Second Draft of Proposed Amendments to Section 1399.541 of Title 16 of the California Code of Regulations

LEGEND: Single Underline is the Text Previously Considered by the Physician Assistant Subcommittee. Double Underline is the Text Proposed to Address the Issues Raised by the Subcommittee at Its November 10, 2011 meeting.

Section 1399.541 is amended to read:

Because physician assistant practice is directed by a supervising physician, and a physician assistant acts as an agent for that physician, the orders given and tasks performed by a physician assistant shall be considered the same as if they had been given and performed by the supervising physician. Unless otherwise specified in these regulations or in the delegation or protocols, these orders may be initiated without the prior patient specific order of the supervising physician. In any setting, including for example, any licensed health facility, out-patient settings, patients' residences, residential facilities, and hospices, as applicable, a physician assistant may, pursuant to a delegation of services agreement executed pursuant to subdivision (b) of section 1399.540 and protocols where present:

(a) Take a patient history; perform a physical examination and make an assessment and diagnosis therefrom; initiate, review and revise treatment and therapy plans including plans for those services described in Section 1399.541(b) through Section 1399.541(i) inclusive; and record and present pertinent data in a manner meaningful to the physician.

(b) Order or transmit an order for x-ray, other studies, therapeutic diets, physical therapy, occupational therapy, respiratory therapy, and nursing services.

(c) Order, transmit an order for, perform, or assist in the performance of laboratory procedures, screening procedures and therapeutic procedures.

(d) Recognize and evaluate situations which call for immediate attention of a physician and institute, when necessary, treatment procedures essential for the life of the patient.

(e) Instruct and counsel patients regarding matters pertaining to their physical and mental health. Counseling may include topics such as medications, diets, social habits, family planning, normal growth and development, aging, and understanding of and long-term management of their diseases.

(f) Initiate arrangements for admissions, complete forms and charts pertinent to the patient’s medical record, and provide services to patients requiring continuing care, including patients at home.

(g) Initiate and facilitate the referral of patients to the appropriate health facilities, agencies, and resources of the community.
(h) Administer or provide medication to a patient, or issue or transmit drug orders orally or in writing in accordance with the provisions of subdivisions (a)-(f), inclusive, of Section 3502.1 of the Code.

(i) (1) Perform surgical procedures as follows:

(A) Local Anesthesia. A physician assistant may perform those procedures customarily performed under local anesthesia without the physical presence of the supervising physician.

(B) Conscious Sedation. A physician assistant may perform surgical procedures upon a consciously sedated patient without a supervising physician and surgeon physically present in the operating room provided that the physician and surgeon is promptly available and the patient is periodically monitored by a licensed healthcare practitioner acting within the scope of his or her license and in accordance with any site-based protocols. For the purposes of this section, “conscious sedation” means a minimally depressed level of consciousness induced by the administration of pharmacologic agents in which a patient retains the ability to independently and continuously maintain an open airway and a regular breathing pattern, and to respond appropriately and rationally to physical stimulation and verbal commands.

(C) Anesthesia Greater than Conscious Sedation. A physician assistant may perform surgical procedures, including the closure of surgical wounds to all layers of the skin and fascia, upon a patient sedated to a level greater than conscious sedation without the physical presence of a supervising physician and surgeon in the operating room or suite provided that the supervising physician and surgeon is immediately available and the licensed health care practitioner administering the sedative anesthetic(s) is physically present in the operating room. For the purposes of this section, “immediately available” means that the supervising physician and surgeon remains located on the same floor and within the same operating suite complex in the event assistance is requested.

(D) Wound closure. A physician assistant may close surgical wounds to the dermal, fascia, and XXXX levels without the physical presence of a supervising physician and surgeon.

Prior to delegating any such surgical procedures, the supervising physician shall review documentation which indicates that the physician assistant is trained and competent to perform the surgical procedures. (2) A physician assistant may also act as first or second assistant in surgery under the supervision of an approved supervising physician.