

ADMINISTRATIVE POLICY AND PROCEDURE

Subject: PHYSICIAN ASSISTANTS (PAs)

Policy No.: A136

Supersedes: February 23, 2016

Review Date: April 9, 2024

Origin Date: October 25, 2006

Revision Date: April 9, 2024

PURPOSE:

To describe the scope of practice of physician assistants (PAs).

POLICY:

This policy describes the scope of practice and role of physician assistants (PAs). Physician assistants (PAs), working with, and under the supervision of physician members of the medical staff are an integral part of the Healthcare Team and serve key roles in providing direct medical care to patients, both for the inpatient and outpatient settings. It is important to understand the unique and essential role that physician assistants provide in meeting the mission of the hospital.

DEFINITIONS:

A physician assistant (PA) is an individual who is a graduate of a physician assistant program approved by the Accreditation Review Commission on Education for the Physician Assistant (ARCPA), or one of its predecessor agencies, and/or has been certified by the National Commission on Certification of Physician Assistants (NCCPA). The individual meets the necessary legal requirement for licensure to practice medicine with physician supervision and is licensed as such by the Medical Board of California, Physician Assistant Committee.

Physician assistants are members of the Healthcare Team who provide physician services under supervision of a physician. They exercise a high level of decision-making and autonomy in providing patient care, practicing as supervised members of physician-directed teams.

A supervising physician is a "physician" who is a member of the medical staff, possesses a current valid license to practice medicine, and is not subject to any disciplinary condition imposed by the Medical Board of California prohibiting that supervision of a PA and who agrees to oversee the activities of and accepts responsibility for the medical services rendered by a PA.

A Physician Supervisor is any physician and surgeon of the Practice, who meets the definition of a supervising physician in BPC §3501(e), may provide supervision of a PA in the Practice acting under a Practice Agreement. A supervising physician need not be physically present while the PA provides medical services but is available by telephone or other electronic means at the time the PA is providing medical services in the Practice. Supervision means that a physician and surgeon oversee and accepts responsibility for the activities of the PA.

PROCEDURE:

PA shall consult with, and/or refer the patient to, a supervising physician or other healthcare professional when providing medical services to a patient which exceeds the PA's competency, education, training, or experience.

Revised: 6/13, 2/16, 4/24

Reviewed: 6/13, 2/16, 4/24

Approved By:

Subject: PHYSICIAN ASSISTANTS (PAs)**Policy No.:** A136

In the unexpected event the PA is not able to reach the supervising physician in person or by electronic means; the PA will consult and transfer care of the patient to the appropriate physician in the following order 1) the physician on call for the department, 2) the physician on call for the hospital.

1. Credentialing:

PAs are credentialed by the Credentials Committee. A newly hired PA will apply for specific privileges under a PA Practice Agreement and may be given temporary privileges for a probationary period of 6 months. After 3 months, the supervising physician(s) will provide an interim review and at the conclusion of 6 months, the Credentialing Committee will review the PA's performance. Full privileges may be granted after 6 months and successful completion of a probationary period. Re-application and re-credentialing will occur every 2 years.

A PA must supply evidence of graduation from an accredited training program, current state licensure, current national certification, evidence of any past or pending professional liability or disciplinary actions, and letters of reference as requested. PAs are expected to maintain, at a minimum, current California licensure, NCCPA certification and BCLS certification.

2. Medical Services:

The PA is authorized to perform those medical services for which the PA has demonstrated competency through education, training or experience, under physician supervision. The PA is further authorized to:

- (a) perform the medical functions that the PA is competent to perform and the PA's education, training, and experience have prepared the PA to render;
- (b) supervise and or lead nursing, medical assistants and allied health members;
- (c) provide care and sign forms under the workers' compensation program;
- (d) provide any other services or activities authorized under California law.

A PA performing medical services under the supervision of a physician/surgeon may assist a doctor of podiatric medicine who is a partner, shareholder, or employee in the same medical group as the supervising physician and surgeon. A PA who assists a doctor of podiatric medicine shall do so only according to patient-specific orders from a supervising physician and surgeon.

A supervising physician/surgeon shall be available to the physician assistant for consultation when assistance is rendered. A PA assisting a doctor of podiatric medicine shall be limited to performing those duties included within the scope of practice of a doctor of podiatric medicine.

A supervising physician/surgeon shall be available to the PA for consultation when assistance is rendered.

In compliance with State and Federal prescribing laws, the PA may order and furnish those drugs and devices, including schedule II through V controlled substances, as indicated by the patient's condition, the applicable standard of care, and in accordance with the PA's education, training, experience, and competency, under physician supervision. The furnishing and ordering of schedule II drugs shall be only for those illnesses, injuries, and/or conditions for which the standard of care indicates the use of such schedule II drugs.

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

Subject: PHYSICIAN ASSISTANTS (PAs)**Policy No.:** A136

A PA may perform those medical services that are within the scope of practice of the PA training, credentialing, experience and consistent with care rendered on the service/unit.

3. Privileges:

Clinical privileges granted to a physician assistant will be in a manner that is consistent with current California state and federal laws and regulations, and that the PA is competent to perform and the PA's education, training, and experience have prepared the PA to render.

4. Supervision:

Supervision of a PA is provided by either the physical presence of a supervising physician or through electronic communication. Supervision means that a physician and surgeon oversee and accepts responsibility for the activities of the PA. The supervising physician will review, date and time, and co-sign, admission history and physical examinations and discharge summaries performed by the PA within 48 hours.

PAs under probation-Ambulatory/non-urgent care

For each new patient, an attending (staff) physician will discuss with the new PA the assessment and treatment plan and co-sign the PA's note within 24 hours, or the PA may follow a pre-established protocol which has been approved by the medical staff.

PAs under probation-Inpatient admissions

An attending (staff) physician will:

- document concurrence with discharge planning in the medical record prior to the patient's discharge, or the new PA will document that the attending concurs with the discharge.
- co-sign the new PA's admission note within 24 hours after admission.
- co-sign the new PA's daily progress note, or the new PA will include in their progress note that they have discussed the case with the attending, at least every 48 hours (every 72 hours on psychiatric or rehabilitation units).

The supervising physician will review, date and time, and co-sign a minimum five percent (5%) of all non-order medical record entries by the new PA under his/her supervision within seven days of the treatment by the new PA.

PAs who have passed probation-Inpatient admissions

No chart co-signature is required.

PAs who have passed probation-Ambulatory/non-urgent care

No chart co-signature is required.

5. Continuing Education:

PAs are expected to participate in continuing education activities on a regular and ongoing basis as per state license and NCCPA requirements. Attendance at hospital sponsored grand rounds, journal clubs, and other activities that relate to the PA's regular practice is highly encouraged.

6. Quality Assurance:

The supervising physician(s) shall be responsible for regular monitoring and evaluation of the PA. Peer review will include regularly scheduled chart review. Patient consumers will be notified that PAs are licensed and regulated by the Physician Assistant Board.

Subject: PHYSICIAN ASSISTANTS (PAs)

Policy No.: A136

7. Emergency Care:

Upon activation of the hospital's emergency management plan, a PA is permitted to render emergency care and to do everything possible to save the life of a patient, utilizing all resources of the hospital as necessary. Any PA acting in an emergency or disaster situation shall be exempt from the hospital's usual requirement of physician supervision to the extent allowed by state law in such situations.

REFERENCES:

Business and Professions Code, Division 2, Chapter 7.7, Sections 3500-3503.5 (Physician Assistant Practice Act)

California Code of Regulations, Title 16, Division 13.8, Physician Assistant Regulations