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SECTION: Personnel	
POLICY AND PROCEDURE: Non-Physician Medical Practitioners	Approved date: _____ Approved by: _____ Effective date: _____ Revised date: _____

POLICY:

Physician offices will have standardized procedures that clearly define the scope of services and supervision of all non-physician medical providers (NPMP).

PROCEDURE:

I. SCOPE OF PRACTICE OF NON-PHYSICIAN MEDICAL PRACTITIONERS

- A. Standardized procedures defining the scope of practice of Nurse Practitioners, Certified Nurse Midwives, and Physician Assistants must be documented on-site. Standardized procedures identify the furnishing of drugs or devices, extent of physician supervision, method of periodic review of competence, and review of provisions in the standardized procedures.
- B. **Scope of practice for non-physician medical practitioners (NPMP) is clearly defined. Standardized procedures shall undergo periodic review, with signed, dated revisions completed at each change in scope of work. Certified Nurse Midwife (CNM):** The certificate to practice nurse midwifery authorizes the holder, under supervision of a licensed physician, to attend cases of normal childbirth and to provide prenatal, intrapartum, and postpartum care, including family planning care for the mother and immediate care for the newborn. The supervising and back-up physician for the CNM must be credentialed to perform obstetrical care in the same delivering facility in which the CNM has delivery privileges.
- C. **Nurse Practitioner (NP):** Nurse practitioners may provide primary care and perform advanced procedures. The extent of required supervision must be specified in the **standardized procedures**.

Physician Assistants (PA): Every PA is required to have the following documents:

- 1) **Practice Agreement: Defines specific procedures identified in practice protocols or specifically authorized by the supervising physician, and must be dated and signed by physician and PA. An original or copy must be readily accessible at all practice sites in which the PA works. There is no established time period for renewing the Practice Agreement, but it is expected that the Practice Agreement will be revised, dated and signed whenever any changes occur. Failure to maintain a Practice Agreement is a**

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violation of the Physician Assistant Regulations and is grounds for disciplinary action by the Medical Board of California against a physician assistant's licensure.

- 2) **Approved Supervising Physician's Responsibility for Supervision of Physician Assistants' Practice Agreement**: Defines supervision responsibilities and methods required by Title 16, section 1399.545 of the Physician Assistant Regulations, and is signed by the physician. The following procedures must be identified:
- a) Transport and back-up procedures for when the supervising physician is not on the premises.
 - b) One or more methods for performing medical record review by the supervising physician.
 - c) Responsibility for physician review and countersigning of medical records.
 1. Responsibility of the PA to enter the name of approved supervising physician responsible for the patient on the medical record. **Delegation of Services Agreement**: Defines specific procedures identified in practice protocols or specifically authorized by the supervising physician, and must be dated and signed by the physician and PA. An original or copy must be readily accessible at all practice sites in which the PA works.

The Agreement will be revised, dated, and signed any time changes occur. Failure to maintain a Delegation of Services Agreement is a violation of the Physician Assistant Regulations and is grounds for disciplinary action by the Medical Board of California against a physician assistant's licensure.

2. **Approved Supervising Physician's Responsibility for Supervision of Physician Assistants Agreement**: Defines supervision responsibilities and methods required by Title 16, section 1399.545 of the Physician Assistant Regulations, and is signed by the physician. The following procedures must be identified:
 3. Each NP, CNM, and PA that prescribes controlled substances must have a valid DEA Registration Number.
- II. SUPERVISION OF NON-PHYSICIAN MEDICAL PRACTITIONERS
1. The supervising physician holds ultimate responsibility for the practice of each supervised non-physician medical practitioner. A The MD is permitted to supervise:

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2. Up to 4 Physician Assistants
 3. There is no limit to Nurse Practitioners the MD may supervise **UNLESS** the FNPs have Furnishing Licenses, then only a **Maximum of 4 Nurse Practitioners with a Furnishing License**
 4. A total of 8 equaling 4 FNP and 4 PAs' at one time and
 5. The MD may also supervise 4 Certified Nurse Midwives
2. ****This may bring the TOTAL number of mid-levels supervised to 12**
1. **Evidence of Non-Physician Medical Practitioner Supervision: The supervising physician shall review, countersign, and date a minimum of five percent sample of medical records of patients treated by the physician assistant functioning under these protocols within thirty (30) days as a component of the Practice Agreement. Standardized Procedures for NP or CNM should identify the furnishing of drugs or devices, extent of physician or surgeon supervision, method of periodic review of competence, including peer review, and review of provisions in the Standardized Procedures. Standardized Procedures shall undergo periodic review, with signed, dated revisions completed at each change in scope of work. Evidence of supervision of NPMP(s) are verifiable through on-site observation of supervisory processes, documentation, or supervisor/NPMP's knowledge of the process.**
- California Nursing Practice Act Article 8 BPC §2834

Update per AB 2346; highlights may be found In Medical Board of CA Newsletter Summer 2014.

- A. The designated supervising or back-up physician is available in person or by electronic communication at all times when a NPMP is caring for patients.

III. IDENTIFICATION OF HEALTH CARE PRACTITIONERS

- A. A health care practitioner shall disclose his or her name and practitioner's license status, as granted by the State of California, on a nametag with at least 18-point type. A health care practitioner in a practice or office, whose license is prominently displayed, may opt not to wear a nametag.

Note: It is unlawful for any person to use the title "nurse" in reference to himself or herself, in any capacity, except for an individual who is a registered nurse or licensed vocational nurse.