This Practice Agreement has been developed through collaboration among physician(s) and physician assistant(s) in (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 assistant ("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. 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. Any schedule II prescription electronically transmitted by the Physician Assistant shall be based on a patient-specific order by the Supervising Physician if the PA has not completed a Controlled Substances Education Course requirements pursuant to California Code of Regulations Sections: 1399.610 and 1399.612). PAs who have completed a one-time Controlled Substances Education Course may order or furnish a Schedule II drug pursuant to the Practice Agreement without patient-specific advance approval. 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.

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 oversees 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. This practice agreement does not require medical chart reviews or physician countersignature of physician assistant charts. (The California Physician Assistant Practice Act as amended by SB 697).

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. Proctoring for new procedures must meet minimum established standards for each new procedure under a standard protocol.

6. **Review of Practice Agreement**: This Practice Agreement shall be reviewed on a regular basis and updated by the Practice when warranted by a change in conditions or circumstances.

The physician and PA(s) 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.

Physician:	Tit	tle:	
Physician Signature		Date	
PA:			
PA Signature	Date		

ORDERING SCHEDULED CONTROLLED SUBSTANCES

POLICY

The PA is authorized order scheduled controlled substances per the following protocols:

PROTOCOLS

<u>General</u>

- 1) The PA follows the provisions of the practice agreement.
- 2) The PA provider must be CURES registered and follow recommended CURES query with each controlled medication prescribed.
- 3) The controlled substances that may be ordered are included in the formulary(s) or references listed in this document.
- 4) Relevant scheduled drug contracts, DEA requirements, and all State and Federal regulations are adhered to.
- Schedule II & III controlled substances are furnished or ordered following the Patient Specific Protocol if a controlled substance course has not been completed, in addition to these General Protocols for Scheduled Controlled Substances.
- 6) The PA may prescribe or order any medications on the patient's insurance formulary or non-formulary medications for which there is no substitute, within the scope of the provider's license and within the scope of ______ ordering policies.
- 7) All other applicable protocols in this document are followed during health care management.

SCHEDULE III PATIENT SPECIFIC PROTOCOL

- 1) Schedule III substances may be furnished or ordered when the patient is in one of the following categories, including but not limited to the following conditions:
 - a. Acute Illness, Injury or Infection: such as cough, fractures
 - b. Acute intermittent but recurrent pain: such as headache
 - c. Chronic continuous pain

- d. Hormone replacement
- 2) Limit order for acute illness, injury or infection to follow CDC's Guidelines & no refills without reevaluation.
- 3) For chronic conditions:
 - a. Pain management protocol or department guidelines is/are adhered to, if appropriate.
 - b. Amount given, including all refills (maximum of 5 in 6 months per DEA regulations, is not to exceed a 120 day supply as appropriate for the condition.
 - c. No further refills without reevaluation.
- 4) Education and follow up is provided.

SCHEDULE II PATIENT SPECIFIC PROTOCOL

- 1) Schedule II controlled substances may be ordered when the patient has one of the following diagnoses and under the following conditions.
 - a. Pain from cancer, post-operative pain, and trauma.
 - b. Pain unresponsive to, or inappropriately treated by CS III-V substances
 - c. Attention Deficit Hyperactivity Disorder (ADHD)
 - d. Neuropsychiatric Conditions
- 2) Limit order for acute and chronic conditions as specified above in Schedule III Protocol.
- 3) No refills for CS II medications are authorized except where authorized by the DEA.
- 4) Pain Management Protocol or Department guidelines is/are adhered to if appropriate.

MEDICATION MANAGEMENT

POLICY

The PA is authorized to manage drugs and devices under the following protocols:

PROTOCOLS

- 1) The management of drugs or devices includes evaluating, initiating, altering, discontinuing and ordering of prescriptive and over-the-counter medications.
- 2) Medication evaluation includes assessment of:
 - Other medications being taken.
 - Prior medications used for current condition.
 - Medication allergies and contraindications, including appropriate labs and exams.
- 4) The drug or device is appropriate to the condition being treated, and:
 - Accepted dosages per references.
 - Generic medications are ordered if appropriate.
 - Appropriate to the practice setting and skill level of the provider
- 5) A plan for follow-up and refills is written in the patient's chart.
- 6) The prescription must be written in patient's chart including name of drug, strength, instructions and quantity, and signature of the PA.
- All General Policies regarding Review, Approval, Setting, Education, Evaluation, Patient Records, Supervision and Consultation in these Standardized Procedures are in force.

PA's may order medications within the scope of the PA's license, practice setting and within the scope of ______ ordering policies.

In addition to the medications listed in these formularies, all drugs and devices listed per the recommendations in the resources found in this document are included as approved medications for the purpose of medication management by PA's functioning under this Protocol. Manufacturer recommended dosage ranges and formulations as well as generic formulations of the medications listed in this formulary are authorized. Non-

prescription and over-the-counter medications are not individually listed in the formulary and are authorized to be furnished.

Procedural Care

PAs may perform procedures that they are privileged to perform by _______. PAs will follow an approved standard protocol/procedure that defines competency standards and guides procedural care.