Georgia Composite Medical Board

TO ALL INTERESTED PARTIES:

Notice is hereby given that pursuant to the authority set forth below, the Georgia Composite Medical Board (hereinafter “Board”) proposes amendments to the Georgia Composite Medical Board Rules by amending Rule 360-3-.05 “Medical Assistants, Polysomnography Technologists, and Radiology Technologists.” An exact copy of the proposed rule is attached to this Notice.

This notice, together with an exact copy of the proposed rules and a synopsis of the proposed amendments may be reviewed between 8:00 a.m. and 4:00 p.m., Monday through Friday, except official state holidays, at 2 Peachtree Street, NW, 6th Floor, Atlanta, GA 30303. These documents can also be reviewed online at http://medicalboard.georgia.gov/notice-intent-amendadopt-rules.

A public hearing is scheduled to begin at 8:30 a.m. on August 4, 2022, via TEAMS to provide the public an opportunity to comment upon and provide input into the proposed rules. At the public hearing, any interested person may present data, make a statement or comment, or offer a viewpoint or argument orally or in writing. Lengthy statements and statements of a considerable technical or economic nature, as well as previously recorded messages, must be submitted for the official record. Oral statements should be concise and will be limited to five minutes per person. Additional comments should be presented in writing. To ensure their consideration, submit all written comments by July 15, 2022 to Kierra.Battle@dch.ga.gov or via mail to the Georgia Composite Medical Board Rules Committee at 2 Peachtree Street, NW, 6th Floor, Atlanta, Georgia 30303.

The Board voted to adopt this Notice of Intent on June 2, 2022. Upon conclusion of the public hearing on August 4, 2022, the Board will consider whether the formulation and adoption of these proposed rule amendments imposes excessive regulatory costs on any license or entity, and whether any cost to comply with the proposed rule amendments could be reduced by a less expensive alternative that accomplishes the objectives of the statutes which are the basis of the proposed rule. Additionally, the Board will consider whether it is legal or feasible in meeting the objectives of the applicable laws to adopt or implement differing actions for businesses as listed in O.C.G.A. § 50-13-4(3)(A),(B),(C), and (D).

This Notice is adopted and posted in compliance with O.C.G.A. § 50-13-4 of the Georgia Administrative Procedures Act. A synopsis of the proposed rules and an economic impact statement are attached to this Notice. The authority for promulgation of these rules is O.C.G.A. Secs. 43-34-5, 43-34-103, and 43-34-108.

Issued this day June 2, 2022.

Daniel R. Dorsey
Executive Director

An Equal Opportunity Employer
ECONOMIC IMPACT AND SYNOPSIS FOR
RULE CHAPTER 360-3
Investigations and Discipline

ECONOMIC IMPACT:

The attached rules are promulgated under the authority of the Medical Practice Act, Title 43, Chapter 34. The Georgia Composite Medical Board licenses and regulates nine professions. The formulation and adoption of these rules do not impose excessive regulatory cost on any licensee, and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative that fully accomplishes the objectives of Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated. Additionally, it is not legal or feasible to meet the objectives of the Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated to adopt or implement differing actions for businesses listed in O.C.G.A. §50-13-4(a)(3)(A), (B), (C) and (D).

RULE SYNOPSIS:

Rule 360-3-.05 “Medical Assistants, Polysomnography Technologists, and Radiology Technologists.”

Purpose/Main Features: The purpose of the proposed amendment is to change language in the rule allowing for physicians who do not employ medical assistants but do supervise them in a practice setting.

Authority O.C.G.A. § 43-34-44
Rule 360-3-.05. Medical Assistants, Polysomnography Technologists, and Radiology Technologists

(1) It shall be grounds for disciplinary action by the Board if a physician aids or abets another person in misrepresenting his/her credentials or engaging in unlicensed practice. Engaging in unlicensed practice includes delegation by a physician of professional responsibilities to a person who is not authorized to provide such services. A physician may delegate the performance of certain medical tasks to an unlicensed person with appropriate supervision as provided herein.

(a) Medical Assistants

1. For purposes of this rule, a medical assistant is an unlicensed person employed supervised by the physician to whom he or she delegates certain medical tasks.

   (i) A physician may delegate to a medical assistant the following medical tasks: subcutaneous and intramuscular injections; obtaining vital signs; administering nebulizer treatments; or removing sutures and changing dressings.

   (ii) Physicians or physician assistants under basic job description and/or advanced practice nurses under protocol must be on-site for a medical assistant to administer subcutaneous and intramuscular injections, to administer nebulizer treatments, and to remove sutures and change dressings. It is not required for a physician to be on-site for a medical assistant to obtain vital signs.

   (iii) Physician shall only allow medical assistants to provide services for which they have been properly trained. Physicians shall maintain accurate and complete records of professional services rendered.

   (iv) Nothing in this rule prohibits the performance of tasks by medical assistants that would not otherwise require a license.

(b) Polysomnography

1. Definitions

   (i) "Polysomnography" means the treatment, management, diagnostic testing, control, education, and care of patients with sleep and wake disorders. Polysomnography includes, but is not limited to, the process of analysis, monitoring, and recording of physiologic data during sleep and wakefulness to assist in the treatment of disorders, syndromes, and dysfunctions that are sleep related, manifest during sleep, or disrupt normal sleep activities. Polysomnography also includes, but is not limited to, the therapeutic and diagnostic use of low-flow oxygen, the use of positive airway pressure including continuous positive airway pressure (CPAP) and bi-level modalities, adaptive servo-ventilation, and maintenance of nasal and oral airways that do not extend into the trachea.

   (ii) "Polysomnographic technologist" means any person performing polysomnography services under the supervision of a physician licensed under this article without the requirement that the technologist is licensed.
(iii) "Supervision" means that the supervising physician licensed under this article shall remain available, either in person or through telephonic or electronic means, at the time that polysomnography services are provided.

2. Delegation of Duties

(i) Physicians may delegate to a polysomnography technologist to perform tasks to treat, manage, control, educate, or care for patients with sleep or wake disorders or to provide diagnostic testing for patients with suspected sleep or wake disorders.

(ii) However, the physician may not delegate tasks that constitute the practice of medicine.

(c) Radiologist Assistant

1. Radiologist Assistant means an advanced level certified diagnostic radiologic technologist who assists radiologists under levels of supervision in performing advanced diagnostic imaging procedures including, but not limited to, enteral and parenteral procedures when performed under the direction of the supervising radiologist and may include injecting diagnostic agents to sites other than intravenous, performing diagnostic aspirations and localizations, and assisting radiologists with other invasive procedures.

   (i) Supervision

      (I) Radiology assistants shall be supervised by a physician licensed under O.C.G.A. 43-34 who has experience in performing advanced diagnostic imaging procedures.

   I. Exemptions or Limitations

2. This Code section is for definitional purposes only and shall not be construed to require any duties or obligations regarding radiology assistants that did not already exist as of June 30, 2009.

Authority: O.C.G.A. Secs. 43-34-12, 43-34-44, 43-34-45.