, sleep hygiene, behavioral activation, psychoeducation, and skills-based reframing.
- Crisis assessment, safety planning, family/caregiver coordination, relapse-prevention planning, and escalation to higher levels of care when clinically appropriate.

Substance Use Disorder / Addiction Medicine

- Evidence-based OAT/MAT care including buprenorphine/naloxone induction, home induction, micro-induction exposure, extended-release buprenorphine, oral/IM naltrexone, and alcohol-use pharmacotherapy when indicated.
- Harm-reduction care including naloxone training/distribution, overdose-prevention planning, safer-use counseling, contingency-management concepts, and linkage to syringe services and community supports.
- Withdrawal management using validated tools such as COWS and CIWA-Ar; bridge planning after hospital discharge and care transitions to reduce relapse and avoidable ED use.
- Safety and monitoring workflows: urine drug testing with confirmatory interpretation when needed, PDMP review, treatment agreements, observed dosing, pill counts, and diversion-mitigation practices.

- Interprofessional coordination with psychiatry, primary care, social work, peer recovery, courts, probation, child welfare, housing, and community agencies.

OPERATIONS, INFORMATICS & TECHNOLOGY

- EHR fluency: Practice Fusion, Epic, eClinicalWorks, Avatar, CPSI, and Meditech; experience with documentation standards, data hygiene, registry workflows, and clinical content organization.
- Implemented and maintained telehealth, asynchronous messaging, patient communication, and virtual-care workflows with attention to privacy, access, informed consent, documentation, and continuity.
- Hands-on small-practice IT lead: endpoint/device troubleshooting, network and connectivity problem-solving, printer/scanner workflows, backups/access continuity, vendor coordination, and user support.
- Clinical workflow translator: converts messy real-world care delivery into requirements, adoption risks, safety checks, user stories, workflow maps, training needs, and evaluation criteria.
- Understands where automation can reduce burden and where it can create clinical risk through misplaced certainty, workflow mismatch, alert fatigue, privacy leakage, or poor escalation design.

LEADERSHIP & COMMITTEES

- **Chair, Medical Ethics Committee** — Gifford Medical Center, 2016–2018. Reviewed ethical issues across inpatient and outpatient care; provided rapid, practical recommendations for high-acuity clinical concerns.
- **Chair, Nurse Practitioner / Physician Assistant Committee** — Franklin Memorial Health Network, 2012–2013. Represented NP/PA needs across outpatient and hospital settings; advocated for quality, access, and scope-appropriate practice.
- **Lead Provider** — North Branch Health, 2018–Present. Directs clinical operations, access, care-model design, technology operations, and patient-centered integrated care.
- **Lead Provider** — Gifford Health Center at Berlin, 2015–2018. Coordinated multidisciplinary rural care across lifespan primary care, chronic disease, access, and behavioral-health integration.
- **Lead Provider, Morrisville Office** — Treatment Associates, 2018–2019. Coordinated MAT/OAT care involving counseling, nursing, recovery supports, and ancillary services.
- **Board Member, Executive Committee** — Vermont Nurse Practitioner Association, 2013–2014. Represented Vermont NPs in state healthcare and legislative discussions.

CLINICAL EDUCATION & MENTORSHIP

- Precepted NP students and mentored early-career clinicians over 15 years across rural primary care, integrated behavioral health, medication management, documentation, differential diagnosis, patient communication, and team-based practice.
- Participated in case conferences, teaching rounds, huddles, protocol discussions, and practical training around outpatient diagnosis, patient safety, care transitions, and documentation integrity.
- Teaching strengths: translating ambiguity into decision trees, modeling risk-benefit discussions, helping learners tolerate uncertainty, and connecting guidelines to actual patient constraints.

EXPERT WITNESS & CONSULTING

- Provided expert testimony in legal proceedings involving family nurse practitioner standards of care, scope of practice, documentation, and professional accountability.
- Reviewed records, policies, workflows, clinical decisions, and care standards to identify alignment or gaps relative to accepted NP practice.
- Helped legal teams understand clinical terminology, regulatory context, risk, causality, patient safety, care coordination, and what is realistic in outpatient practice.

PROFESSIONAL & PERSONAL INTERESTS

- Neuroscience, cognition, and metacognition — and how they inform clinical reasoning, learning, and patient care.
- Decision-making under uncertainty, cognitive bias, diagnostic reasoning, and clinical risk communication.
- Integration of primary care, psychiatry, addiction medicine, trauma-informed care, and chronic-disease management.
- Healthcare technology that improves access, reduces administrative burden, and preserves patient trust and safety, including the ethical implementation of automation.
- Healthcare access for rural patients and operational models that reduce wait times without degrading continuity or quality.