

**PRESENTATION OF THE
BOARD OF NURSING**

TO THE SENATE COMMITTEE ON
HEALTH

TWENTY-SIXTH LEGISLATURE
Regular Session of 2012

Friday, February 10, 2012
2:45 p.m.

TESTIMONY ON SENATE BILL NO. 2103, RELATING TO HEALTH.

TO THE HONORABLE JOSH GREEN, M.D., CHAIR,
AND MEMBERS OF THE COMMITTEE:

My name is Lee Ann Teshima, Executive Officer for the Board of Nursing ("Board"). I appreciate the opportunity to testify on Senate Bill No. 2103, Relating to Health. The Board has no objections to the proposed amendment to the definition of "the practice of nursing as a registered nurse" that would allow a registered nurse, using reasonable judgment, to carry out the prescribed medical orders of a physician, delivered through a physician assistant who is acting as an agent of the supervising physician.

In current practice, registered nurses are allowed to carry out the prescribed medical orders of a physician through a physician assistant who is acting as an agent of the supervising physician, so the amendment does not appear to be necessary; however, the Board does recognize that the proposed amendment would clarify this practice and therefore has no objections.

Thank you for the opportunity to testify in support of Senate Bill No. 2103.

Written Testimony Presented Before the
Senate Committee on Health
February 10, 2012, 2:45 p.m.

by
Gail P. Tiwanak RN, MBA
Executive Director
Hawaii State Center for Nursing

SB 2103 RELATING TO HEALTH

Chair Green, Vice Chair Nishihara, and members of the Senate Committee on Health, thank you for this opportunity to provide testimony in support of this bill, SB 2103.

This measure amends the definition of "the practice of nursing as a registered nurse" in Section 457-2, Hawaii Revised Statutes by adding the requirement that registered nurses use reasonable judgment in carrying out the orders of a physician that are delivered through a physician assistant acting as an agent of the supervising physician.

The Hawaii State Center for Nursing supports this provision as it clarifies that the physician assistant acts as the physician's conduit who conveys the physician's orders to the registered nurse and that at no time is the physician assistant acting independently.

We appreciate your continuing support of nursing and healthcare in Hawai'i. Thank you for the opportunity to testify.

Hawaii Academy of Physician Assistants

PO Box 30355, Honolulu, HI 96820-0355

RE: SB 2103 – SUPPORT with amendments

2/10/2012 2:45 PM Conference Room 229

Senate Health Committee

Senator Josh Green, M.D.

Chair

Senator Clarence Nishihara

Vice Chair

Honorable Chairpersons and Committee members:

The Hawaii Academy of Physician Assistants (HAPA) supports SB2103 with amendments.

HAPA supports the intent of the bill which is to clarify that it is legal for nurses to act on orders from PAs. Because PAs are not specifically mentioned in the nursing statute, there is a lack of clarity with respect to nurses administering orders given by physician assistants and this has led to confusion between hospital administrators and nurses when physician assistants write or give verbal orders in a hospital setting. Amending HRS 457 to include PAs will clarify and resolve this issue.

The Board of Nursing, in its Minutes of Meeting, dated November 7, 2003, at pages 5-6, addressed the issue of "Nurses Taking Orders from Physician Assistants (§457-2, HRS) (§16-85-49.1(b)(2), HAR)." The meeting minutes reflect the Board of Nursing's conclusion: "The Board agrees that the law allows a PA, as an agent of the supervising physician, to order procedures which presumably a registered nurse should be able to take and fulfill."

The current language in this bill does not, however, accurately reflect current PA-physician team medical practice.

...under the direction of a dentist, physician, osteopathic physician, registered nurse, osteopath, or podiatrist licensed in accordance with chapter 448, 453, 457, 460, or 463E "or the orders of a physician delivered through a physician assistant licensed pursuant to chapter 453 and practicing with physician supervision as required by chapter 453." (This also pertains to the registered nurse section of the bill.)

The amended language should be: or the orders of a physician assistant licensed pursuant to chapter 453, practicing with physician supervision as required by chapter 453 and acting as the agent of the supervising physician.

The following rules from HAR chapter 85 support that PAs are licensed to practice medicine with physician supervision and that they can order diagnostic and therapeutic procedures and write orders for medications. Physicians preauthorize PAs to perform practice specific duties in writing which are kept in the PA practice agreement or hospital credentials (example available upon request). PAs are not delivering the orders of a physician. PAs are ordering diagnostic or therapeutic procedures and/or medications as per the preauthorized practice agreement within their scope of practice.

As per HAR Chapter 85, §16-85-44.5 Definition. "Physician assistant" means an individual who has been certified by the board to practice medicine with physician supervision.

§16-85-49.1 Scope of practice. (a) A physician assistant shall be considered the agents of the physician assistant's supervising physician in the performance of all practice-related activities as established in writing by the employer.

(b) Medical services rendered by the physician assistants may include, but are not limited to:

(1) Obtaining patient histories and performing physical examinations;

(2) Ordering, interpreting, or performing diagnostic and therapeutic procedures;...

§16-85-49 (8) (D) A physician assistant employed or extended privileges by a hospital or extended care facility may, if allowed under the bylaws, rules, and regulations of the hospital or extended care facility, write orders for medications Schedule II through V, for inpatients under the care of the supervising physician;

We therefore respectfully request that SB2103 be amended to strike:

~~or the orders of a physician delivered through a physician assistant licensed pursuant to chapter 453 and practicing with~~

~~physician supervision as required by chapter 453.~~ to be replaced with:
or the orders of a physician assistant licensed pursuant to chapter 453, practicing with physician supervision as required by chapter 453 and acting as the agent of the supervising physician.

We further ask that the Health Committee pass the amended version of SB 2103.

Respectfully,

Fielding Mercer, PA-C
President
Hawaii Academy of Physician Assistants

Attachments: 1) Proposed amendments SB2103 2) Sample practice agreement available upon request.



KAISER FOUNDATION HOSPITAL, KAISER PERMANENTE HAWAII REGION
DEPARTMENT OF GENERAL SURGERY
REQUEST FOR PRIVILEGES AS A PHYSICIAN ASSISTANT

Applicant Name: _____

REQUIREMENTS

BASIC EDUCATION:

Graduation from a board approved school or training program for physician assistants (§ 16-85-45 Education. All physician assistant educational programs approved and accredited by the American Medical Association's Committee on Allied Health Education and Accreditations, or its successor agency shall be approved by the board of medical examiners. {Eff 6/30/81; comp 7/27/87; comp 10/28/89; comp 8/25/90; am and comp 12/22/97] (Auth: HRS §§453-5.1, 453-5/3) (Imp: HRS §453-5.3) 85-17.

MINIMUM FORMAL TRAINING:

- Evidence of graduation from a board approved school or training program;
- AND Evidence of passage of the national certification examination developed by the National Commission on Certification of Physician's Assistants (NCCPA);
- AND Evidence of current NCCPA certification (HAR §16-85-46)

LICENSURE/RECOGNITION:

Hawaii State certificate to practice as a physician assistant or Hawaii State temporary certificate to practice as a physician assistant if "graduated from a board approved training program within twelve months of the date of application and never taken a national certifying examination approved by the board." (HRS §453-5.3) (Note: HRS §453-5.3 uses the term "license" in place of "certificate.") (HAR §16-85-46).

SCOPE OF SERVICES:

The physician assistant performs under appropriate supervision those duties and functions specifically delegated by a physician or group of physicians who meet the requirements set forth in HAR §16-85-49. A physician assistant shall be considered the agents of the physician assistant's supervising physician in the performance of all practice-related activities as established in writing by the employer. (HAR §16-85-49.1).

CORE PRIVILEGES FORMAT:

This delineation of privileges represents those most commonly performed within the specialty area and the scope of services provided. The privileges are described in the core privilege (or bundling) format, which, by necessity, is not a detailed list. Each bundle denotes a level of clinical expertise as based on evidence of documented education, training and experience. It is assumed that other medical illnesses and problems may require management within the Practitioner's scope of care and commensurate with the qualifications of a Practitioner's licensure. Procedures outside the scope of those listed for this department must be granted on an individual basis through the appropriate department(s) of this facility, upon recommendation of the Chief of the Department of General Surgery.

PROCTORING REQUIREMENTS:

Successful completion of Kaiser orientation period including end of orientation performance evaluation. Proctoring to be in compliance with regional procedure for "Proctoring of Professional Staff", procedure number 6226-02-D-9 as amended 3/5/02.

REAPPOINTMENT REQUIREMENTS:

The following is included merely as a guide. It is up to the individual departments to determine the criteria for its PA's:

- Based upon the current appointment period, the Chief of the Department of General Surgery will indicate, by checking or initialing (e.g.: in a column for competency) each of the corresponding privilege(s) being requested, thus indicating the PA is adequately competent to perform that privilege requested.
- For staff members who do not meet the minimum patient requirement, documentation of the continuing use of clinical privileges held or requested must be submitted at time of reappointment.

ADDITIONAL REQUIREMENTS:

For Basic Procedures and Advanced Procedures

- If the privilege requested is a newly acquired skill, the PA will provide a verbal review of the procedure to the proctor. Verbal review will be followed by a single observation of the PA performing the skill under the supervision of the proctor.
- If the procedure is currently a part of the PA's practice within the Kaiser system, and there have been no quality problems/complications resulting from the PA's performance of the procedure, the above criteria are waived and approval will be granted for that privilege.
- When the procedure is currently a part of the PA's practice outside the Kaiser system, one observation of the PA performing the skill under the supervision of the proctor will be sufficient to determine competence if the following are met:
 - The PA has provided Kaiser with evidence of formal training (e.g. documentation of included content in academic or continuing education program) or of on-the-job training;
 - No adverse quality issues pertaining to the procedure have surfaced from outside healthcare affiliations during the credentialing and privileging process.

REQUIREMENTS FOR PRESCRIPTIVE AUTHORITY:

IN ADDITION TO MINIMUM FORMAL TRAINING, Physician Assistants may prescribe all legend medications, including controlled medications in Schedule III through V for dispensing from an outpatient pharmacy, including medications for discharge from the hospital. Physician assistants may write orders for controlled medications in Schedule II through V for patients in the hospital who are under the care of his/her supervising physician. A physician assistant who has been delegated the authority to prescribe and/or order controlled medications in Schedule II through V shall register with the Drug Enforcement Administration (DEA) and the State of Hawaii Narcotics Enforcement Division. All Physician Assistants granted prescriptive authority shall complete medication use orientation and education within 90 days of the grant (Policy # 65-61-2.34).

INSTRUCTIONS: Check (✓) the appropriate box for each privilege requested.

| Request Location | | Part A: Diagnosis and Management (Cognitive) Privileges | To be determined by Chief | | | | |
|--------------------------|--------------------------|--|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| AMB | KFH | | Yes | | Yes with Proctoring | No | |
| | | | AMB | KFH | | AMB | KFH |
| <input type="checkbox"/> | <input type="checkbox"/> | Medical services rendered by the physician assistants may include, but are not limited to: Privileges to admit; evaluate; diagnose; consult; provide pre-, intra-, and postoperative surgical care; and perform surgical procedures for patients of all ages-except where specifically excluded from practice; to correct or treat various conditions, illnesses, and injuries of the alimentary tract, abdomen and its contents, breast, skin, soft tissue, head and neck, endocrine system, and minor extremity surgery. Privileges include, but are not limited to, insertion and management of arterial catheters, chest tubes, central venous catheters. Also lumbar puncture, tracheostomy, paracentesis, thoracocentesis, management of trauma, and complete care of critically ill patients with underlying surgical conditions in the emergency department and intensive care unit, including initial assessment, initiating and performing CPR and administering CPR resuscitation drugs, steroids, etc. Additional privileges include but are not limited to the following: (1) Ordering, interpreting, or performing diagnostic and therapeutic procedures; (2) Offering counseling and education to meet patient needs; and (3) Making appropriate referrals (HAR §16-85-49.1) including initiating consultation with medical or surgical specialties and paramedical services (4) Recognize and evaluate situations which call for the immediate attention of a physician and institute, when necessary, treatment and procedures essential for the life of the patient. (5) Assisting at surgery in open and laparoscopic operations (6) Perform rounds (7) Write, transmit, or dictate progress notes, orders, and discharge summaries. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Request Location | | Part B: SPECIAL PROCEDURES | To be determined by Chief | | | | |
|--------------------------|--------------------------|--|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| AMB | KFH | | Yes | | Yes with Proctoring | No | |
| | | | AMB | KFH | | AMB | KFH |
| <input type="checkbox"/> | <input type="checkbox"/> | Perform surgical consultations and report findings to surgical staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Provide routine follow-up care for surgical inpatients and outpatients | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Supervise transport of patients who are critically ill or who have cardiovascular instability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Wound care, including but not limited to dressing application, changes and/or removal, wound aspiration, incision and drainage, and wound debridement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Removal of wound drains | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Administer intrapleural medication(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Order and administer SubQ, ID, IM and IV medication, as directed by attending physician | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Perform venipuncture | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Place Foley catheter | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Place NG or other enteral feeding tube | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Order and transfuse blood | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | First Assistant to the surgeon for major general surgical procedures (requiring use of standard general surgical experience), or other technically difficult procedures and other assistance as directed by the surgeon | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Common general surgery in office procedures (i.e. anoscopy, aspiration of cysts, core biopsy of nodules, excision of thrombosed hemorrhoid, hemorrhoid banding, foreign body removal) and any other procedures as delegated by the supervising physician | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Request Location | | Part B: SPECIAL PROCEDURES (Continued) | To be determined by Chief | | | | |
|---|--------------------------|--|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| AMB | KFH | | Yes | | Yes with | No | |
| | | | AMB | KFH | Proctoring | AMB | KFH |
| <input type="checkbox"/> | <input type="checkbox"/> | Independent use of Ambulatory Surgery Room for general surgery procedures as delineated by the supervising physician | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Open and close surgical incisions and other assistance as requested by the surgeon. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Excise and send specimens for pathology | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Coordinate diagnostic work-ups, procedures, and discharge planning of inpatients and general surgical patients on other services requiring surgical follow-up. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Revision(s)/Modifications to Part B: | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Requested | | Part C: PRESCRIPTIVE AUTHORITY | To be determined by Chief | | |
|--------------------------|--------------------------|--|---------------------------|--------------------------|--------------------------|
| YES | NO | | Yes | Yes with Proctoring | No |
| <input type="checkbox"/> | <input type="checkbox"/> | PRESCRIPTIVE AUTHORITY: To prescribe, dispense, and administer medications and medical devices to the extent delegated by the supervising physician, in compliance with appropriate federal and state regulations, and subject to the following requirements: Prescribing and dispensing of medications may include Schedule III through V and all legend medications. (HAR 16-85-49) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | PRESCRIPTIVE AUTHORITY: A physician assistant employed or extended privileges by a hospital or extended care facility may, if allowed under the bylaws, rules, and regulations of the hospital or extended care facility, write orders for medications Schedule II through V, for inpatients under the care of the supervising physician. (HAR §16-85-49) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

By signing below, I acknowledge that I have read and understand the requirements for the privileges I have requested.

 Signature of Applicant

 Date

I hereby certify that I have reviewed each of the privileges requested and that they are supported by verified documentation of education, training, experience or other factors related to current competence and the applicant's ability to exercise the privileges requested.

 Signature of Department Chief

 Date

 Signature of Supervising Physician

 Date

 Signature of Supervising Physician

 Date

 Signature of Director of Pharmaceutical Services

 Date

- As requested
- As modified

Comments/Recommendations: _____

Testimony for HTH 2/10/2012 2:45:00 PM SB2103

Conference room: 1:30PM

Testifier position: Oppose

Testifier will be present: No

Submitted by: Wailua Brandman APRN-Rx BC FAANP

Organization: Hawai`i Association of Professional Nurses

E-mail: wailua@aya.yale.edu

Submitted on: 2/7/2012

Comments:

Senator Josh Green, M.D., Chair,

Senator Clarence K. Nishihara, Vice Chair, and Members of the Senate Committee on Health,

I am grateful for the opportunity to testify on SB 2103, on behalf of the Hawai`i Association of Professional Nurses (HAPN). We point out that across the State of Hawai`i, it is customary for RNs to carry out the orders of Physician Assistants and indeed, this is the standard of practice. We see no valid reason to open the nurse practice act to achieve the intent of this bill. If employers are at the source of discord, legislation should be directed toward the regulation of employers, not nurses.

While we highly value the contributions of physician assistants and feel that their orders should receive the same considerations as other ordering members of the health care team (e.g. MDs, DOs, APRNs) we do support the intent of this bill, however we DO NOT SUPPORT opening the nurse practice act to remedy a situation at one specific facility. HAPN is committed to maintaining and improving excellent health care delivery in Hawai`i and we are most happy to collaborate with any other discipline to achieve that end; we are happy to share our experience and successes with the physician assistants.

Please do NOT pass this bill out of committee.

Mahalo, and Warmest Aloha,

Wailua Brandman APRN-Rx BC FAANP

Immediate Past President/Legislative Cmte Chair Hawai`i Association of Professional Nurses



Senate Committee on Health
Hon. Senator Green, Chair;
Hon Senator Nishihara, Vice Chair
Hon. Committee members;

February 8, 2012

In support of SB-2103, Relating to Health, Nursing and Physician Assistants.

The Puna Community Medical Center located in the Pāhoa Village Marketplace, Pāhoa, Hawaii, stands in strong support of the passage of this bill. Hawaii's hospital based health services would benefit from the utilization of PAs, and this bill would enable a good working relationship between physicians, PAs and the nursing team in providing in-patient care in Hawaii's hospitals. Teams like this function well in hospitals throughout the United States; there is no reason why those teams could not function just as well in Hawai'i.

Of the more than 81,000 actively practicing PAs nationally, more than half have hospital privileges. All of these PAs work in teams with nurses and physicians; it is time to bring this advantage in health service delivery to Hawaii.

Physicians in hospital practice utilize PAs in every realm; including in-patient medical and surgical services, the surgical theater, the Emergency Departments, out patient specialty clinics, and in long term care. It is essential that the relationship with their nursing colleagues is clear and teamwork be given the highest priority. We believe SB-2103 will help create these healthy relationships in the service of the people of Hawai'i. We urge you to pass this bill.

Thank you for this opportunity to provide supportive testimony in this important matter.

Sincerely,

Dan Domizio PA, MPH
Clinical Programs Director
PCMC
808-930-6001



HAWAII MEDICAL ASSOCIATION

1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814
Phone (808) 536-7702 Fax (808) 528-2376 www.hmaonline.net

TO: COMMITTEE ON HEALTH
Senator Josh Green, M.D., Chair
Senator Clarence K. Nishihara, Vice Chair

DATE: Friday, February 10, 2012
TIME: 1:30 pm
PLACE: Conference Room 229

From: Hawaii Medical Association
Dr. Roger Kimura, MD, President
Linda Rasmussen, MD, Legislative Co-Chair
Dr. Joseph Zobian, MD, Legislative Co-Chair
Dr. Christopher Flanders, DO, Executive Director
Lauren Zirbel, Community and Government Relations

Re: SB 2103 RELATING TO HEALTH.

In Support

Chairs & Committee Members:

Hawaii Medical Association supports this measure and amendments by the Hawaii Academy of Physician Assistants.

This bill serves only to clarify that nurses can execute orders written by physician assistants acting within their scope of practice, as agents of their supervising physicians as per section 168544.5, Hawaii Administrative Rules, "[a] physician assistant may perform those duties and responsibilities delegated by the physician assistant's supervising physician.

It does not increase or expand current existing physician assistant scope of practice.

Furthermore, under section §16-85-49.1 Scope of practice.

(a) A physician assistant shall be considered the agents of the physician assistant's supervising physician in the performance of all practice-related activities as established in writing by the employer.

(b) Medical services rendered by the physician assistants may include, but are not limited to:

(1) Obtaining patient histories and performing physical examinations;

OFFICERS

PRESIDENT - ROGER KIMURA, MD, PRESIDENT ELECT - STEVE KEMBLE, MD

Immediate Past President – Morris mitsunaga, MD, Secretary - Thomas Kosasa, MD,

Treasurer – Walton Shim, MD, Executive Director – Christopher Flanders, DO

(2) Ordering, interpreting, or performing diagnostic and therapeutic procedures...

Because the historical process of licensing and regulating the scopes of practice of physician assistants and of registered nurses has developed independently for the two health care disciplines, the relevant regulatory language pertaining to their respective responsibilities with regard to each is unclear, specifically with regard to nurses administering orders given by physician assistants and has led to a lack of clarity between hospital administrators and nurses when physician assistants write or give verbal orders in the hospital setting.

The Board of Nursing, in its Minutes of Meeting, dated November 7, 2003, at pages 5-6, addressed the issue of "Nurses Taking Orders from Physician Assistants (§457-2, HRS) (§16-85-49.1(b)(2), HAR)." The meeting minutes reflect the Board of Nursing's conclusion: "The Board agrees that the law allows a PA, as an agent of the supervising physician, to order procedures which presumably a registered nurse should be able to take and fulfill."

The amendment to Chapter 457-2, Hawaii Revised Statutes simply amends the statute to indicate what the nursing board has already opined, that nurses can execute orders given by physician assistants acting as agents of their supervising physician... *or utilization of reasonable judgment in carrying out prescribed medical orders of a licensed dentist, medical doctor, osteopath, or podiatrist licensed in accordance with chapter 448, 453, 460, or 463E or the orders of an advanced practice registered nurse recognized in accordance with this chapter or a physician assistant licensed in accordance with chapter 453 and practicing with physician supervision as required by chapter 453.*

Alleviating any confusion on this issue will allow for improved and expedited health care delivery in the hospital setting and will further serve to indemnify nurses who execute orders written by physician assistants acting as agents of their supervising physicians.

Thank you for this opportunity to testify.

SB 2103-opposition

Rationale supporting comments from Amy Stone Murai submitted on line 2/7/12

§16-85-44.5 Definition. As used in this subchapter:

"Physician assistant" means an individual who has been certified by the board to practice medicine with physician supervision. A physician assistant may perform those duties and responsibilities delegated by the physician assistant's supervising physician.

"Supervising physician" means a physician or group of physicians or an osteopathic physician and surgeon licensed to practice medicine and surgery in this State who accepts the responsibility for the supervision of services rendered by physician assistants. The supervising physician shall direct and exercise supervision at all times.

"Supervision" means overseeing the activities of, and accepting responsibility for, the medical services rendered by a physician assistant. Supervision shall be continuous but shall not be construed as necessarily requiring the physical presence of the supervising physician at the time and place the services are rendered. [Eff and comp 7/27/87; am and comp 10/28/89; comp 8/25/90; am and comp 12/22/97] (Auth: HRS §§453-5.1, 453-5.3) (Imp: HRS §453-5.3)

§16-85-46 Certification application. (a) An application for certification shall be made under oath on a form to be provided by the board. The form may require the applicant to provide:

(10) A statement signed by the licensed physician or group of physicians, as the case may be, stating that the physician or group of physicians will direct and supervise the physician assistant and that the physician assistant will be considered the agent of the physician or group of physicians:

§16-85-47 Certification document and identification. (a) Upon approval of the application, the board shall issue a physician assistant certificate which recognizes that the applicant is competent to perform under appropriate supervision those duties and functions specifically delegated to the applicant by a physician or group of physicians.

§16-85-49 Degree of supervision. (a) The supervising physician shall:

(2) Submit a statement that that the supervising physician will direct and exercise supervision over any subordinate physician assistant in accordance with this subchapter and recognizes that the supervising physician retains full professional and legal responsibility for the performance of the physician assistant and the care and treatment of the patient;

(3) Permit the physician assistant to be utilized in any setting authorized by the supervising physician including, but not limited to, clinics, hospitals, ambulatory centers, patient homes, nursing homes, other lodging, and other institutional settings;

(4) Provide adequate means for direct communication between the physician assistant and the supervising physician; provided that where the physical presence of the supervising physician is not required, the direct communication may occur through the use of technology which may include but is not limited to, two way radio, telephone, fax machine, modem, or other telecommunication device;

(5) Personally review the records of each patient seen by the physician assistant within seven working days;

(6) Designate an alternate supervising physician in the physician's absence;

(7) Supervise no more than two physician assistants at any one time; and

(8) Be authorized to allow the physician assistant to prescribe, dispense, and administer medications and medical devices to the extent delegated by the supervising physician

(b) The supervising physician or physicians and the physician assistant shall notify the board within ten days of severance of supervision or employment of the physician assistant.

§16-85-49.1 Scope of practice. (a) A physician assistant shall be considered the agents of the physician assistant's supervising physician in the performance of all practice-related activities as established in writing by the employer.

§16-85-50 Automatic inactivation for failing to be under supervision; restoration. (a) Certification shall be automatically inactivated if the physician assistant is no longer supervised by a physician or group of physicians.

Testimony for HTH 2/10/2012 2:45:00 PM SB2103

Conference room: 229

Testifier position: Oppose

Testifier will be present: No

Submitted by: Yvonne Geesey

Organization: Individual

E-mail: Geesey@Hawaii.edu

Submitted on: 2/6/2012

Comments:

This is an issue between PAs and a private employer and the Nurse Practicer Act does not need to be amended.

Testimony for HTH 2/10/2012 2:45:00 PM SB2103

Conference room: 229

Testifier position: Comments Only

Testifier will be present: No

Submitted by: David H Messer

Organization: Individual

E-mail: dmessiii@aol.com

Submitted on: 2/7/2012

Comments:

As a practicing Physician Assistant I would support the passage of SB 2103 with amendments as proposed by the Hawaii Academy of Physician Assistants.

Regards,

David H Messer, III PA-C

Testimony for HTH 2/10/2012 2:45:00 PM SB2103

Conference room: 1:30PM

Testifier position: Support

Testifier will be present: No

Submitted by: Kathy Yokouchi

Organization: Individual

E-mail: nuyolks@gmail.com

Submitted on: 2/7/2012

Comments:

Thank you, Senator, for the great job you're doing and for your support for nursing, the Center for Nursing and healthcare in Hawaii.