

JOB DESCRIPTION

Surgical Physician Assistant

Department: Nursing Administration
Reports to: Director of Clinical Services

I. DEFINITION OF MIMINIMUM QUALIFICATIONS

A qualified Physician Assistant is a person who, by virtue of his/her training, is skilled in assisting the Supervising Physician in the delivery of health care. A Physician Assistant does this by carrying out patient-specific orders or directives from a Supervising Physician or by following protocols adopted by the Supervising Physician and approved through the Interdisciplinary Practice Committee and the appropriate clinical department(s). A Physician Assistant who is approved to practice at Stanislaus Surgical Hospital shall:

- A. Be a graduate of an approved training program for Physician Assistants
- B. Hold a current license and be in good standing with the Medical Board of California
- C. Have an identified, licensed Physician Supervisor who is a member of the Stanislaus Surgical Hospital Medical Staff. A similarly qualified physician(s) shall be identified for supervision during any absence of the primary Supervising Physician
- D. Be processed by the Interdisciplinary Practice Committee (IPC), reviewed by the Medical Staff Executive Committee, and approved by the Governing Body prior to performing services at Stanislaus Surgical Hospital and periodically thereafter
- E. Be subject to all applicable Stanislaus Surgical Hospital policies and procedures and the Medical Staff Bylaws and Rules & Regulations as appropriate
- F. Maintain current Advanced Cardiac Life Support (ACLS) Certification
- G. Maintain National Commission on Certification of Physician Assistants (NCCPA) Certification

II. LIMITATION ON MEDICAL SERVICES:

A Physician Assistant may only provide those medical services which he or she is competent to perform and which are consistent with the Physician Assistant's education, training, and experience, and which are delegated in writing by a Supervising Physician who is responsible for the patients cared for by that physician assistant. The Interdisciplinary Practice Committee or Clinical Department may require proof or demonstration of competence from any Physician Assistant for any tasks, procedures or management he or she is performing. A Physician Assistant shall consult with a Physician regarding any task, procedure or diagnostic problem which the Physician Assistant determines exceeds his or her level of competence or shall refer such cases to a Physician.

III. DELEGATED PROCEDURES:

The delegation of procedures to a Physician Assistant shall not relieve the Supervising Physician of primary continued responsibility for the welfare of the patient. The Supervising Physician has continuing responsibility to follow the progress of the patient and assure that the Physician Assistant does not function outside of the scope of practice.

When a consultation is requested of the Supervising Physician by any other physician, the Supervising Physician will respond by telephone or in person to the consultation request. The Physician's Assistant will not be asked or expected to make the initial contact with the physician requesting the consult.

If the initial response of the Supervising Physician is by telephone, then, upon agreement between the Supervising Physician and the physician requesting the consult, the Physician Assistant may be asked to respond initially on behalf of the Supervising Physician. Thereafter, the Supervising Physician will personally see the patient within a reasonable time, as determined by the condition of the patient.

However, if the physician requesting the consult feels that the Supervising Physician needs to see the patient immediately, that request will be honored unless, due to conflicting patient care responsibilities, the Supervising Physician is unable to comply.

IV. ROLE OF PHYSICIAN ASSISTANTS:

The role of the Physician Assistant at the Hospital is defined as follows:

- A. Arrange hospital admissions, complete forms and charts pertinent to the patient's medical record, and provide services to patients requiring continuing care
- B. Take histories, perform physical exams, make assessments and record this information. The Physician Supervisor must review and countersign this information within twenty-four (24) hours
- C. Perform or assist in the routine diagnostic and therapeutic procedures approved by the Interdisciplinary Practice Committee and delegated to the Physician Assistant by the Supervising Physician
- D. Recognize, evaluate and promptly notify the Supervising Physician of situations which call for immediate medical attention
- E. Instruct and counsel patients in concert with Supervising Physician and other professional staff
- F. Function as first assistant in surgery and carry out those procedures felt to be reasonable and appropriate by the Supervising Physician that are within the Physician Assistant's scope of practice
- G. Facilitate physician referral of patients to other health facilities, agencies, and resources of the community
- H. Transmit orally, or in writing on a patient's record, a prescription from the Supervising Physician to a person who may lawfully furnish such medication or medical device:

1. The Supervising Physician's prescription, transmitted by the Physician Assistant, for any patient cared for by the Physician Assistant, shall be based on either a patient- specific order by the Supervising Physician or on written protocol which specifies all criteria for the use of a specific drug or device and any contraindications for the selection.
 2. A Physician Assistant shall not provide a drug or transmit a prescription for a drug other than that drug specified in the protocol, without a patient-specific order from a Supervising Physician.
 3. At the direction and under the supervision of a Physician Supervisor, a Physician Assistant may hand to a patient of the Supervising Physician a properly-labeled prescription drug prepackaged by a physician, a manufacturer (as defined in the Pharmacy Law) or a pharmacist.
 4. In any case, the medical records of any patient cared for by the Physician Assistant for whom the physician's prescription has been transmitted or carried out shall be reviewed, countersigned and dated by a Supervising Physician within seven (7) days.
 5. *A Physician Assistant may not administer, provide or transmit a prescription for controlled substances in Schedules II through V inclusive without patient-specific authority by a Supervising Physician*
- I. In the event of question by the Nursing staff concerning the role of the Physician Assistant, or any particular element thereof, the Nursing Staff shall contact the Supervising Physician directly for clarification of any patient-care issue

V. SUPERVISION REQUIRED:

- A Supervising Physician shall be available in person or by electronic communication at all times a Physician Assistant is caring for patients
- A. A Supervising Physician shall delegate to a Physician Assistant only those tasks and procedures consistent with the Physician Assistant's training and experience, and approved by the Interdisciplinary Practice Committee
 - B. A Supervising Physician shall observe or review evidence of the Physician Assistant's performance of all tasks and procedures to be delegated to the Physician Assistant until assured of competency
 - C. The Physician Assistant and the Supervising Physician shall establish in writing transport and back-up procedures for the immediate care of patients who are in need of emergency care beyond the Physician Assistant's scope of practice for such times when a Supervising Physician is not on the premises

- D. The Supervising Physician may adopt protocols to govern the performance of a Physician Assistant for some or all tasks. The minimum content for a protocol as referred to in this section shall include:
1. The presence or absence of symptoms, signs, and other data necessary to establish a diagnosis or assessment
 2. Any appropriate tests or studies to order, drugs to recommend to the patient, and education to be given the patient
 3. For protocols governing procedures, the protocol shall state the information to be given the patient, the nature of the consent to be obtained from the patient, the preparation and technique of the procedure, and the follow-up care
- E. The Supervising Physician has continuing responsibility to follow the progress of the patient and to make sure that the Physician Assistant does not function autonomously. The Supervising Physician shall be responsible for all medical services provided by a Physician Assistant under his or her supervision

VI. REPORT OF PHYSICIAN ASSISTANTS SUPERVISED

Each time a Physician Assistant provides care for a patient and enters his or her name, signature, initials, or computer code on a patient record, chart or written order, the Physician Assistant shall also enter the name of the approved Supervising Physician responsible for the patient. A Physician Assistant who transmits an oral order shall state the name of the Supervising Physician responsible for the patient.

VII. PROCEDURES

- A. A Physician Assistant may perform therapeutic procedures delegated by the Supervising Physician either through patient-specific orders or by protocols adopted by the Supervising Physician and approved by the Interdisciplinary Practices Committee.
- B. Before a Physician Assistant may be granted privileges to carry out a procedure independently, the Physician Assistant must be trained and supervised in that procedure by the Supervising Physician until the Supervising Physician is satisfied that the Physician Assistant is qualified to carry out the procedure independently. At that point in time, the Supervising Physician will certify in writing to the Interdisciplinary Practice Committee that the Physician Assistant is qualified to carry out the procedure independently.
- C. Granting of Privileges to carry out such procedures will be subject to approval of the Clinical Department, the Executive Committee, and the Governing LLC Board.
- D. The following procedures may be performed by physician assistants, subject to the Hospital policies and procedures, with a patient-specific order from the Supervising Physician:
1. Pass nasogastric tube and confirm placement
 2. Arterial puncture for arterial blood gases
 3. Place Foley catheter
 4. Administer intravenous drugs

5. Clean and debride wounds
6. Remove sutures and staples
7. Dressing changes
8. Initiate and perform cardiopulmonary resuscitation (CPR) in emergency situations
9. Incision and drainage of wounds

Employee Signature

Date