

<b>SECTION</b>	<b>Approval date:</b>	
Personnel	<b>Approved by:</b>	
<b>POLICY AND PROCEDURE</b>	<b>Effective date:</b>	
Staff Qualifications	<b>Revision date:</b>	

**POLICY:**

All professional health care personnel shall have current California licenses and certifications and shall be qualified and trained for assigned responsibilities.

**PROCEDURE:**

I. HEALTH CARE LICENSE AND CERTIFICATION REQUIREMENTS

- A. All medical professional licenses and certifications are current and issued from the appropriate agency to practice in California. Copies and/or lists of currently certified or credentialed personnel shall be readily available when requested by reviewers.

Medical Professional	License/Certification	Issuing Agency
Certified Nurse Midwife	RN License and Nurse-Midwife certificate	CA Board of Registered Nursing
Certified Radiological Technologist (CRT)	CRT Certificate	CA Department of Public Health (Radiological Branch)
Doctor of Osteopathy (DO)	Physician's & Surgeon's Certificate, DEA Registration	Osteopathic Medical Board of CA, Drug Enforcement Administration
Licensed Midwife (LM)	Midwifery License Drug Enforcement Agency (DEA) Registration, <i>if appropriate</i>	Medical Board of CA DEA
Licensed Vocational Nurse (LVN)	LVN License	CA Board of Vocational Nursing and Psychiatric Technicians
Nurse Practitioner (NP)	RN License with NP Certification and Furnishing Number	CA Board of Registration Nursing
Pharmacist (Pharm.D)	Pharmacist License	CA State Board of Pharmacy
Physician/Surgeon (MD)	Physician's & Surgeon's Certificate, DEA Registration	Medical Board of CA, Drug Enforcement Administration
Physician's Assistant (PA)	PA License	Physician Assistant Examining Committee / Medical Board of CA
Radiological Technician	Limited Permit	CA Department of Health Care Services (Radiological Branch)
Registered Dietician (RD)	RD Registration Card	Commission on Dietetic Registration
Registered Nurse (RN)	RN License	CA Board of Registered Nursing

## II. 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 (RN) or licensed vocational nurse (LVN).

## III. TRAINING OF SITE PERSONNEL

- A. Personnel on site must be qualified for their responsibilities and adequately trained for their scope of work. Site staff should have a general understanding of the systems/processes in place, appropriate supervisions, and knowledge of the available sources of information on site.
- B. Provider and staff shall be able to demonstrate operation of medical equipment used in their scope of work.

## Name Tags (Identification of Health Care Personnel)

680. (a) Except as otherwise provided in this section, a **health care practitioner shall disclose, while working, his or her name and practitioner's license status, as granted by this state, on a name tag in at least 18-point type. A health care practitioner in a practice or an office, whose license is prominently displayed, may opt to not wear a name tag.** If a health care practitioner or a licensed clinical social worker is working in a psychiatric setting or in a setting that is not licensed by the state, the employing entity or agency shall have the discretion to make an exception from the name tag requirement for individual safety or therapeutic concerns. **In the interest of public safety and consumer awareness, it shall be unlawful for any person to use the title "nurse" in reference to himself or herself and in any capacity, except for an individual who is a registered nurse or a licensed vocational nurse, or as otherwise provided in Section 2800.** Nothing in this section shall prohibit a certified nurse assistant from using his or her title.

Source: BUSINESS AND PROFESSIONS CODE SECTION 680-685

<http://www.leginfo.ca.gov/cgi-bin/displaycode?section=bpc&group=00001-01000&file=680-685>

Cal. Code Regs. tit. 22 § 73529

Section 73529 - Employee Name Badges

All personnel serving patients or the public shall wear name and title badges unless contraindicated.

<https://casetext.com/regulation/california-code-of-regulations/title-22-social-security/division-5-licensing-and-certification-of-health-facilities-home-health-agencies-clinics-and-referral-agencies/chapter-4-intermediate-care-facilities/article-4-administration/section-73529-employee-name-badges>



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# Licensing

The Board's Licensing Program protects consumers through proper licensing of physicians and surgeons and certain allied health care professionals.

## Notice to Consumers

Per Business and Professions Code (BPC) section 2026, the Board was required to develop regulations to require its licentiates and registrants to provide notice to their clients or patients that the practitioner is licensed or registered in this state by the Board, that the practitioner's license can be checked, and that complaints against the practitioner can be made through the Board's Internet Web site or by contacting the Board.

In response to BPC section 2026, the Board amended Title 16 of the California Code of Regulations (CCR) [section 1355.4](#) (applicable to physicians and surgeons) and [section 1379.58](#) (applicable to polysomnographic technologists, technicians, and trainees.)

The Board also added 16 CCR [section 1378.5](#) (applicable to research psychoanalysts) and [section 1379.4](#) (applicable to licensed midwives).

Beginning **January 1, 2023**, all licensees and registrants of the Board must provide notice to each patient or client that they are licensed/registered and regulated by the Board, and their license/registration can be checked and complaints against the licensee/registrant can be made through the Board's website or by contacting the Board.

The notice shall include a quick response (QR) code that leads to the Board's [Notice to Consumer webpage](#) and shall contain the following statement and information:

Licensees/registrants may comply with this requirement by doing one of the following:

1. Post the notice in an area visible to patients/clients on the premises where the licensee/registrant provides the professional services in at least 38-point type in Arial font (sample signs are provided below);
2. Include the notice and an acknowledgement of receipt and understanding in a written statement in a language understood by the patient/client or their representative, signed and dated by the patient/client or their representative and retained in that patient's/client's medical records. The notice and acknowledgement of receipt and understanding may be provided and maintained in an electronic format (sample notices and acknowledgements of receipt and understanding are provided below); or
3. Include the notice in a language understood by the patient/client or their representative in a statement on letterhead, discharge instructions, or other document given to a patient/client or their representative, where the notice is placed immediately above the signature line for the patient/client in at least 14-point type.

The Board has posted the notice template with the QR code in the following languages on its Notice to Consumers webpage: English, Spanish, Chinese, Vietnamese, Tagalog, Korean, Armenian, Farsi, Arabic, Russian, Japanese, Punjabi, and Khmer.

If the licensee/registrant chooses to post a sign to comply with the notice requirement, and the sign is not in a language understood by the patient/client or their representative, then the notice must be provided under option 2 or 3 above, so long as the Board has provided a translated notice understood by the patient/client or their representative on its Notice to Consumers webpage.

A licensee/registrant will be deemed to be in compliance with this section if the hospital, clinic, or other practice location where they are practicing posts the notice on its premises in an area visible to patients/clients consistent with the requirements of the regulation.

## Sample Signs for Posting:

- **Physicians and Surgeons:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)
- **Licensed Midwives:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)
- **Research Psychoanalysts:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)
- **Polysomnographic Technologists, Technicians, and Trainees:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)

## Sample Notices and Acknowledgments of Receipt and Understanding:

- **Physicians and Surgeons:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)
- **Licensed Midwives:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)
- **Research Psychoanalysts:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)
- **Polysomnographic Technologists, Technicians, and Trainees:** [English](#) | [Spanish](#) | [Chinese \(Simplified\)](#) | [Chinese \(Traditional\)](#) | [Vietnamese](#) | [Tagalog](#) | [Korean](#) | [Armenian \(Eastern\)](#) | [Armenian \(Western\)](#) | [Farsi](#) | [Arabic](#) | [Russian](#) | [Japanese](#) | [Punjabi \(India\)](#) | [Punjabi \(Pakistan\)](#) | [Khmer](#)

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Web Accessibility Certification

# NOTICE TO PATIENTS

Medical doctors are licensed and regulated by the Medical Board of California.

To check up on a license or to file a complaint go to

[www.mbc.ca.gov](http://www.mbc.ca.gov),

email: [licensecheck@mbc.ca.gov](mailto:licensecheck@mbc.ca.gov),

or call (800) 633-2322.



**1399.547. Notification to Consumers.**

(a) A licensee engaged in providing medical services shall provide notification to each patient of the fact that the licensee is licensed and regulated by the board. The notification shall include the following statement and information:

**NOTIFICATION TO CONSUMERS**

Physician assistants are licensed and regulated

by the Physician Assistant Board

(916) 561-8780

[www.pab.ca.gov](http://www.pab.ca.gov)

(b) The notification required by this section shall be provided by one of the following methods:

(1) Prominently posting the notification in an area visible to patients on the premises where the licensee provides the licensed services, in which case the notice shall be in at least 48-point type in Arial font.

(2) Including the notification in a written statement, signed and dated by the patient or the patient's representative and retained in that patient's medical records, stating the patient understands the physician assistant is licensed and regulated by the board.

(3) Including the notification in a statement on letterhead, discharge instructions, or other document given to a patient or the patient's representative, where the notice is placed immediately above the signature line for the patient in at least 14-point type.

Note: Authority cited: Section 3510, Business and Professions Code.  
Reference: Section 138, Business and Professions Code.



## **NOTIFICATION TO CONSUMERS REGULATION**

Effective August 11, 2011, Section 1399.547, Title 16 of the California Code of Regulations, mandated by Business and Professions Code section 138, requires that physician assistants inform patients that they are licensed and regulated by the Physician Assistant Board. The notification must include the following statement and information:

**NOTIFICATION TO CONSUMERS  
PHYSICIAN ASSISTANTS ARE LICENSED AND REGULATED BY THE  
PHYSICIAN ASSISTANT BOARD  
(916) 561.8780  
WWW.PAB.CA.GOV**

Physician assistants may provide this notification by one of the following three methods:

- Prominently posting a sign in an area of their offices conspicuous to patients, in at least 48-point type in Arial font.
- Including the notification in a written statement, signed and dated by the patient or patient's representative, and kept in that patient's file, stating the patient understands the physician is licensed and regulated by the Board.
- Including the notification in a statement on letterhead, discharge instructions, or other document given to a patient or the patient's representative, where the notification is placed immediately above the signature line for the patient in at least 14-point type.

For more information, please contact the Board at (916) 561.8780 or [paboard@dca.ca.gov](mailto:paboard@dca.ca.gov).

**NOTIFICATION TO  
CONSUMERS**

**Physician Assistants are  
licensed and regulated by the  
Physician Assistant Board**

**(916) 561-8780**

**[www.pab.ca.gov](http://www.pab.ca.gov)**

<b>SECTION</b>	<b>Approval date:</b>	
Personnel	<b>Approved by:</b>	
<b>POLICY AND PROCEDURE</b>	<b>Effective date:</b>	
Non-Physician Medical Practitioners	<b>Revision date:</b>	

**POLICY:**

All primary care provider (PCP) sites that employ non-physician medical providers (NPMP): Nurse Practitioners (NP), Certified Nurse Midwives (CNM), Licensed Midwives (LM), and/or Physician Assistants (PA), shall have standardized procedures (for LMs, NPs and CNM) and/or Practice Agreements/Delegation of Services Agreements (for PAs) that clearly define the scope of services and supervision.

The supervising physician is a physician and/or surgeon licensed by the Medical Board or by the Osteopathic Medical Board of California who supervises one or more physician assistants, possesses a current valid license to practice medicine, and is not currently on disciplinary probation for improper use of a physician assistant. "Supervision" means that a licensed physician and surgeon oversee the activities of, and accept responsibility for, the medical services rendered by a physician assistant. Physicians shall comply with all current and/or revised requirements established by the Medical Board of CA for supervising physician assistants. The supervising physician holds ultimate responsibility for the practice of each supervised non-physician medical practitioner.

**PROCEDURE:**

**I. SCOPE OF PRACTICE OF NON-PHYSICIAN MEDICAL PRACTITIONERS**

- A. Nurse Practitioners, Certified Nurse Midwives shall have standardized procedures defining their scope of practice and supervision. Standardized procedures legally define the expanded scope of nursing practice that overlaps the practice of medicine. NPs and CNMs operate under written standardized Procedures that are collaboratively developed and approved by the supervising physician, the NP/CNM and administration within the organized health care facility/system in which standardized procedures will be used. 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 and must be dated and signed by the supervising physician and NP/CNM. All Standardized Procedures shall be readily accessible at all practice sites in which the NP or CNM works.
  - 1. 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.
  - 2. Certified Nurse Midwife (CNM): The certificate to practice nurse mid-wifery 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 shall be credentialed to perform obstetrical care in the same delivering facility in which the CNM has delivery privileges.
  
- B. Physician Assistants shall have Practice Agreements/Delegation of Service Agreements defining their scope of practice and supervision. Practice Agreements/Delegation of Service Agreements 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. Failure to maintain a Practice Agreement/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.

1. Delegation of Service Agreements (DSA): DSAs established prior to January 1, 2020 defines supervision responsibilities and methods required by Title 16, section 1399.545 of the Physician Assistant Regulations. The following procedures are 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; and
    - d. Responsibility of the PA to enter the name of approved supervising physician responsible for the patient on the medical record
  2. Practice Agreement: According to Senate Bill 697, starting January 1, 2020, newly established Practice Agreements shall define the supervision responsibilities and methods required by the Business and Professions Code, Sections 3502. The Senate Bill 697 removed the required supervisory procedures above under a DSA with the exception of the following: Transport and back-up procedures for when the supervising physician is not on the premises.
- C. Standardized Procedures and Practice Agreements/Delegation of Service Agreements shall undergo periodic review every \_\_\_\_\_ year(s) to identify changes in the NPMP's scope of practice or other information. Standardized Procedures and Practice Agreements/Delegation of Service Agreements shall be revised, dated and signed whenever any changes occur.
- D. The supervising physician delegates the supervision of Medical Assistants to NPMPs whenever the supervising physician is off premises.
- E. Each NP, CNM, and PA that prescribes controlled substances is required to have a valid DEA Registration Number.

## II. SUPERVISION OF NON-PHYSICIAN MEDICAL PRACTITIONERS

- A. The supervising physician holds ultimate responsibility for the practice of each supervised non-physician medical practitioner. The supervising physician is permitted to supervise the following maximum number of NPMPs at any given time/shift in any of their locations:
- Four (4) Nurse Practitioners with furnishing licenses;
  - Four (4) Certified Nurse Midwives; AND
  - Four (4) Physician Assistants.

This may bring the total number of NPMPs supervised at any given time/shift/location to 12 (the ratio is unlimited for NPs who do not hold furnishing licenses). This ratio is based on each physician, not the number of offices. A primary care physician, an organized outpatient clinic or a hospital outpatient department shall utilize more NPMPs than can be supervised within these stated limits.

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

C. Evidence of supervision and measure of the NPMP(s) competence are completed using the following process(es) (check all that apply):

- Peer Review
- Clinical Competency Assessment
- Performance evaluation quality appraisal
- Routine medical record review of NPMPs documentation practice
- Routine tandem clinic rounds and case reviews
- Routine review of Standardized Procedures/Practice Agreements/DSA provisions
- Other (specify): \_\_\_\_\_

**RESOURCES:**

<https://www.rn.ca.gov/faqs.shtml>

<https://www.rn.ca.gov/pdfs/regulations/npr-b-03.pdf>

<https://www.rn.ca.gov/pdfs/regulations/npr-b-20.pdf>

<https://www.rn.ca.gov/pdfs/regulations/npr-i-25.pdf>

[https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201920200SB697](https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201920200SB697)

[Notice to Consumers for Physicians and Physician Assistants](#)

[Notice to Consumers for Medical Doctors](#)

Date: \_\_\_\_\_

To Whom It May Concern:

This is to certify that \_\_\_\_\_ has demonstrated and completed training as a "MEDICAL ASSISTANT" under the auspices of the undersigned as follows and in compliance with California Code of Regulations, Title 16, Chapter 13, Section 1366, 1366.1, 1366.2 and 1366.4:

- A. Ten clock hours of training in administering injections and performing skin test.
- B. Ten clock hours of training in venipuncture and skin puncture for the purpose of drawing blood.
- C. Satisfactory performance of at least ten each of intramuscular, subcutaneous, and intradermal injections and ten skin tests, and/or at least ten venipunctures and ten skin punctures.
- D. For those only administering medication by inhalation, ten clock hours of training in administering medication by inhalation
- E. Training in A-D above has included instruction and demonstration in:
  - 1. Pertinent Anatomy and Physiology appropriate to the procedure.
  - 2. Choice of equipment.
  - 3. Proper technique including sterile technique.
  - 4. Hazards and complications.
  - 5. Patient care following treatment or test.
  - 6. Emergency Procedure.
  - 7. California law and regulations for Medical Assistants.
- F. Trained and has demonstrated, to the satisfaction of instructor, understanding purposes and technique of infection control.

In every instance, prior to administration of medicine by a medical assistant, a licensed physician or podiatrist, or another appropriate licensed person shall verify the correct medication and dosage. The supervising physician or podiatrist must authorize any technical supportive services performed by the medical assistant and that supervising physician or podiatrist must be physically present in the treatment facility when procedures are performed, except as provided in section 2069(a) of the code.

Sincerely yours,

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Physician Signature

<b>SECTION</b>	<b>Approval date:</b>	
Personnel	<b>Approved by:</b>	
<b>POLICY AND PROCEDURE</b>	<b>Effective date:</b>	
Unlicensed Personnel	<b>Revision date:</b>	

**POLICY:**

All professional health care personnel shall be qualified and trained for assigned responsibilities.

**PROCEDURE:**

I. MEDICAL ASSISTANTS

- A. Medical Assistants (MA) are unlicensed health personnel who perform basic *administrative, clerical, and non-invasive routine technical supportive services* under the supervision of a licensed physician. The licensed physician must be physically in the treatment facility during the performance of authorized procedures by the MA.
- B. To administer medications by subcutaneous or intramuscular injection, or to perform intradermal skin tests, or venipunctures for withdrawing blood, an MA shall have completed at least the minimum number of training hours established in CCR, Title 16, Section 1366.1.
- C. Training shall be administered under a licensed physician; or under a RN, LVN, PA, or other qualified medical assistant acting under the direction of a licensed physician. The supervising physician is responsible for determining the training content and ascertaining proficiency of the MA. Training documentation shall be maintained on-site and include the following:
  1. Diploma or certification from an accredited training program/school, or
  2. Letter/statement from the current supervising physician that certifies in writing: date, location, content, and duration of training, demonstrated proficiency to perform current assigned scope of work, and signature.

II. MEDICATION ADMINISTRATION

- A. Unlicensed staff shall have evidence of appropriate training and supervision in all medication administration methods performed within their scope of work.
  - The supervising physician shall specifically authorize all medications administered by an MA by means of a specific written or standing order prepared by the supervising physician.
  - Medication administration by an MA means the direct application of pre-measured medication orally, sublingually, topically, vaginally, or rectally; or by providing a single dose to a patient for immediate self-administration by inhalation or simple injection.
  - The pre-labeled medication container shall be shown to the licensed person prior to withdrawal of the medication from the container and administration.
  - An MA may administer injections of scheduled drugs, including narcotic medications, only if the dosage is verified and the injection is intradermal, subcutaneous, or intramuscular.

- Medical assistants may not place an intravenous needle, start or disconnect the intravenous infusion tube, administer medications or injections into an intravenous line, or administer anesthesia.

### III. MEDICAL EQUIPMENT

- A. Personnel on site shall be qualified for their responsibilities and adequately trained for their scope of work. Site staff shall have a general understanding of the systems/processes in place, appropriate supervisions, and knowledge of the available sources of information on site.
- B. Provider and staff shall be able to demonstrate operation of medical equipment used in their scope of work.

### IV. IDENTIFICATION OF HEALTH CARE PRACTITIONERS

- A. A health care practitioner shall disclose his or her name and the 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 (RN) or licensed vocational nurse (LVN).