

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 must have the following relationships with the primary supervising physician:

(i) a similar scope of practice and:

(ii) an affiliation with the primary supervisory physician's medical practice; or

(iii) An established formal call agreement.

(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 should 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.

a. 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.

Authority O.C.G.A. Secs. 43-1-25, 43-34-5, 43-34-8, 43-34-24, 43-34-102, 43-34-103, 43-34-104, 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 do not normally include providing 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) 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.

(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.

(9) A physician assistant does not have the authority to sign death certificates or assign a percentage of a disability rating.

Authority O.C.G.A. Secs. 43-1-19, 43-1-25, 43-34-5, 43-34-8, 43-34-23, 43-34-102, 43-34-103, 43-34-104, 43-34-108, 43-34-109, 43-34-110, 43-39-5.

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; however, he or she does not have authority to sign a death certificate.
- (8) Except for assignment of a percentage of disability, a physician assistant may sign, certify and endorse all documents relating to health care provided to a patient within his or her scope of authorized practice. This includes, but is not limited to:
 - (a) Documents relating to physical examination forms of all state agencies;
 - (b) Verification and evaluation forms of the Department of Human Services, the State Board of Education, local boards of education, the Department of Community Health, and the Department of Corrections.
- (9) When a patient receives medical services from a physician assistant, the supervising physician's involvement in the patient's care, including patient evaluation and follow-up care by the supervising physician, shall be appropriate to the nature of the practice and the acuity of the patient's medical issue, as determined by the supervising physician.

Authority O.C.G.A. Secs. 43-34-3, 43-34-5, 43-34-8, 43-34-102, 43-34-103, 43-34-105, 43-34-106, 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. Scheduled III, IV or V controlled substances may not be refilled more than six months from date of original prescription.

(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 general list of all professional samples that the supervising physician has approved the physician assistant to request, receive, sign for and distribute. Such samples must be consistent with the specialty of the supervising physician.

(b) A complete list of the specific drugs or devices provided to a patient by a physician assistant must be noted in the patient's medical record.

Authority O.C.G.A. Secs. 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 document professional samples that are distributed to a patient in the patient's medical record.

Authority O.C.G.A. 43-34-23