

(Site Name)

Physician Associate Practice Agreement

(Controlled Substances Education Course and DEA Registration Completed)

Physician Associate (PA) _____ graduated from _____ on _____.

PA was first granted licensure by the Physician Assistant Committee on _____, which expires _____ unless renewed.

This Practice Agreement has been developed through collaboration among physician _____ and physician associate _____ in Site Name, an Organized Health Care System (as defined in Business & Professions Code (BPC) §3501(j) and hereinafter referred to as the “Practice”), for the purpose of defining the medical services which each and every physician associate (“PA”) who executes this Practice Agreement is authorized to perform and to meet the statutory requirement set forth in BPC §3502.3.

- 1. Medical Services Authorized:** Pursuant to BPC §3502, the PA is authorized to perform those medical services for which the PA has demonstrated competency through education, training, or experience, under physician supervision as provided in Section 3 of this Practice Agreement. See Appendix A. Subject to the foregoing, the PA is further authorized to: (a) perform the medical functions set forth in BPC §3502.3(b); to supervise medical assistants pursuant to BPC §2069; (c) to provide care and sign forms under the workers’ compensation program pursuant to Labor Code §3209.10; and (d) any other services or activities authorized under California law.
- 2. Ordering and Furnishing of Drugs and Devices:** In compliance with State and Federal prescribing laws, the PA may order and furnish those drugs and devices, including schedule II through V controlled substances, as indicated by the patient’s condition, the applicable standard of care, and in accordance with the PA’s education, training, experience, and competency, under physician supervision as provided in Section 3 of this Practice

Agreement. The furnishing and ordering of schedule II drugs shall be only for those illnesses, injuries, and/or conditions for which the standard of care indicates the use of such schedule II drugs. The PA may dispense drugs and devices as provided for in BPC §4170 and request, sign, and receive drug samples as provided for in BPC §4061. Prescribing PA DEA # _____.

- 3. Physician Supervision:** Any physician and surgeon of the Practice, who meets the definition of a supervising physician in BPC §3501(e), may provide supervision of a PA in the Practice acting under this Practice Agreement. A supervising physician need not be physically present while the PA provides medical services, but be available by telephone or other electronic means at the time the PA is providing medical services in the Practice. Supervision means that a physician and surgeon oversee and accepts responsibility for the activities of the PA. If rendering services in a general acute care hospital as defined in Health and Safety Code §1250, the PA shall identify his or her supervising physician which has privileges to practice in said hospital. Each time the PA provides care for a patient and enters his or her name, signature, initials, or computer code on a patient's record, chart, or written order, _____ is the supervising physician responsible for the patient, unless otherwise specified in the patient's record.

Practice site: _____

Record Review: The supervising physician shall review, countersign, and date a minimum of 5% sample (per IEHP policy) of medical records of patients treated by the physician assistant functioning under these protocols within thirty (30) days. The physician shall select for review those cases which by diagnosis, problem, treatment, or procedure represent, in his or her judgment, the most significant risk to the patient.

- 4. Patient Care Policies and Procedure:** PA shall consult with, and/or refer the patient to, a supervising physician or other healthcare professional when providing medical services to a patient which exceeds the PA's competency, education, training, or experience.

5. **PA Competency and Qualification Evaluation:** Through a peer review process based on the standard of care, the Practice shall regularly evaluate the competency of a PA. The Practice may credential and privilege the PA to ensure that the PA has the qualifications, training, and experience, to perform the medical services, procedures, and drug and device ordering and furnishing authorized under this Practice Agreement.

6. **Emergency Transport and Backup:** In a medical emergency, telephone 911 and emergency services will be summoned to transfer patient to Name of ER at Address of ER .

7. **Review of Practice Agreement:** This Practice Agreement shall be reviewed on an annual basis and signed. The agreement will be updated by the Practice when warranted by a change in conditions or circumstances.

The physician and PA listed below collaboratively approve this Practice Agreement governing the medical services of PA(s) in the Practice, on behalf of the Practice, and authorize the physicians on the staff of the Practice to supervise the PA(s) named below effective as of the date signed by the PA. Signing this Practice Agreement does mean the named physician below is accepting responsibility for the medical services provided by the PA(s) named below, they are serving as a supervising physician as set forth in Section 3 of this Practice Agreement.

Physician: _____ License # _____

Supervising Physician Signature & Date: _____

PA: _____ License # _____

Supervising PA Signature & Date: _____

Appendix A

The PA is authorized to *perform* the following laboratory and screening procedures:

- Glucose readings
- Hemoglobin levels
- Urinalysis
- Respiratory and sputum cultures
- Genitourinary specimen testing
- Wound cultures
- Electrocardiogram
- Order radiology testing

The PA is authorized to *assist* in the performance of the following laboratory and screening procedures:

- Glucose readings
- Hemoglobin levels
- Urinalysis
- Respiratory and sputum cultures
- Genitourinary specimen testing
- Wound cultures
- Electrocardiogram
- Order radiology testing

The PA is authorized to *perform* the following therapeutic procedures:

- Wound closures and repairs
- Suture and staple removals
- Incision and drainage of lesions/abscess
- Therapeutic joint and soft tissue injections and aspirations
- Closed reductions of musculoskeletal injuries
- Extremity splinting and immobilizations
- Nail removals and partial excisions
- Excisional biopsies

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