

# **RULES**

**Physician Assistant**

**Chapter 360-5**

## **GEORGIA COMPOSITE MEDICAL BOARD**

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**360-5-.01 Purpose.**

The purpose of this Chapter is to implement the “Physician Assistant Act” of 2009, authorizing the Board to adopt rules and perform all acts necessary, proper or incidental to the efficient development of the category of health care as established therein.

**360-5-.02 Qualifications for Physician Assistant Licensure**

(1) An applicant for licensure as a physician assistant must show to the satisfaction of the Board the following:

(a) Good moral character as demonstrated by two (2) acceptable references from licensed physicians, who are personally acquainted with the applicant. These may not be completed by the physician(s) applying for utilization of the physician assistant.

(b) Evidence of satisfactory completion of a training program approved by the Board. The Board has approved or will approve those physician assistant programs of training offered by accredited colleges or universities, whose graduates are eligible for the examination administered by either the NCCPA or NCCAA or their successors, and whose curriculum consists of two or more academic years, including clinical experience in health care appropriate to the task of a physician assistant.

(c) Evidence that the applicant has achieved a passing score on either:

1. The certification examination administered by the National Commission for Certification of Anesthesiologist Assistants (NCCAA) or its successor, or
2. The certification examination administered by the National Commission on Certification of Physician Assistants (NCCPA) or its successor.

(2) Applications for initial licensure or licensure thereafter as a physician assistant shall be made upon forms supplied by the Board.

(3) The forms must be completed and submitted by the physician assistant along with a recent notarized photograph of the applicant and an application fee. No fee is required if the applicant is an employee of the state or county government.

(4) Applications submitted to the Board must be completed in every detail, unless the response called for is not applicable to the applicant, and, if so, the response shall be made in that manner with accompanying explanation.

(5) All applications for licensure as a physician assistant must be completed and on file with the Board at least (5) days prior to its meeting, in order to be considered by the Physician Assistant Advisory Committee and the Board at the next meeting

(6) A completed application for licensure may be denied for any of the reasons set forth in O.C.G.A. Section 43-34-8.

(7) The physician assistant must certify that he or she has received, read, and is familiar with the Medical Practice Act, Physician Assistant Act and Board rules and regulations by signing the statement on the application.

(8) Upon receipt of all required documents, the board shall provide notification of approval or disapproval of the physician assistant application for licensure.

(9) An applicant must complete all requirements for licensure within one year from the date the Board receives the application. Otherwise, the applicant must submit a new application with the required fee. This one year requirement does not include references, which are valid for only six months.

(10) Temporary Practice Permits. The Board may issue a temporary permit to any applicant who has otherwise met the requirements for Board licensure and who has either applied to take the next available examination or has already taken the examination and is awaiting the results thereof, with the following conditions:

a. The applicant must request this permit in writing.

b. Unless otherwise approved by the Board for extenuating circumstances, the permit shall be valid for a maximum period of ninety (90) days, but shall expire immediately upon notification of the applicant's failure to achieve a satisfactory score on the approved certification examination required in 360-5-.02(1)(c).

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-104 and 43-34-108.

### **360-5-.03 Application for Physician Utilization of a Physician Assistant**

(1) In order to obtain approval to supervise a physician assistant, the physician who will be responsible for the performance of the Physician Assistant shall submit an application to the Board. The application shall be made upon forms supplied by the Board and must be approved by the Board before the supervising physician(s) may delegate health care tasks to the physician assistant.

(a) The board shall have the authority to approve or deny any primary or alternate supervising physicians.

(2) The supervising physician(s) must certify that he/she has received, read, and is familiar with the Medical Practice Act, Physician Assistant Act and Board rules and regulations by signing the statement on the application.

(3) The application must include:

(a) The name of the primary supervising physician.

(b) Alternate supervising physicians, as designated by the primary supervising physician, if applicable.

1. Unlimited alternate supervising physicians may be added to the approved list by submission of the appropriate form signed by the primary supervising physician, and each alternate to the Board.

(2) An alternate supervising physician may not assume the primary supervising physician's role but must submit the appropriate form to the Board and receive its approval before delegating medical tasks to the physician assistant. Failure to notify the Board immediately may result in disciplinary action against the physician assistant and/or the physician(s). Failure to renew the license because of expiration will not be considered an exception to the requirements of this paragraph.

(c) The name and location of the medical school from which the primary supervising physician was graduated and the date the degree was received.

(d) The type of practice in which the physician assistant is to provide services;

(e) A Georgia business address for the practice;

(f) A current Georgia medical license number.

(g) Evidence that the physician assistant is licensed in Georgia;

(h) A fee as required by the Board. No fee will be required if the physician assistant will be providing medical services as an employee of the state or of a county government; and

(i) A job description meeting the requirements of law and rules.

(4) Applications submitted to the Board must be completed in every detail. In order for the Board to complete disposition of the application, the Board, at its discretion, may request additional information which shall be submitted in writing by the applicant.

(5) At the option of the Board, the physician assistant and the applying supervising physician(s) may be required to appear before the Board for a personal interview. If the physician assistant has been out of practice for more than two years, the Board, at its discretion, may require refresher training, continuing education, periodic reports from primary supervising physicians, demonstration of more intense physician supervision, or any other means deemed necessary by the Board to protect the health and safety of the citizens of Georgia.

(6) The primary supervising physician shall at all times maintain on file, readily available for inspection, documentation from the Board evidencing current approval for supervision of the physician assistant, current license status of both parties, and a copy of the applicable approved job description.

(7) After receipt of required documents, the board shall provide notification of approval or disapproval of the physician's application for utilization of a Physician Assistant.

(8) All applications for Board approval must be completed and on file with the Board at least fifteen (15) days prior to the meeting, in order to be considered by the Physician Assistant Advisory Committee and the Board at the next meeting.

(9) Upon termination of a physician/physician assistant relationship, the physician assistant and supervising physician are required to give notice and date of termination to the board by certified mail or appropriate verifiable method, and in order to continue practicing, the physician assistant must submit an application to the Board for a new supervising physician.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-104 and 43-34-108.

### **360-5-.04 General Job Description**

(1) The job description is a document signed and dated by both the primary supervising physician and the physician assistant whom the physician is seeking to utilize or already has approval to utilize.

(a) The job description shall include a description of the medical acts to be performed by the physician assistant. For physician assistants who do not practice as an anesthesiology assistant, attachment of the Job Description provided by the Board shall be deemed adequate compliance with this requirement. However, if the physician assistant is performing an act not covered in the Job Description, then a submission of these additional acts is necessary and express approval by the Board is required. The Job Description does not include the delivery of general, spinal or epidural anesthesia and a physician assistant performing these acts would require additional training and express Board approval.

(b) A job description shall not be required to contain every activity the physician deems the physician assistant qualified to perform, but shall confine the activities of the physician assistant to those in the scope of practice of the primary supervising physician.

(2) Physician assistants who have completed a board approved Anesthesiologist Assistant program and will be practicing under the supervision of an anesthesiologist shall complete the job description for the Physician Anesthesiologist Assistant. All other physician assistants shall complete the General Job Description.

(3) The job description shall contain a provision for immediate consultation between the physician assistant and primary or alternate supervising physician. "Immediate consultation" means that the supervising physician shall be available for direct communication or by telephone or other means of telecommunication.

(4) In the case of an anesthesiologist assistant delivering general and/or regional anesthesia, the primary or alternate supervising physician must be immediately available in person.

(5) A physician assistant may only perform those tasks which are included in his/her job description currently on file with and approved by the Board; provided, however, that tasks outside the job description may be performed by the physician assistant under the direct supervision and in the presence of the physician(s) utilizing him.

(6) A primary supervising physician may at any time submit a new or amended physician assistant job description to the Board. .

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-104, 43-34-105, and 43-34-108.

### **360-5-.05. Limitations on Physician Assistant Practice**

(1) No person shall practice as a physician assistant without a license or temporary permit from the Board, Board approval of a supervising physician, and Board approval of his/her job description.

(2) A physician employed by the Department of Community Health, an institution thereof or by a local health department, whose duties are administrative and who does not normally provide health care to patients shall not be authorized to supervise a physician assistant who is employed by these entities.

(3) A physician may not be an employee of the physician assistant who he/she is required to supervise unless the arrangement was approved by the Board prior to July 1, 2009.

(4) A physician may serve as primary supervising physician to only four physician assistants. A physician may be an alternate supervising physician for any number of physician assistants.

(5) A physician may not supervise more than two physician assistants at any one time except:

(a) When practicing as a member of a group practice in which other physicians of such group are primary supervising physicians .In these circumstances, a physician may supervise up to four physician assistants at any one time, or

(b) When acting as an alternate supervising physician, a physician may supervise as many as four physician assistants, who are working within the scope of practice of the alternate supervisor.

1. in an institutional setting, such as a hospital or clinic.

2. While on call for a primary supervising physician or a group practice

3. When otherwise approved by the board to act as an alternate supervising physician.

(6) A physician assistant may not perform an abortion or administer, prescribe or issue a drug order that is intended to cause an abortion to occur pharmacologically.

(7) A physician assistant may not be utilized to perform the duties of a pharmacist licensed under Title 26, Chapter 4 of the Official Code of Georgia Annotated, relating to pharmacists, as now or hereafter amended.

(8) A physician assistant may not issue a written prescription for a Schedule II controlled substance. Provided, however, this does not preclude:

(a) This does not preclude a physician assistant from preparing such a prescription for administration of a Schedule II controlled substance for signature by the primary or alternate supervising physician on the date that the prescription is issued to the patient. Such prescriptions may not be pre-signed nor

(b) A physician assistant from issuing a written or verbal order for a Schedule II controlled substance within a health care setting. The supervising or an alternate supervising physician must co-sign such orders in compliance with any provisions required by the location where the physician assistant is practicing.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-23, 43-34-102, 43-34-103, 43-34-104, 43-34-108, 43-34-109, and 43-34-110.

### **360-5-.06 Renewal of Physician Assistant License.**

(1) All physician assistant licenses must be renewed biennially on the last day of the month in which the licensee's birthday falls. In order to renew, the licensee must:

(a) Complete the renewal application;

(b) Complete the Board approved continuing education requirements;

(c) If intending to continue active practice have a Board approved primary supervising physician and approved job description, or if seeking an inactive license, meet the applicable requirements of 360-5-.08 ; and

(d) Pay a renewal fee.

(2) Approximately 60 days prior to the expiration date, the Board may as a courtesy, mail a notice for license renewal to the last address on file in the Board's records to every person holding a current license. Failure to receive such notification shall not relieve the licensee of the obligation to renew and pay the required fee prior to the expiration date of the license. Deposit of the renewal fee by the Board does not indicate acceptance of the renewal application or that any licensing requirements have been fulfilled.

(3) Failure to renew a license by the designated expiration date shall result in a penalty fee for late renewal as determined by the Board.

(4) Failure to obtain the continuing education required for renewal may result in the denial of the application for renewal, or renewal of the license under a consent order with a fine, public or private reprimand and the requirement of additional continuing education.

(5) Licenses expired for three months or less may be late renewed by meeting all the requirements for renewal and paying a late renewal fee.

(6) Licenses that have been expired for longer than 3 months shall be deemed administratively revoked for failure to renew. Such licensees must apply for reinstatement of the license.

(7) Reinstatement of License

(a) In order to reinstate a license to practice as a physician assistant, the Board must receive:

1. a completed application;
2. A reinstatement fee as required by the Board.

(b) Reinstatement of a license to practice as a physician assistant is within the discretion of the Board. The physician assistant must be able to demonstrate to the Board's satisfaction that:

1. He or she has maintained current knowledge, skill and proficiency in the health care area related to the job description as required by O.C.G.A. § 43-34-103; and
2. He or she is mentally and physically able to practice with reasonable skill and safety.

(8) A physician assistant whose license has expired may neither practice nor represent himself as a physician assistant until such time that the Board has approved his application for renewal or reinstatement.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-11, 43-34-102, 43-34-103, 43-34-107, 43-34-108

### **360-5-.07 Continuing Education Requirements.**

(1) Physician assistants licensed to practice pursuant to O.C.G.A. 43-34-103 shall complete Board approved continuing medical education of not less than forty (40) hours biennially. Effective with the 2009-2010 biennium, at least ten (10) hours shall be directly related to the specialty of the Board approved primary supervising physician. Physician assistants who are authorized to issue prescription drug orders shall be required as a part of the number of hours of continuing education required herein, to complete a minimum of three (3) hours in practice specific pharmaceuticals in which the physician assistant has prescription order privileges.

(a) Physician assistants who are initially licensed by the Board and who have not renewed their license for the first time shall not be required to complete the 40 hours of continuing education during their first renewal, but physician assistants who have authority to issue prescriptive drug orders shall be required to complete the 3 hours of continuing education in practice specific pharmaceuticals in which the physician assistant has prescription order privileges.

(b) Physician assistants whose licenses are not active, such as those who are inactive or revoked are not required to complete the continuing education until such time as they are seeking reactivation or reinstatement.

(c) Except for the three hours of continuing education relating to pharmaceuticals, the Board is authorized to waive the continuing education required for renewal in cases of hardship, disability, illness, service in the United States Congress or Georgia General Assembly, military service or other circumstances as the Board deems appropriate if supported by adequate documentation acceptable to the Board.

1. Physician assistants seeking such an exemption must submit a written request and documentation to support their eligibility for such an exemption.

2. Said request for an exemption shall be submitted to the Board not less than 60 days prior to the expiration of the license to receive a determination from the Board as to whether an exemption would be granted.

(2) The Board accepts the A.M.A. (American Medical Association) Category 1, the A.O.A. (American Osteopathic Association) Category 1, A.A.A.A. (American Academy of Anesthesiologist's Assistants) Category 1, AAFP (American Academy of Family Physicians) Category I, and the A.A.P.A. (American Academy of Physician Assistants) Category 1 credit as meeting its requirement for Board approval. It is the responsibility of the physician assistant to verify approval with the source of the program, not with the Board, and the physician assistant shall verify approval before taking the course.

(3) Each licensed physician assistant must maintain records of attendance and supporting documents for continuing education for a period of 5 years from the date of attendance. At a minimum, the following must be kept:

(a) Name of Provider;

(b) Date of completion;

(c) Evidence of A.M.A. Category 1 credit; A.O.A. Category 1 credit; A.A.P.A, AAFP, Category 1 credit; or A.A.A.A. Category 1 credit.

(4) The Board will audit a fixed percentage of randomly selected renewal applications to monitor compliance with the continuing education requirements. Any licensee so audited shall be required to furnish documentation of compliance as provided in paragraph (4) of this rule. Any licensee so audited who has been found to be out of compliance with the Board's continuing requirements may be subject to disciplinary action.

(5) If the licensee has not complied with the continuing education requirement by the expiration of the license, his/her license shall not be renewed and the licensee shall not practice as a physician assistant. A licensee may late renew during the three (3) months following the expiration date of his or her license by presenting satisfactory evidence to the Board of completion of the requisite number of hours of Board approved continuing education and the late renewal fee. Licenses that are not renewed within three (3) months following the expiration date of the license shall be revoked for failure to renew. In order to obtain a valid license after revocation for failure to renew, an applicant must apply for reinstatement.

(6) Continuing education hours that are used to satisfy a deficiency for the previous biennial renewal may not be used for purposes of renewal for the next biennium.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-11, 43-34-102, 43-34-103, 43-34-107, 43-34-108

### **360-5-.08 Inactive Status.**

(1) A person who wishes to maintain his or her physician assistant license, but who does not intend to practice as a physician assistant may apply to the Board for inactive status by submitting an application and the fee as determined by the Board. An individual with an inactive license may not practice as a physician assistant in this State.

(2) In order to reactivate a license to practice as a physician assistant, the Board must receive a completed application from the licensee with evidence of 40 hours of continuing education obtained within the previous two years, and a reactivation fee. The physician assistant must be able to demonstrate to the satisfaction of the Board that he or she has maintained current knowledge, skill and proficiency in the medical arts as required by O.C.G.A. § 43-34-103 and that he or she is mentally and physically able to practice with reasonable skill and safety.

(a) Provided however prior to performing medical tasks, the licensee must demonstrate to the satisfaction of the Board that the completed continuing education required in the above paragraph is pertinent to the job description under which he/she will practice, as required in Continuing Education Requirements 360-05-.07.

(3) Once the license has been reactivated, the physician assistant may not practice until he/she has on file a completed job description with a primary supervising physician as provided in Rules 360-5-.03 and 360-5-.04. In addition, the physician assistant must demonstrate to the satisfaction of the Board that he/she has sufficient recent continuing education or training pertinent to the job description under which he/she will practice.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-11, 43-34-102, 43-34-103, 43-34-107, 43-34-108

### **360-5-.09 Temporary Practice Agreements**

#### **(1) Definitions**

(a) “Good standing” shall mean that the person has no disciplinary action taken against him or her by any state within the previous seven (7) years and has not let his/her license in any state expire or become inactive during an investigation by a state medical board into allegations relating to his/her practice as a physician assistant or during a pending disciplinary action.

(b) “Georgia Board – Approved Supervisory Arrangement” means when a supervising physician and a physician assistant are working under a basic job description previously submitted to and approved by the Board.

**(2) Temporary Practice Agreement.** A physician and a physician's assistant may enter into a temporary practice agreement where the physician supervises the services provided by the physician assistant to patients at a specific facility or program operated by an organization exempt from federal taxes pursuant to Section 501(c)(3) of the Federal Internal Revenue Code, provided that:

- (a) Such services are provided in the State of Georgia;
- (b) Such services are provided primarily to financially disadvantaged patients;
- (c) Such services are free or at a charge to the patient based solely on the patient's ability to pay and provided, further, that such charges do not exceed the actual cost to the facility or program; and
- (d) Both supervising physician and the physician assistant voluntarily and gratuitously donate their services;

**(3) Requirements for the Temporary Practice Agreement.**

- (a) The temporary practice agreement must be for a specified period of time;
- (b) The physician assistant services must be within the usual scope of practice of the supervising physician;
- (c) The physician assistant and the supervising physician must be in good standing with the Board;
- (d) The temporary practice agreement must be signed by both the supervising physician and the physician assistant;
- (e) Prior to providing any patient services a copy of the signed temporary practice agreement must be on file at the facility or program and a copy of the agreement must have been sent to the Board; and
- (f) The facility or program must notify the Board of its intent to provide patient services and utilize licensed physicians and physician assistants under the conditions set out in this subsection.

**(4) Limitations.** This rule does not apply to physicians and physician assistants who are in a Georgia board-approved supervisory arrangement nor preclude physician assistants from practicing under the Georgia Volunteers in Health Care Specialties Act as delineated in OCGA Section 43-1-28.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-107, 43-34-108

### **360-5-.10 Emergencies**

In a state of an emergency or a public health emergency, a physician assistant may provide medical care with such supervision as is available at the immediate or local scene where a need

for medical care exists or at a relief site established as part of a state or local safety plan pursuant to Chapter 3 of Title 38. Provided:

(a) The physician assistant must hold a license, certification or authorization in good standing from any state or federal jurisdiction.

(b) Services shall be provided in response to an appropriate state or local official who is implementing a state or local emergency management plan or program.

(c) The authority to practice under such guidelines shall not last longer than 48 hours, unless the Board establishes further supervision guidelines for physician assistants providing care under these circumstances.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-107, 43-34-108

### **360-5-.11 Standards for Physician Assistant Practice**

(1) A licensed physician assistant is authorized to practice in those public or private places or facilities where the primary or alternate supervising physician regularly sees patients.

(2) The physician assistant is not required to be in the presence of the physician to provide medical services, including the evaluation and treatment of new or established patients.

(3) A physician assistant may make house calls, nursing home visits, perform hospital duties, serve as an ambulance attendant or perform other functions he is qualified to perform.

(4) The physician assistant may issue a prescription drug order, and/or order and initiate medical treatment or diagnostic studies in any health care setting, as authorized by his or her supervising physician.

(5) Any physician, clinic or hospital utilizing physician assistants must post a notice to that effect in a prominent place.

(6) A physician who has been approved for supervision of a physician assistant is responsible for medical acts performed by that physician assistant.

(7) A physician assistant may pronounce death and certify such pronouncement in the same manner as a physician if he is delegated this authority by his supervising physician.

Authority: O.C.G.A. Sections 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-105, 43-34-106, and 43-34-108

### **360-5-.12. Guidelines concerning Prescriptive Authority**

(1) If authorized by his/her job description, a physician assistant may issue a prescription drug order for any medical device as defined by Code Section 26-4-5, any dangerous drug as defined

in Code Section 16-13-71 or any Schedule III, IV, or V controlled substance as defined in Code Section 16-13-21.

(2) Any physician assistant who has been authorized to issue a prescription drug order for controlled substances must register with the federal Drug Enforcement Administration (“DEA”).

(3) A prescription drug or device order form issued by an authorized physician assistant shall, at a minimum, contain the name, address and telephone number of the primary or alternate supervising physician, the patient’s name and address, the drug or device ordered, the directions to the patient for taking the medication, the dosage, the number of refills allowed, the name and DEA number (if applicable) of the physician assistant, and the signature of the physician assistant.

(4) The prescription drug order may be transmitted orally, by telephone, on paper, electronically or via facsimile. Any electronic prescription drug order must comply with the provision of O.C.G.A. Title 16, Chapter 13 and Title 26, Chapter 4. A record of the prescription must be maintained in the patient’s medical record.

(5) A physician assistant may authorize refills of any drug or device for up to 12 months from the date of the original prescription unless otherwise provided by law.

(6) The physician assistant or office staff shall notify the patient that he has the right to see the physician prior to receiving a prescription drug or device order. Prominent signage in the office may serve this purpose.

(7) The primary or alternate supervising physician shall evaluate or examine patients receiving controlled substances at least every three months.

(8) Except in facilities operated by the Division of Public Health of the Department of Community Health, the primary or alternate supervising physician shall review the physician assistant’s prescription drug or device orders and corresponding medical record entries within 30 days. This review may be achieved with a sampling of no less than 50 percent of the prescription drug or device orders and/or corresponding medical record entries.

(9) If authorized by the job description, a physician assistant may request, receive, sign for and distribute professional samples. Professional samples means complimentary doses of a drug, medication vouchers or medical devices provided by the manufacturer for use in patient care. If the professional samples are controlled substances, the physician assistant must also be registered with the federal Drug Enforcement Administration.

(a) The office where the physician assistant practices must maintain a list of all professional samples that the supervising physician has approved the physician assistant to request, receive, sign for and distribute.

(b) A complete list of the specific drug or device, and the number and dosage of each professional sample received and dispensed must be maintained.

Authority: O.C.G.A. Sections 16-13-41, 16-13-74, 26-4-80, 43-34-5, 43-34-8, 43-34-23, 43-34-102, 43-34-103, 43-34-107, 43-34-108

### **360-5-.13 Disciplinary Action/Revocation.**

(1) When the Board finds that any person is unqualified to be granted a license or to have a license renewed, the Board may refuse to grant the license.

(2) The Board may impose on a physician assistant any disciplinary action authorized by O.C.G.A. Sections 43-34-8, 43-34-103, 43-34-107, and O.C.G.A. Section 16-13-111, or otherwise authorized by law for any of the reasons set forth by law. In addition, the Board may terminate the approval of a physician's utilization of a physician assistant provided in O.C.G.A. Section 3-34-107.

(3) In addition, the following may be considered by the Board as unprofessional conduct of the physician assistant:

(a) Performing duties on a routine basis by the physician assistant, without appropriate supervision by a physician approved by the Board;

(b) Routinely performing duties that are not within the scope of practice of the supervising physician.

(c) Issuing pre-signed prescriptions or prescriptions signed in blank or using pre-signed prescriptions;

(d) Signing a physician's signature on a prescription form by a physician assistant;

(e) Failing to notify the Board within 30 days of becoming unable to perform duties or provide patient services with reasonable skill and safety by reason of illness or the use of alcohol, drugs, narcotics, chemicals or any other type of material;

(f) Holding himself or herself out or permitting another to represent him or her as a licensed physician;

(g) Being convicted in any court, state or federal, of any felony or other criminal offense involving moral turpitude;

(h) Failing to notify the Board of the termination of a physician/physician assistant relationship;

(i) Failing to maintain appropriate patient records; or

(j) Failing to maintain any of the following:

1. a list of professional samples approved by the supervising physician for request, receipt and distribution by the physician assistant; or

2. a current and complete list of the specific number and dosage of each professional sample received and dispensed by the physician assistant.

Authority: O.C.G.A. Sections 16-13-111, 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-105, 43-34-107, 43-34-108