

Context and emergence of Advanced Practice Nurses in France

Contexto e surgimento dos Enfermeiros de Prática Avançada na França

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ABSTRACT | INTRODUCTION: Advanced Practice Nursing (APN) was introduced in France to address critical healthcare challenges, including physician shortages, population aging, and the growing burden of chronic diseases. This reform expands the nursing role to improve access, continuity, and quality of care. **OBJECTIVE:** This reflective article aims to explore the contextual factors that have influenced the emergence of Advanced Practice Nurses (APNs) in France, while critically analyzing the current challenges and opportunities associated with their implementation. **METHODS:** This reflective analysis is based on a narrative and critical review of policy developments, demographic trends, and organizational transformations influencing APN deployment. Guided by contextual interpretation and reflexivity from the authors' professional and academic perspectives, legislative milestones and health system reforms introduced between 2016 and 2025 were reviewed to identify key drivers, barriers, and opportunities. **RESULTS:** APNs are authorized to conduct independent consultations, perform diagnoses, prescribe medications and tests, and coordinate care pathways across five priority domains: chronic conditions, psychiatry, oncology, nephrology, and emergency care. The 2025 removal of mandatory physician protocols enabled direct patient access, enhancing autonomy and reducing care delays. **CONCLUSION:** APNs contribute to sustainable healthcare transformation by strengthening prevention, interprofessional collaboration, and equity in underserved areas.

KEYWORDS: Advanced Practice. Nursing. Evolution. Emergence. Healthcare System.

RESUMO | INTRODUÇÃO: A Enfermagem de Prática Avançada (EPA) foi introduzida na França como resposta a desafios críticos na área da saúde, incluindo a escassez de médicos, o envelhecimento da população e o aumento da carga de doenças crônicas. Essa reforma amplia o papel da enfermagem para melhorar o acesso, a continuidade e a qualidade do cuidado. **OBJETIVO:** Este artigo reflexivo tem como objetivo explorar os fatores contextuais que influenciaram o surgimento dos Enfermeiros de Prática Avançada (EPAs) na França, ao mesmo tempo em que analisa criticamente os desafios e oportunidades atuais relacionados à sua implementação. **MÉTODOS:** Esta análise reflexiva baseia-se em uma revisão narrativa e crítica de desenvolvimentos políticos, tendências demográficas e transformações organizacionais que influenciam a implantação da EPA. Guiada pela interpretação contextual e pela reflexividade das perspectivas profissionais e acadêmicas dos autores, foram revisados marcos legislativos e reformas do sistema de saúde introduzidos entre 2016 e 2025 para identificar os principais impulsionadores, barreiras e oportunidades. **RESULTADOS:** Os EPAs estão autorizados a realizar consultas independentes, diagnósticos, prescrever medicamentos e exames, e coordenar trajetórias de cuidado em cinco áreas prioritárias: condições crônicas, psiquiatria, oncologia, nefrologia e atendimento de urgência. A remoção, em 2025, da obrigatoriedade de protocolos médicos permitiu o acesso direto dos pacientes, aumentando a autonomia dos EPAs e reduzindo atrasos no cuidado. **CONCLUSÃO:** Os EPAs contribuem para uma transformação sustentável do sistema de saúde ao fortalecer a prevenção, a colaboração interprofissional e a equidade em áreas desassistidas.

PALAVRAS-CHAVE: Prática Avançada. Enfermagem. Evolução. Surgimento. Sistema de Saúde.

Submitted June 26th, 2025, Accepted Oct. 15th, 2025,

Published Nov. 17th. 2025

J. Contemp. Nurs., Salvador, 2025;14:e6349

<https://doi.org/10.17267/2317-3378rec.2024.e6349> | ISSN: 2317-3378

Assigned editor: Tássia Macêdo

How to cite this article: Cornillat O, Decormeille G. Context and emergence of Advanced Practice Nurses in France. J Contemp Nurs. 2025;14:e6349. <https://doi.org/10.17267/2317-3378rec.2025.e6349>



1. Introduction

The history of advanced practice (AP) in nursing spans nearly a century and has always been central to population health care¹. However, in France, this new profession has experienced significant growth over the past seven years², with support dating back more than a decade³. A retrospective look helps explain the legislators' decision to introduce AP roles.

Since 1945, the socio-demographic landscape in France has undergone significant changes, marked by a notable rural exodus. This same generation triggered the post-war baby boom and is now gradually aging⁴. Medical advances and improved living conditions have extended life expectancy, but this longevity has led to an accumulation of chronic diseases (such as heart failure, respiratory insufficiency, and neurocognitive disorders).

As a result, while the onset of dependency is delayed, the demand for healthcare and prevention is increasing⁵. At the same time, the medical workforce is also aging, requiring strategic adaptations within the healthcare ecosystem⁶. The number of practicing physicians in France remains insufficient, with significant disparities in geographic distribution. Rural areas, which constitute a large part of the national territory, are considerably less attractive than southern regions or major urban centers. A demographic rebalancing is not anticipated before 2030. In response to the pressing issue of medical workforce shortages, particularly in underserved areas, the French government has considered introducing a new healthcare role: the Advanced Practice Nurse (APN)⁷.

Thus, in 2014, the French Nursing Council advocated for the recognition of a "primary care nurse practitioner" status. It was not until 2016 that nurses were officially authorized to engage in "advanced practice" roles². Although this expanded scope of practice could have been applied to a broader range of allied health professionals, the Ministry of Health and Prevention ultimately reserved this major innovation in care delivery exclusively for the nursing profession⁸.

It is established that APNs have several responsibilities compared to non-APN nurses, such as conducting

independent consultations, including direct access, and primary prescribing since 2025⁹. In addition, they can assess, diagnose, and provide clinical follow-up for patients within their area of expertise, and then prescribe tests (including laboratory tests and imaging) in accordance with relevant guidelines¹⁰. Finally, they are able to renew or adapt medication treatments, coordinate care pathways, and participate in therapeutic education.

It's essential to highlight that APNs actively contribute to the management of health conditions, prevention and health promotion, including stabilized chronic conditions, psychiatry and mental health, oncology/hematology-oncology, nephrology (chronic kidney disease, dialysis, transplantation), and emergency services¹⁰. The autonomy that APNs have is now exercised without the obligation of an organizational protocol signed with a physician, even if interprofessional collaboration remains important¹¹. Then, integrity and professional ethics remain crucial.

Advanced practice represents a significant paradigm shift, transitioning from a primarily technical approach to one that emphasizes reasoned clinical autonomy, thereby fostering advanced clinical reasoning and diagnostic capabilities¹². It reduces the medical burden for targeted pathologies, allowing physicians to focus on complex cases. Also, its trained nurses strive to improve the coordination of care pathways, particularly for chronic diseases. Advanced practice positions these new healthcare providers as primary care providers in certain situations, helping to modernize patient care in France¹³.

The impact of the creation of advanced practice in France enables a transformation of the healthcare system by improving access to care, particularly in underserved areas ("medical deserts"). This also helps reduce territorial inequalities, thanks to the widespread presence of nurses throughout the country, which responds to the aging population through continuous and early management of chronic conditions. The hoped-for impact is to reduce the rate of care foregone, particularly for vulnerable populations. Indeed, the proximity of APNs could more easily foster a therapeutic alliance in rural areas. The presence of APNs allows for better task sharing within teams. In summary, advanced practice is a lever for modernizing the healthcare system, with a focus on accessibility, quality, and prevention for all.

Although the French law on advanced practice theoretically opens advanced practice to all paramedical professions, the implementing regulations have reserved it for nurses. This represents a significant advancement in the French healthcare system¹⁴. At the same time, nurses were the first to benefit from this reform because they are located throughout the country, including rural areas. Their pivotal role in monitoring chronic patients makes them a natural first-line provider¹⁵. The presence of APNs in all sectors (community, hospital, and medico-social), along with their adaptability, facilitates care coordination. This reform has enhanced the status of the profession and established a genuine advanced nursing sector in France.

This reflective article aims to explore the contextual factors that have influenced the emergence of Advanced Practice Nurses (APNs) in France, while critically analyzing the current challenges and opportunities associated with their implementation.

1.1 Development of the reflection

1.1.1 Why is Advanced Practice Nursing a response to today's healthcare challenges?

France is currently facing a multifactorial crisis, marked notably by an aging population and a persistent level of socioeconomic vulnerability. As of 2023, 90% of the French population is reported to live in areas classified as medical deserts. According to the French national health insurance system, approximately 6 million people don't have a primary care physician. Physician shortages, unequal territorial distribution of providers, and limited access to care are all interlinked and further exacerbated by an aging population and the increasing prevalence of chronic diseases. Patients with long-term conditions and no designated physician tend to seek care less frequently. In 2021, two out of ten patients had not consulted a community-based practitioner—a trend likely amplified by the COVID-19 pandemic.

In France, the poverty rate has been rising steadily for the past two decades. People experiencing socioeconomic hardship are three times more likely to forgo care. In areas lacking general practitioners, the risk of delayed diagnosis is up to eight times higher. In response, the French healthcare system underwent modernization in 2016 through the introduction of care pathways and care networks⁸.

These initiatives aim to ensure a coherent continuum between primary care, community-based services, specialist care, and home or outpatient care, while also integrating preventive and social-medical support services.

The primary goal is indeed to improve and streamline the patient journey. Thus, the quality of care provided to users, the costs involved, geographical medical disparities, the variability of the care itself, and, finally, the need to offer a new way of providing care, all point to a new way of providing care to those being cared for¹⁴.

This is how Advanced Practice Nurses emerged in France, with care divided into five categories: stabilized chronic pathologies, psychiatry and mental health, oncology, chronic kidney disease, dialysis, and kidney transplantation; common polypathologies in primary care; and emergency care¹⁰.

At the decision-making level, APNs play a role in decision-making bodies, ensuring they fully participate in the development of their profession and working conditions¹⁶. Just like for nurses, continuing education for APNs is essential, as is the use of research in advanced practice to consolidate skills, evaluate, and develop evidence-based practices. All these measures aim to ensure the attractiveness, sustainability, and effectiveness of advanced practice in France, serving both patients and the rapidly evolving healthcare system.

Then, advanced practice nursing may be one of the sustainable solutions to address the workforce shortage and improve retention in the health sector¹⁴. Indeed, it offers motivating and innovative career development that can limit premature departures. It helps retain experienced nurses by recognizing their skills in this advanced practice. It also enables a more effective distribution of tasks within teams, reducing the medical workload and optimizing medical time, thereby promoting a smoother patient journey.

1.1.2 An economic model under construction

From the perspective of the economic model and the resources allocated to financing this emerging profession, two distinct areas of practice must be considered: in private practice and in hospital practice⁶. In the private sector, APN consultations are being gradually introduced and are subject to

reimbursement by the Caisse Primaire d'Assurance Maladie (CPAM) (Local Health Insurance Office) in accordance with Amendment⁹. In hospitals, the specific APN payment is low (~€70/month) compared to that of a basic practice nurse. Funding for these positions is often local and fragile, dependent on the budgetary choices of institutions or regional health authorities (ARS), with no sustainable national allocation. Without a clear and attractive economic model, the deployment of APNs remains uneven and risks being concentrated in the best-resourced areas. To address the current healthcare system's challenges and the high rate of home hospitalizations, the economic system should provide specific funding for the sustainability of the system.

The healthcare industry is experiencing a constant turnover of healthcare professionals. By 2023, one in two nurses had left the hospital or changed professions after just ten years on the job. Hospitals are also adapting by sharing the care of users through partnerships with the city. The notion of population-based care takes on its whole meaning in the face of the variety of demands for care¹⁷.

To be fully effective, Advanced Practice Nursing in France requires sustainable funding that is appropriate for the required academic level¹⁸. But one key lever remains the precise positioning of hospital management and the role of APNs in the organizational structure, which is not under medical supervision¹⁹. Without this, even this innovative system alone will not ensure the retention of nurses in hospitals.

The implementation of higher and specific pricing measures for APN consultations in private practice could reflect the added value of their clinical expertise and their primary care role²⁰. Finally, officially recognizing APNs as a fully-fledged intermediate medical profession, with its own regulatory framework, would allow APNs to fully participate in decisions affecting their practice, unlike today, where representatives of core nursing professionals primarily address these issues.

1.1.3 True autonomy or collaboration between APNs and physicians?

Before 2025, the practice of APNs was strictly governed by an organizational protocol signed with one or more physicians. Since Decree No. 2025-55 of January 20th, 2025, this obligation has been removed:

APNs can now see patients directly without a prior medical prescription ("direct access"). Their clinical autonomy is strengthened, particularly in primary care and in the management of stabilized chronic conditions¹¹.

Collaboration with physicians remains essential, but it is more flexible and less formalized, adapting to the realities of each region or facility¹¹. This reform aims to streamline patient pathways, improve continuity of care, and alleviate the medical shortage. In practice, the removal of the mandatory protocol promotes more natural and better-integrated cooperation, centred on the needs of patients. However, the main lever is also to find a bulwark against the medical desert induced by the closed numbers, which has finally been lifted in France since May 2025.

Compared with the core profession, advanced practice helps to improve access to care and the quality of care for users, while reducing the workload of practitioners working on defined pathologies¹³. Furthermore, advanced practice offers nurses an alternative, enhancing their skills and access to clinical expertise. To streamline the patient journey, direct access to APNs allows for the reshaping of care pathways and improved interprofessional collaboration. To this end, patients can consult an APN directly, without needing to go through a physician for the initial prescription.

This unprecedented direct access helps reduce waiting times and improve the early management of chronic conditions, strengthens primary care teams with a clearer and more complementary distribution of roles, and ultimately enhances interprofessional trust through collaborative practices based on shared expertise and a unique approach that combines medical and nursing care. Direct access is a strategic step forward for modernizing and simplifying care pathways while respecting shared interprofessional collaboration.

1.1.4 Advanced Practice Nursing: a strategic lever for efficient care pathways

APN represents a far-reaching change in the role of the nurse, due to its functions, scope of intervention, and contribution to care pathways⁶. To obtain the APN level, it is necessary to access this training program, which can be done directly through the University of Health Sciences. However, three years of experience as a nurse are required to practice advanced nursing.

At the master 2 level, this program aims to improve skills with a common foundation in clinical sciences, pathway coordination and public health. The International Council of Nurses emphasizes that APNs develop knowledge and skills adapted to their practice context¹².

Within the regulated framework of their practice, APNs enjoy greater clinical autonomy, as in other countries. They are authorized to make diagnoses in their field of expertise, and to prescribe examinations and specific treatments from among the five Mentions, with full responsibility. APNs are themselves prescribers of care. Through these different Mentions, they can ensure the longitudinal follow-up of patients with chronic pathologies, in private practice or in consultation with healthcare institutions. They can also be responsible for the care of patients who come in for emergency acute care. In under-serviced areas, APNs make a significant contribution to preventing care breakdowns and smoothing care paths.

Finally, the Rist Law (2023) and its implementing decrees officially established the possibility for APNs to practice through direct access, without a prior medical prescription in some instances, which strengthens the clinical responsibilities of APNs as a lever in the patient journey²¹. Similarly, this law clarified and secured their authority to prescribe tests and medications within their scope of expertise, strengthening the clinical responsibility of APNs in monitoring chronic patients to improve preventive care¹¹.

The Rist Law (2023) removed regulatory barriers, clarified the role of APNs, and encouraged their deployment throughout the country²¹. Thus, the French healthcare system will be able to expand while meeting the demands of its territories and local areas.

1.1.5 Limits and precautions

With remuneration only 70€ (euros) higher than that of a qualified nurse, the attractiveness of hospital APNs is questionable¹⁸. Their integration depends heavily on department heads. Although they do not alter the hierarchy, APNs introduce a new link that requires clarification¹⁹. Their development requires institutional support and clear communication to promote their implementation through research.

To strengthen institutional support, ensure fair compensation, and effectively integrate APNs, national and local policy measures are necessary. For advanced practice nursing to truly develop and fulfill its public health mission, ambitious structural measures must be adopted:

At the national level: a genuine base salary aligned with new clinical responsibilities must be implemented, eliminating the logic of low and unstable hospital bonuses¹⁹. Recognizing that advanced practice cannot be limited to a symbolic financial bonus. The social identity of this profession is important and essentially requires the recognition of a dedicated status and salary scale that considers the master's level and newly acquired advanced skills.

At the local and institutional levels: it is essential for healthcare facilities to develop a clear support and integration policy, structuring teams to promote cooperation between physicians and APNs on an equal functional footing¹⁹. To achieve this, the structure must be clear before an APN begins training. The clearer the pathways, the better the collaboration and distribution of tasks.

2. Conclusion

Advanced Practice Nursing (APN) in France represents more than a mere expansion of clinical competencies; it embodies a structural transformation of the healthcare system. Its implementation seeks to improve access to care, enhance interprofessional coordination, and foster new models of collaboration. In this context, APNs are emerging as key stakeholders in addressing contemporary public health challenges, particularly by meeting the needs of an aging population through more inclusive, diversified, and prevention-oriented care offerings.

However, the deployment of this practice remains embedded within a healthcare system marked by a hierarchical culture and resistance to change. While some physicians perceive APNs as a valuable response to medical workforce shortages, others express concern about potential competition. Territorial disparities further exacerbate these tensions: in underserved areas, collaboration may be either more challenging or, conversely, absolutely essential.

Cultural and change resistance continue to hinder the widespread adoption of genuinely collaborative practices.

Nevertheless, in teams where roles and care pathways are clearly defined, the benefits—both in terms of patient outcomes and team satisfaction—are evident. Establishing sustainable partnerships requires comprehensive efforts in education, interprofessional dialogue, and mutual recognition of competencies, all centered on the patient rather than on individual professional interests.

In a professional field that is still in the early stages of structuration, the development of APN networks and associations stands out as a strategic lever. These collective professional associations promote the sharing of best practices, foster the development of shared expertise, and provide a unified voice to represent professional interests before policymakers. They play a critical role in legitimizing the profession and enhancing its recognition among patients and healthcare partners. However, care must be taken to avoid the fragmentation of efforts: the proliferation of networks may reduce their effectiveness and fuel counterproductive rivalries. A coherent and federated governance approach is crucial for consolidating the profession and ensuring its meaningful contribution to public health discourse.

Authors' contributions

The authors declare that they made substantial contribution in terms of conception or design of the research, acquisition, analysis or interpretation of data and the writing or critical review of the relevant intellectual content. All of the authors approved the final version to be published and agreed to take public responsibility for all aspects of the study.

Competing interests

No financial, legal or political conflict involving third parties (government, companies and private foundations, etc.) has been declared for any aspect of the submitted work (including but not limited to grants and funding, participation in advisory board, study design, manuscript preparation, statistical analysis, etc.).

Indexers

The Journal of Contemporary Nursing is indexed by [DOAJ](#) and [EBSCO](#).



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