DEPARTMENT OF CONSUMER AFFAIRS

Title 16. PHYSICIAN ASSISTANT BOARD

MODIFIED TEXT

SB 697 Implementation

Proposed amendments to the regulatory language are shown in <u>single underline</u> for new text and <u>single strikethrough</u> for deleted text.

Omitted text is indicated by "* * * *"

Modifications to the proposed regulatory language are shown in <u>double underline</u> for new text and double strikethrough for deleted text. Modifications are highlighted in yellow.

Amend Section 1399.502 of Article 1 of Division 13.8 of Title 16 of the California Code of Regulations

§1399.502 Definitions.

For the purposes of the regulations contained in this chapter, the terms

- (a) "Board" means Physician Assistant Board.
- (b) "Code" means the Business and Professions Code.
- (c) "Physician assistant" means a person who is licensed by the board as a physician assistant.
- (d) "Trainee" means a person enrolled and actively participating in an approved program of instruction for physician assistants.
- (<u>ce</u>) "Approved program" means a program for the education and training of physician assistants which has been approved by the <u>bB</u>oard.
- (f) "Supervising physician" and "physician supervisor" mean a physician licensed by the Medical Board of California or a physician licensed by the Osteopathic Medical Board of California.
- (dg) "Approved controlled substance education course" means an educational course approved by the bBoard pursuant to section 1399.610.
- (e) "Practice agreement" means the definition set forth in Section 3501(k) of the Code and it must contain the elements described in Section 3502.3 of the Code.
- (f) "Supervision" means the definition set forth in Section 3501(f) of the Code.

NOTE: Authority cited: Section 3510, Business and Professions Code. Reference: Section 3510, Business and Professions Code.

Amend Section 1399.540 of Article 4 of Division 13.8 of Title 16 of the California Code of Regulations

§1399.540. Limitation on Medical Services.

- (a) 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, provide those medical services which they are authorized to perform, which are consistent with the physician assistant's education, training, and experience, and which are rendered under the supervision of a licensed physician and surgeon pursuant to a practice agreement in accordance with Section 3502.3 of the Code.
- (b) The writing which delegates the medical services shall be known as a delegation of services agreement. A delegation of servicespractice agreement shall be signed and dated by the physician assistant and one or more physicians and surgeons or a physician and surgeon who is authorized to approve the practice agreement on behalf of the physicians and surgeons on the staff of an organized health care system in accordance with Section 3502.3(a)(2)(B). each supervising physician. A delegation of services agreement may be signed by more than one supervising physician only if the same medical services have been delegated by each supervising physician. A physician assistant may provide medical services pursuant to more than one delegation of services agreement.
- (c) The <u>bB</u>oard or <u>Medical Board of California or their its</u> representative may require proof or demonstration of competence from any physician assistant for any tasks, procedures, or management <u>he or she isthey are</u> performing.
- (d) 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. When a physician assistant determines or shall refer such cases to a physician. When a physician assistant and their own physician assistant assistant's level of competence, they shall either consult a supervising physician and surgeon, or refer the patient to a physician and surgeon or licensed healthcare provider competent to render the services needed for the task, procedure, or diagnosis.

NOTE: Authority cited: Sections 2018, 3502 and 3510, Business and Professions Code. Reference: Section 3502, 3502.3, 3509, 3516 and 3527, Business and Professions

Amend Section 1399.541 of Article 4 of Division 13.8 of Title 16 of the California Code of Regulations

§1399.541. Medical Services Performable.

Because physician assistant practice is directed by a supervising physician, and a physician assistant acts as an agent for that 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.

A physician assistant may, pursuant to Section 3502 of the Code, initiate an order or perform a task, which shall be considered the same as if the action had been ordered or performed by a supervising physician, without any prior patient-specific order of a supervising physician.

In any setting, including for example, any licensed health facility, out-patient settings, patients' residences, residential facilityies, and hospices, as applicable, a physician assistant may, pursuant to a delegation practice agreement and protocols where present:

- (a) Take a patient history; perform a physical examination and make an assessment and diagnosis therefrom; initiate, review and revise treatment and therapy plans including plans for those services described in Section 1399.541(b) through Section 1399.541(i) inclusive; and record and present pertinent data in a manner meaningful to the physician.
- (b) Order or transmit an order for x-ray, other studies, therapeutic diets, physical therapy, occupational therapy, respiratory therapy, and nursing services.
- (c) Order, transmit an order for, perform, or assist in the performance of laboratory procedures, screening procedures, and therapeutic procedures.
- (d) Recognize and evaluate situations which call for immediate attention of a physician and institute, when necessary, treatment procedures essential for the life of the patient.
- (e) Instruct and counsel patients regarding matters pertaining to their physical and mental health. Counseling may include topics such as medications, diets, social habits, family planning, normal growth and development, aging, and understanding of and long-term management of their diseases.
- (f) Initiate arrangements for admissions, complete forms and charts pertinent to the patient's medical record, and provide services to patients requiring continuing care, including patients at home.
- (g) Initiate and facilitate the referral of patients to the appropriate health facilities, agencies, and resources of the community.
- (h) Administer or provide medication to a patient, or issue or transmit drug orders orally or in writing in accordance with the provisions of subdivisions (a)-(f), inclusive, of Section 3502.1 of the Code.
- (i)(1) Performance of surgical procedures without the personal presence of the supervising physician. Perform surgical procedures without the personal presence of the supervising physician which are customarily performed under local anesthesia or procedural sedation.

Prior to a physician assistant performing delegating any such surgical procedures under local anesthesia, or sedation other than local anesthesia, including procedural sedation, or general anesthesia, the physician assistant shall ensure the supervising physician shall review the evidence documentation which indicates that the physician assistant is trained and qualified to perform the surgical procedures under such sedation. The physician

assistant shall ensure the supervising physician and surgeon has performed an assessment of whether the patient's physical status and fitness is appropriate to undergo the procedure. All other sSurgical procedures requiring other forms of procedural sedation of sedation other than local anesthesia, including general anesthesia may be performed by a physician assistant only when in the personal presence of a supervising physician is immediately available during the procedure.

- (2) A physician assistant may also act as first or second assistant in surgery under the supervision of a supervising physician. The physician assistant may so act without the personal presence of the supervising physician if the supervising physician is immediately available to the physician assistant. "Immediately available" means the physician is physically accessible and able to return to the patient, without any delay, upon the request of the physician assistant to address any situation requiring the supervising physician's services.
- (3) "Immediately available" when used in this section means a supervising physician is physically accessible and able to attend to the patient, without any delay, to address any situation requiring a supervising physician's services.
- (j) Obtain the necessary consent for recommended treatments and document the informed consent conversation and the patient's decision in the medical record.
- (k) Perform any other services authorized by the practice agreement for which the physician assistant is competent.

NOTE: Authority cited: Sections 2018, 3502 and 3510, Business and Professions Code. Reference: Sections 2058, 3501, 3502, and 3502.1, 3502.3 and 3509, Business and Professions Code.

Amend Section 1399.545 of Article 4 of Division 13.8 of Title 16 of the California Code of Regulations

§1399.545. Supervision Required.

- (a) A supervising physician shall be available to receive inquiries, in person, by telephone, or by other electronic communication at all times when the physician assistant is caringproviding medical services for patients.
- (b) A supervising physician shall delegate to a physician assistant only those tasks and procedures consistent with the supervising physician's specialty or usual and customary practice and with the patient's health and condition.
- (c) A supervising physician shall observe or review evidence of the physician assistant's performance of all tasks and procedures to be delegated to the physician assistant until assured of competency.
- (db) The physician assistant and the supervising physician practice agreement 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 training and comptency.

- (e) A physician assistant and his or her supervising physician 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 by a supervising physician the same day as care is given by the physician assistant;
- (2) Countersignature and dating of all medical records written by the physician assistant within thirty (30) days that the care was given by the physician assistant;
- (3) The supervising physician may adopt protocols to govern the performance of a physician assistant for some or all tasks. The minimum content for a protocol governing diagnosis and management as referred to in this section shall include the presence or absence of symptoms, signs, and other data necessary to establish a diagnosis or assessment, any appropriate tests or studies to order, drugs to recommend to the patient, and education to be given the patient. For protocols governing procedures, the protocol shall state the information to be given the patient, the nature of the consent to be obtained from the patient, the preparation and technique of the procedure, and the follow-up care. Protocols shall be developed by the physician, adopted from, or referenced to, texts or other sources. Protocols shall be signed and dated by the supervising physician and the physician assistant. The supervising physician shall review, countersign, and date a minimum of 5% sample of medical records of patients treated by the physician assistant functioning under these protocols within thirty (30) days. The 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;
- (4) Other mechanisms approved in advance by the board.
- (fc) 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 without supervision. The supervising physician shall be responsible for all medical services provided by a physician assistant under his or hertheir supervision.

NOTE: Authority cited: Sections 2018, 3502, 3502.3 and 3510, Business and Professions Code. Reference: Sections 3501, 3502, 3502.3 and 3516, Business and Professions Code.