

**RCRM/RCC PHYSICIAN ASSISTANT PROGRAM
PROFESSIONAL PRACTICE ISSUES**

INSTRUCTIONAL OBJECTIVES:

Upon completion of the assigned readings, lectures, videos, discussions, and case presentations the Physician Assistant Student will be able to:

1. Define and differentiate between the two types of authority to practice as a Physician Assistant
 - a. Delegatory
 - b. Regulatory

2. Describe the following principles as each relates to Physician Assistant Practice
 - a. Physician Assistant Role and Responsibilities
 - b. Privilege and confidentiality
 - c. PA and Individual Professionalism
 - d. Competency
 - e. Commitment to patient and community well being

3. Describe the certification and licensure process in California
 - a. Graduation from an approved / accredited program
 - b. NCCPA examination
 - c. Interim approval to practice
 - d. Application process
 - e. Credentialing
 - f. Maintenance of license and recertification
 - g. Revocation of license

4. Define the Physician Assistant Scope of Practice in California
 - a. Limitations of Medical Services
 - b. Medical Services performable
 - c. Delegation of Services
 - d. Supervision required
 - e. Protocols
 - f. Formulary

5. Define the Physician Supervision Agreement in California.

6. Describe Written Prescriptive Transmittal Authority as it relates to the following:
 - a. Drug Orders
 - b. Patient-specific orders
 - c. The medical record
 - d. Administration and dispensing medications
 - e. Schedule II through Schedule V medications

The California PA

Professional Practice Issues

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1

The PA Employer ?

- Established / experienced employer of PAs ?
- A couple of PAs on staff ?
- New employer of PAs ?

Get to know:
Administrators / Managers / Billers

2

The California PA

The PA works under "delegated" authority

Written documents kept on site:

Delegation of Services Agreement (DSA)

Services / privileges delegated
Supervision Agreement
Protocols
Formulary
Emergency Transport Protocol

3

The PA Employer...

AND THE PA

A shared responsibility to know & apply

- PA Laws & Regs
- Reimbursement Regs & Policies
(Medi-Cal / Medicare)
- Other Agency Policies
(Sch. districts / DOT / Credentialing)

4

The California PA

As of July 1, 2001...

Physician Supervisors (MD / DO)

- No application or fees to supervise
- May supervise if not restricted by MBC
- May supervise not more than 2 PAs
at any one time
(4 PAs in designated underserved area)

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The California Physician – PA Team

The Laws and Regulations

Business and Professions Code
(one of 29 Codes)

California Code of Regulations, Title 16
(one of 27 Titles)

6

PA Laws & Regulations

B & P Code

Article 1. General Provisions (4 pages)

CCR, Title 16

Article 4. Practice of Physician Assistants (4pages)

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Podiatry (B & P Code 3502)

(b)... a physician assistant performing medical services under the supervision of physician and surgeon may assist a doctor of podiatric medicine who is a partner, shareholder, or employee in the same medical group as the supervising physician.

...only according to patient-specific orders from the supervising physician and surgeon.

The supervising physician and surgeon shall be physically available to the physician assistant for consultation when such assistance is rendered...

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Prescription Transmittal Authority (B & P Code 3502.1)

3502.1 (a) ...a physician assistant may administer or provide medication to a patient, or transmit orally, or in writing on a patient's record or in a drug order, an order to a person who may lawfully furnish the medication...

- *A supervising physician...may limit this authority by specifying the manner in which the physician assistant may issue delegated prescriptions.*

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Prescription Transmittal Authority (B & P Code 3502.1) 3502.1 (a) cont..."Formulary"

(2)...shall first prepare and adopt, or adopt, a written, practice specific formulary and protocols that specify all criteria for the use of a particular drug or device, and any contraindications for the selection. The drugs listed shall constitute the formulary and shall include only drugs that are appropriate for use in the type of practice engaged in by the supervising physician and surgeon. When issuing a drug order, the physician assistant is acting on behalf of and as an agent for a supervising physician and surgeon.

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Prescription Transmittal Authority (B & P Code 3502.1)

(b) "Drug order"... an order for medication which is dispensed to or for a patient issued and signed by a physician assistant ...

(1)... a drug order issued pursuant to this section shall be treated in the same manner as a prescription or order of the supervising physician...

(3)... the signature of a physician assistant on a drug order shall be deemed to be the signature of a prescriber for purpose of this code and the Health and Safety Code.

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Prescription Transmittal Authority (B & P Code 3502.1)

(c) A drug order... shall either be based on the protocols described in subdivision (a) or shall be approved by the supervising physician before it is filled or carried out.

(1)... shall not administer or provide a drug or issue a drug order for a drug other than for a drug listed in the formulary without advance approval from a supervising physician and surgeon for the particular patient.

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Prescription Transmittal Authority (B & P Code 3502.1)

(c) *cont...* scheduled meds

(2) *A physician assistant may not administer, provide or issue a drug order for Schedule II through Schedule V controlled substances without advance approval by a supervising physician and surgeon for the particular patient*

(3) *... subject to a reasonable quantitative limitation...*

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Prescription Transmittal Authority (B & P Code 3502.1)

(d) *A written drug order... shall contain the printed name, address, and phone number of the supervising physician and surgeon, the printed or stamped name and license number of the physician assistant, and the signature of the physician assistant... for a controlled substance... shall include the federal controlled substance registration number of the physician assistant...*

When using a drug order, the physician assistant is acting on behalf of and as the agent of a supervising physician and surgeon.

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Prescription Transmittal Authority (B & P Code 3502.1)

(e) *The medical record... Schedule II drug order has been issued or carried out shall be reviewed and countersigned and dated by a supervising physician and surgeon within seven days.*

(f) *All physician assistants who are authorized by their supervising physicians to issue drug orders for controlled substances shall register with the United States Drug Enforcement Administration (DEA).*

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Title 16, Article 4. Practice of Physician Assistants

1399.540. Limitation of Medical Services

A physician assistant may only provide those medical services which he or she is competent to perform and which are consistent with the physician assistant's education, training, and experience and which are delegated in writing by a supervising physician who is responsible for the patients cared for by the physician assistant...

A physician assistant shall consult with a physician regarding any task, procedure or diagnostic problem which the physician assistant determines exceeds his or her level of competence or shall refer such cases to a physician.

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Title 16, Article 4. Practice of Physician Assistants

1399.541. Medical Services performable.

Because physician assistant practice is directed by a supervising physician, and a physician assistant acts as an agent for the physician, the orders given and tasks performed by a physician assistant shall be considered the same as if they had been given and performed by the supervising physician.

Unless otherwise specified in these regulations or in the delegation or protocols, these orders may be initiated without the prior patient specific order of the supervising physician.

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Title 16, Article 4. Practice of Physician Assistants

1399.541. Medical Services Performable

In any setting...

(a) *Take a patient history; perform a physical examination and make an assessment and diagnosis therefrom...*

(b) *Order or transmit an order for x-ray, other studies, therapeutic diets, physical therapy, occupational therapy, respiratory therapy, and nursing services...*

(c) *Order... perform or assist... procedures*

(d) *Recognize and...institute, when necessary, treatment procedures essential for the life of the patient.*

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Title 16, Article 4. Practice of Physician Assistants

1399.541 Medical Services Performable.

(e) Instruct and counsel...

(f) Initiate arrangements for admissions...

(g) Initiate and facilitate the referral of patients...

(h)...the medical record...for whom the physician's (**Schedule II**) prescription has been transmitted or carried out shall be reviewed and countersigned and dated...within seven(7) days

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Title 16, Article 4. Practice of Physician Assistants

1399.541 Medical Services Performable.

(i) (1) Perform surgical procedures without the personal presence of the supervising physician which are customarily performed under local anesthesia...

All other surgical procedures requiring other forms of anesthesia may be performed by a physician assistant only in the personal presence of an approved supervising physician.

(2)...act as first or second assistant at surgery under the supervision of an approved supervising physician.

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Title 16, Article 4. Practice of Physician Assistants

1399.542 Delegated Procedures.

The delegation of procedures to a physician assistant under Section 1399.541, subsections (b) and (c) shall not relieve the supervising physician of primary continued responsibility for the welfare of the patient.

1399.543. Training to Perform Additional Medical Services.

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Title 16, Article 4. Practice of Physician Assistants

1399.545. Supervision Required.

(a)...in person or by electronic communication...

(b)...shall delegate to...only those tasks and procedures consistent with the supervising physician's specialty or usual and customary practice...

(c)...observe or review evidence of the physician assistant's performance of all tasks and procedures...

(d)...shall establish in writing transport and back-up procedures for the immediate care of patients who are in need of emergency care beyond the physician assistant's scope of practice for such times when a supervising physician is not on the premises.

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Title 16, Article 4. Practice of Physician Assistants

1399.545. Supervision Required.

(e)... shall establish in writing guidelines for the adequate supervision of the physician assistant which shall include one or more of the following mechanisms:

(1) Examination of the patient... the same day...

(2) Countersignature and dating of all medical records written by the physician assistant within thirty (30) days...

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Title 16, Article 4. Practice of Physician Assistants

1399.545. (e) cont...Supervision Required.

(3)...may adopt protocols to govern the performance of a physician assistant for some or all tasks... Protocols shall be developed by the physician, adopted from or referenced to, texts or other sources.

The supervising physician shall review, countersign, and date a minimum of 10% sample of medical records of patients...within 30 days...by diagnosis, problem, treatment or procedure represent, in his or her judgment, the most significant risk to the patient;

(4) Other mechanisms approved in advance by the committee.

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Title 16, Article 4. Practice of Physician Assistants

1399.545. cont...Supervision Required.

(g) The supervising physician has continuing responsibility to follow the progress of the patient and to make sure that the physician assistant does not function autonomously. The supervising physician shall be responsible for all medical services provided by a physician assistant under his or her supervision.

1399.546. Reporting of Physician Assistant Supervision.

Each time a physician assistant provides care for a patient and enters his or her name, signature, initials, or computer code on a patient's record...shall also enter the name of his or her approved supervising physician who is responsible for the patient...

“Formulary”
and
“Protocol”

One interpretation...

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Prescription Transmittal Authority
(B & P Code 3502.1)

3502.1 (a) cont... "Formulary"

(2)...shall first prepare and adopt, or adopt, a written, practice specific formulary and protocols that specify all criteria for the use of a particular drug or device, and any contraindications for the selection. The drugs listed shall constitute the formulary and shall include only drugs that are appropriate for use in the type of practice engaged in by the supervising physician and surgeon. When issuing a drug order, the physician assistant is acting on behalf of and as an agent for a supervising physician and surgeon.

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Prescription Transmittal Authority
(B & P Code 3502.1)

(c) A drug order... shall either be based on the protocols described in subdivision (a) or shall be approved by the supervising physician before it is filled or carried out.

(1)... shall not administer or provide a drug or issue a drug order for a drug other than for a drug listed in the formulary without advance approval from a supervising physician and surgeon for the particular patient.

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Prescription Transmittal Authority
B & P 3502.1

"Formulary" ...is a list (practice specific)

- Allows PA to write drug orders for drugs included in the list without prior specific approval (PSA)
- No need to include Scheduled drugs because they always require prior specific approval
- All drugs not included in your formulary also require PSA

"Protocols" ...specify criteria & contraindications

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Drug Order Formulary & Protocols

One Approach... to include in the DSA:

- List common drugs (formulary) in your practice
- Statement: scheduled drugs II through V may be ordered only with prior specific approval (PSA)
- Reference the PDR to adopt as "protocol" for the criteria and contraindications for use
- Statement: may sign for request and receipt of drug samples included in listed formulary

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“Protocols”

The term protocol, as it appears in our laws and regulations, refers to two areas of application.

- 1) “...protocol that specify all criteria for the use of a particular drug or device and any contraindications for the selection”.
- 2) “...protocols to govern the performance of physician assistant for some or all tasks.”
(such as diagnosis, management or procedures) 31

Title 16, Article 4. Practice of Physician Assistants

1399.545. (e) cont...Supervision Required.

(3)...may adopt protocols to govern the performance of a physician assistant for some or all tasks... Protocols shall be developed by the physician, adopted from or referenced to, texts or other sources. The supervising physician shall review, countersign, and date a minimum of 10% sample of medical records of patients...within 30 days...by diagnosis, problem, treatment or procedure represent, in his or her judgment, the most significant risk to the patient;

(4) Other mechanisms approved in advance by the committee. 32

SAMPLE

Protocols for Physician Assistant Practice

As outlined in Section 1399.545 of the Physician Assistant Regulations and Section 3502.1 of the Physician Assistant Practice Act, _____ has adopted the following Lange medical books, all of which are published by Appleton and Lange, as the protocols, clinical practice guidelines and formulary for the physician assistant practice of medicine:

1. “Current Medical Diagnosis and Treatment;”
2. “Current Obstetric and Gynecological Diagnosis and Treatment;”
3. “Current Pediatric Diagnosis and Treatment;”
4. “Current Emergency Diagnosis and Treatment;” and
5. “Current Surgical Diagnosis and Treatment.” 33

(Sample protocol continued)

The protocols set forth in these medical books, which shall be kept at the practice site available for reference at all times, shall provide:

- (1) guidelines for the subjective and objective data that should be obtained from patients for each of the diseases included within them;
- (2) guidelines for the management of patients with any of the included diseases; and
- (3) the formulary of drugs that may be administered or ordered by the physician assistant, except that controlled substances require advance approval from the supervising physician. 34

(Sample protocol continued)

As an agent of the supervising physician, the physician assistant is authorized to provide, administer or order for a service, drug, device or procedure specified in these protocols. Except as provided below, the physician assistant may initiate treatment or orders for the patient care services indicated in the protocols specified in these medical books without prior consultation with the supervising physician.

Physician consultation or referral is indicated for the management of patients that have diseases which are not included in the protocols set forth in these medical books and regarding any patient, task, procedure or diagnostic problem that the physician assistant determines exceeds his level of competence. Also, prior approval of the supervising physician is required before issuing or carrying out any drug order for a controlled substance or a drug that is not specified in the applicable treatment protocol. 35

(Sample protocol continued)

Nothing herein shall be deemed as limiting the discretion of the Physician Assistant, with input from the supervising physician when needed, to exercise professional judgment in the treatment of patients. Deviation from the protocols and guidelines shall not, by itself, be deemed a deviation from the standard of care.

_____ PA Date _____

_____ MD Date _____ 36

**RCRMC/RCC PHYSICIAN ASSISTANT PROGRAM
CALIFORNIA PHYSICIAN ASSISTANT LAWS AND REGULATIONS
PRE/POST TEST**

Name _____

Date _____

Directions: Please mark the following statements as either TRUE or FALSE:

- _____ 1. The Medical Board of California is housed under the Department of Human Services in the state government.
- _____ 2. The Physician Assistant Examining Committee oversees the National Certification Examination.
- _____ 3. The Preceptor shall be the sole person responsible for the training of the preceptee during this phase of the students education.
- _____ 4. During a regular eight hour shift, Dr. Jackson is able to supervise the three physician assistants that cover her outlying clinics.
- _____ 5. While waiting the results of the NCCPA examination, Anthony Fraiser, MA, PA is working in a satellite clinic. According to established protocols and delegation of services agreement his physician supervision is conducted via electronic communication three days a week. All PA Fraiser's charts must be countersigned by his supervising physician within 7 days.
- _____ 6. Each time PA-C Alfred Lee provides care for a patient, he must enter the name of his approved supervising physician on the patient's chart.
- _____ 7. PA-C Baker is able to hand Mr. Moran a prepackaged sample of Motrin 800mg for his back pain as part of a patient specific order.
- _____ 8. The Supervising Physician may go on vacation and leave PA-C foster a message not to disturb him during this time.
- _____ 9. A physician assistant may not practice in the state of California until she receives notification of passage of the national certifying examination.
- _____ 10. I intend on practicing Primary Care Medicine. (Answer Optional)

CAPA and the PAC

Sample DSAs

Sample Protocols

Sample Formulary

37

The California PA : Countersignatures

- | | | |
|--------------------------------------|-----------------------------|---------|
| ➤ "Verbal order" | (if you use that term) | 48 hr |
| ➤ Schedule II drug | (your note on chart) | 7 days |
| ➤ Outpatient notes | (minimum 10%... to 100%) | 30 days |
| ➤ Inpatient notes | (hospital rules / regs ?) | ** |
| ➤ Medi-Cal Patients | (100% co-signed) | 7 days |
| ➤ "Drug order" on prescription blank | | None |

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The "Drug Order" (Prescription)

"Drug order" on Rx blank No countersignature

On formulary - no prior approval

Off formulary - prior approval required
(PSA / Dr. X)

Schedule II - V prior approval always required
(PSA / Dr. X)

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New Tamper-resistant Prescription Forms

- Schedule II - V controlled drugs
- Specific criteria for printing new security forms
- Physician and PA info preprinted on form
(no rubber stamp)
- You may still phone / fax Schedules III-V
(use regular Rx blank otherwise "void" appears)
- "Dispensing" controlled drugs requires reporting

40

Sign For Samples SB 1558, 2002

- New Law 2002
- Sign for request and receipt
- Must include in delegated authority (DSA)

41

Surgical Procedures

Surgical Assisting

Anesthesia

Sedation

42

Title 16, Article 4. Practice of Physician Assistants

1399.541 Medical Services Performable.

(i) (1) Perform surgical procedures without the personal presence of the supervising physician which are customarily performed under local anesthesia...

All other surgical procedures requiring other forms of anesthesia may be performed by a physician assistant only in the personal presence of an approved supervising physician.

(2)...act as first or second assistant at surgery under the supervision of an approved supervising physician.

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CMS Definitions: Supervision

- General
- overall direction and control
 - physician presence not required
- Direct
- physician present in the office
 - immediately available
- Personal
- physician in attendance
 - in the room

44

What about...

Diagnostic Procedure

Fentanyl
Versed

45

Surgical Procedures

"Surgical Procedures" vs "Diagnostic Procedures"

"Personal Presence" ? in the room / immediate area

"Local" vs "General Anesthesia" vs "Sedation"

46

Health And Safety Code and
B & P Code – Medical Practice Act

General Anesthesia: Unconsciousness, with loss of life preserving protective reflexes

Anxiolytics / Analgesics: Community standard of practice used in outpatient settings with no loss of life preserving reflexes

47

"Show Me The Money"

Billing & Reimbursement
2006

48

What can you do for my practice ?

- Perform physician services thereby freeing up the physician for other responsibilities
- Generate revenue

49

In an audit situation...

If it's not documented in the record...
It didn't happen !

50

Billing Codes

ICD -9 Diagnosis codes

CPT Procedure codes

E&M Evaluation & Management

51

Billing

- ICD-9 to identify the diagnosis (eg 286.0)
- CPT / E&M to identify procedure / service

E & M

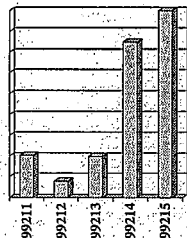
Office visit : New pt / Established pt / Consult

Billing level : 1 - 5 based upon complexity / time
(Estab. pt: 99211, 99212, 99213, 99214, 99215)

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Billing correct E & M code?

- Do not "up-code"
- But do not "down-code" either
- Discuss these criteria with your physician and billing staff



53

The Centers for Medicare &
Medicaid Services

CMS

54

Medicare

- Part A hospitalization
- Part B physician services
- Part C expanded benefits
- Part D prescription drugs

55

Medicare

PAs may perform the following:

- High level services (levels 4 and 5)
- Consultations
- Initial hospital H & Ps
- Mental health services
- Fracture care
- Flexible sigmoidoscopies
- Diagnostic tests
- Telemedicine service
- Ordering physical therapy / plan of care
- Sign the certificate of medical necessity for DME

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Medicare

PAs can be reimbursed for providing the "Welcome to Medicare" initial preventive physical examination

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Medicare

Balanced Budget Act 1997 (BBA)

- Removal of restrictions on setting / supervision
- PAs should apply for own billing code numbers
- Payments increased to 85% of physician fee
- First assist 85% of 16% = 13.6% of surgeon fee
- Payments made to employer

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Medicare

"Incident to rule" Payment @ 100%

Still an option in limited settings with restrictions:

1. Physician on site ("direct" supervision)
2. Physician sees the patient at first visit
3. Physician sees patient with a new problem
4. Outpatient office / clinic (not hospital / ED)

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Medicare

A PA employer may be an "entity" such as an individual physician, medical group, hospital, nursing home or other medical facility authorized to bill for Medicare services.

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SAMPLE

Protocols for Physician Assistant Practice

As outlined in Section 1399.545 of the Physician Assistant Regulations and Section 3502.1 of the Physician Assistant Practice Act, _____ has adopted the following Lange medical books, all of which are published by Appleton and Lange, as the protocols, clinical practice guidelines and formulary for the physician assistant practice of medicine:

1. "Current Medical Diagnosis and Treatment;"
2. "Current Obstetric and Gynecological Diagnosis and Treatment;"
3. "Current Pediatric Diagnosis and Treatment;"
4. "Current Emergency Diagnosis and Treatment;" and
5. "Current Surgical Diagnosis and Treatment."

The protocols set forth in these medical books, which shall be kept at the practice site available for reference at all times, shall provide:

- (1) guidelines for the subjective and objective data that should be obtained from patients for each of the diseases included within them;
- (2) guidelines for the management of patients with any of the included diseases; and
- (3) the formulary of drugs that may be administered or ordered by the physician assistant, except that controlled substances require advance approval from the supervising physician.

As an agent of the supervising physician, the physician assistant is authorized to provide, administer or order for a service, drug, device or procedure specified in these protocols. Except as provided below, the physician assistant may initiate treatment or orders for the patient care services indicated in the protocols specified in these medical books without prior consultation with the supervising physician.

Physician consultation or referral is indicated for the management of patients that have diseases which are not included in the protocols set forth in these medical books and regarding any patient, task, procedure or diagnostic problem that the physician assistant determines exceeds his level of competence. **Also, prior approval of the supervising physician is required before issuing or carrying out any drug order for a controlled substance or a drug that is not specified in the applicable treatment protocol.**

Nothing herein shall be deemed as limiting the discretion of the Physician Assistant, with input from the supervising physician when needed, to exercise professional judgment in the treatment of patients. Deviation from the protocols and guidelines shall not, by itself, be deemed a deviation from the standard of care.

, M.D. or D.O.

, PA

Date

Date

This *Sample* Delegation of Services Agreement does not include the following which may be needed to complete your own DSA:

1. Formulary if applicable
2. Protocols if applicable (may adopt from or reference to text)
3. Description or list of delegated services

Example of Delegation of Services Agreement

DELEGATION OF SERVICES AGREEMENT BETWEEN SUPERVISING PHYSICIAN AND PHYSICIAN ASSISTANT AND WRITTEN SUPERVISION GUIDELINES

[This document is an example of a Delegation of Services Agreement required by the Physician Assistant Regulations. Another model document is available from the Physician Assistant Committee, or PAs and their supervising physicians may design other documents in compliance with such regulations. Optional language is italicized.]

This Delegation of Services Agreement (“Agreement”) is entered into between _____, M.D./D.O. (“*Supervising Physician*”) [*the physicians whose signatures appear below, each of which shall be referred to herein as “Supervising Physician”*], and _____, PA/PA-C (“PA”), in order to fulfill the purposes set forth below.

1. **Purpose.** The purpose of this Agreement is to comply with the requirements of Title 16, Article 4, of the California Code of Regulations, hereinafter referred to as the “Physician Assistant Regulations.” Section 1399.540 of the Physician Assistant Regulations states, in pertinent part, that “A physician assistant may only provide those medical services which he or she is competent to perform and which are consistent with the physician assistant’s education, training and experience, and which are delegated in writing by a supervising physician who is responsible for the patients cared for by that physician assistant.” In this Agreement, Supervising Physician hereby delegates the performance of certain medical services to PA. Section 1399.545 of the Physician Assistant Regulations sets forth requirements for supervision by a supervising physician when a PA is caring for patients. This Agreement shall set forth such requirements to be followed by Supervising Physician.

2. **Qualifications.** PA is licensed by the California Physician Assistant Committee. Supervising Physician has been granted approval by the Medical Board of California or the Osteopathic Medical Board of California to act as a supervising physician. PA and Supervising Physician are familiar with the requirements governing the performance of medical services by PAs, and the supervision of PAs by supervising physicians, as set forth in the Physician Assistant Regulations.

3. **Authorized Services.**

(a) PA is authorized by Supervising Physician to perform all the tasks set forth in subsections (a), (b), (c), (d), (e), (f), and (g) of Section 1399.541 of the Physician Assistant Regulations, subject to the limitations and conditions described in this Agreement or established by Supervising Physician in any applicable protocols or otherwise. *[PA is also authorized to perform certain surgical procedures as specified by Supervising Physician in accordance with Section 1399.541(i) of the Physician Assistant Regulations.]*

(b) As required by Section 1399.540 of the Physician Assistant Regulations, PA may only provide those medical services which he or she is competent to perform and which are consistent with PA's education, training and experience. PA shall consult with Supervising Physician or another qualified health care practitioner regarding any task, procedure or diagnostic problem which PA determines exceeds his or her level of competence, or shall refer such cases to Supervising Physician or another appropriate practitioner.

(c) PA shall perform delegated medical services under the supervision of the Supervising Physician as specified in the Physician Assistant Regulations, this Agreement, any applicable practice protocols, and the specific instructions of Supervising Physician.

(d) As required by Section 1399.546, each time a PA provides care for a patient and enters his or her name, signature, initials or computer code on the patient's record or written order, PA shall also enter the name of the Supervising Physician responsible for the patient.

4. **Drug Orders.**

(a) PA may administer or provide medication to a patient, or issue a drug order, orally or in writing in a patient's chart or drug order form, subject to the conditions and limitations as set forth in Section 3502.1 of the Business and Professions Code, this Agreement, any applicable protocols as described in subsection (b) below, or the specific instructions of Supervising Physician. Such medications may include Controlled Substances in schedules [III] through V. *[For the small number of PAs whose Supervising Physicians write prescriptions for Schedule II, and authorize their PAs to write drug orders for Schedule II, insert Schedule II here.]* PA may sign for the request and receipt of samples of drugs specified in the protocols described in subsection (b) below.

(b) Drug orders shall either be based on protocols established or adopted by Supervising Physician, or shall be approved by Supervising Physician for the specific patient prior to being issued or carried out. Notwithstanding the foregoing, all drug orders for Controlled Substances shall be approved by Supervising Physician for the specific patient prior to being issued or carried out.

(c) Supervising Physician shall review, countersign, and date the medical record of any patient for whom PA issues or carries out a drug order for a Schedule II Controlled Substance within seven (7) days.

5. **Emergency Transport and Backup.**

(a) In a medical emergency requiring the services of a hospital emergency room, the patient shall be directed or transported to the _____ Emergency Room, the telephone number of which is _____. When indicated, PA or practice personnel shall telephone the 911 Operator to summon an ambulance.

(b) In the event Supervising Physician is not available when needed, PA may call and/or refer patients to other authorized physicians as designated by the Supervising Physician, or as otherwise deemed appropriate by PA.

6. **Supervising Physician's Responsibilities.**

(a) Supervising Physician shall remain electronically available at all times while PA is performing medical services, unless another approved supervising physician who has signed a Delegation of Services Agreement for PA is so available.

(b) To the extent required by Section 4(c) above, Supervising Physician shall review, countersign and date within seven (7) days the medical record of any patient for whom PA issues or carries out a drug order. For other patients, Supervising Physician shall utilize one or more of the following mechanisms to supervise PA, as required by Section 1399.545 of the Physician Assistant Regulations (*Check one or more of the following, as applicable*):

_____ Examination of the patient by Supervising Physician the same day as care is given by PA

_____ Supervising Physician shall review, audit and countersign every medical record written by PA within _____ days (*no more than thirty (30) days*) of the encounter.

_____ Supervising Physician shall audit the medical records of at least ten percent (10%) of the patients managed by PA under protocols which shall be adopted by Supervising Physician and PA, pursuant to Section 1399.545(e)(3) of the Physician Assistant Regulations. Supervising Physician shall select for review those cases which by diagnosis, problem, treatment or procedure represent, in his or her judgment, the most significant risk to the patient.

(c) *[If PA is operating under interim approval, Supervising Physician shall review, sign and date the medical records of all patients cared for by the PA within seven (7) days if Supervising Physician was on the premises when the patient was diagnosed or treated. If Supervising Physician was not on the premises at the time, he or she shall review, countersign and date such medical records within 48 hours of the time the medical services were provided.]*

7. **Protocols.** This Agreement does not constitute the protocols required by Section 3502.1 of the Business and Professions Code or, if applicable, Section 1399.545(e)(3) of the Physician Assistant Regulations. Such protocols are on file at the practice site and may incorporate by reference appropriate medical texts.

8. **No Third Party Beneficiaries.** This Agreement shall not be construed as creating rights in or obligations to any third party. It is the intent of the parties solely to fulfill the requirements of the Physician Assistant Regulations for a Delegation of Services Agreement and for the mechanisms to be used by Supervising Physician in supervising PA.

PHYSICIAN ASSISTANT

Dated: _____

SUPERVISING PHYSICIAN

Dated: _____

SUPERVISING PHYSICIAN

Dated: _____

SUPERVISING PHYSICIAN

Dated: _____

SUPERVISING PHYSICIAN

Dated: _____

SUPERVISING PHYSICIAN

Dated: _____

SUPERVISING PHYSICIAN

Dated: _____