

## **VOLUNTEER TEMPORARY PRACTICE AGREEMENT FORM**

THE FOLLOWING FORM IS REQUIRED WHEN APPLYING FOR TEMPORARY PRACTICE AGREEMENT AS A PHYSICIAN ASSISTANT (INCLUDING ANESTHESIA ASSISTANT) IN THE STATE OF GEORGIA.

This application is intended for Utilization of a Physician Assistant in Clinics for Financially Disadvantaged Patients

Clinics/organizations serving financially disadvantaged patients must separately notify the Board of their intent to utilize physician assistants as volunteers.

1. Physician assistants may only work within the scope of practice of the physician supervising them at that clinic.
2. A physician may not exceed the number of physician assistants he is legally allowed to supervise.
3. Temporary practice agreements are valid:
  - a. For a maximum period of two years;
  - b. Only while the supervising physician and physician assistant have current Georgia licenses, in good standing.
4. If the organization has more than one site, a separate application must be filed for each clinic site.





