

Chapter Med 50

PHYSICIAN'S ASSISTANTS

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Med 50.01 Title, authority. The rules herein contained constitute and shall be known as the "Rules of the Medical Examining Board Relating to Certification and Regulation of Physician's assistants", and are promulgated pursuant to the authority granted to the board by sections 15.08(5), 448.50, and 448.51 of the statutes.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.02 Definitions. For the purpose of these rules, and unless expressly stated otherwise:

(1) "Board" means the medical examining board as created in section 15.405(7) of the statutes.

(2) "Council" means the council on physician's assistants as created in section 15.407(2) of the statutes.

(3) "Certificate" means documentary evidence issued by the board to applicants for certification as a physician's assistant who meet all of the requirements of the board.

(4) "Educational program" means a program for educating and preparing physician's assistants which is approved by the board.

(5) "Individual" means a natural person, and does not include the terms firm, corporation, association, partnership, institution, public body, joint stock association, or any other group of individuals.

(6) "Supervision" means to co-ordinate, direct, and inspect continually and at first hand the accomplishments of another, or to oversee with powers of direction and decision the implementation of one's own or another's intentions.

(7) "Patient Services" means any or all of the following:

(a) The initial approach to a patient of any age in any setting to elicit a personal medical history, perform an appropriate physical examination, and record and present pertinent data in a manner meaningful to the physician.

(b) Performing, or assisting in performing, or both, routine laboratory and related studies as appropriate for a specific practice setting including the drawing of blood samples, performing urinalyses, and taking electrocardiographic tracings.

(c) Performing routine therapeutic procedures including injections, immunizations, and suturing and care of wounds.

(d) Instructing and counseling patients on physical and mental health, and on diet, disease, treatment, and normal growth and development.

(e) Assisting the physician in the institutional setting by assisting at surgery, making patient rounds, recording patient progress notes, accurately and appropriately transcribing or executing standing orders or other specific orders at the direction of the supervising physician, consistent with applicable regulations of the institution, and compiling and recording detailed narrative case summaries.

(f) Assisting in the delivery of services to patients by reviewing and monitoring treatment and therapy plans.

(g) Independently performing evaluative and treatment procedures necessary to provide an appropriate response to life threatening emergency situations.

(h) Facilitating referral of patients to other appropriate community health facilities, agencies, and resources.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.03 Council: powers, meetings, records. The council shall exercise such powers as are or may be provided to it by the laws of the state of Wisconsin pertaining to the education, certification, and regulation of physician's assistants. The council shall propose to the board such rules not inconsistent with the law, as it deems necessary and proper for the execution and enforcement of such laws. The council shall meet at least 4 times in each calendar year. The chairman, or other presiding officer of the council, may call special meetings thereof when, in his judgment, circumstances or functioning of the council so require. The chairman, or other presiding officer of the board, may call special meetings of the council when, in his judgment, circumstances or functioning of the council so require. The chairman, or other presiding officer of the board, may call special meetings of the council when, in his judgment, circumstances or functioning of the board so require. The secretary shall maintain an accurate record of all proceedings of the council.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.04 Certifying educational programs. The board shall conduct an investigation prior to approving any educational program which prepares physician's assistants. The examining board may designate an agent and one or more examining board members and one or more council members to conduct a portion or all of such investigation to determine the facts upon which the examining board shall make its decision. Any party aggrieved by the decision of the examining board under this section may, within 10 days of notice thereof, apply for a formal hearing before the board or an agent duly appointed to sit for the board. The decision of the board shall comply with section 227.13 and may be reviewed as provided in section 227.16 of the statutes.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.05 Practice: scope and limitations. In providing patient services the entire practice of a physician's assistant shall be under the supervision of a licensed physician. The scope of practice of a physician's assistant shall not exceed the definitions of "patient

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services" as set forth in Med. 50.02(7) Wis. Adm. Code, nor the physician's assistant's training and experience, nor the scope of practice of the supervising physician. No physician's assistant shall redelegate a task delegated to him by the supervising physician.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.06 Practice in remote location. A physician's assistant may practice on premises away from the main office of the supervising physician or an institution where the supervising physician has staff privileges, providing that the supervision required in Med. 50.05 Wis. Adm. Code is maintained.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.07 Employee status. No physician's assistant shall be self employed. If the employer of a physician's assistant is other than a licensed physician, such employer shall provide for and not interfere with the supervision required in Med. 50.05. Wis. Adm. Code.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.08 Supervising physician: limitation and responsibility. No physician may supervise more than 2 physician's assistants, but a physician's assistant may be supervised by more than one physician. In the case of exceptions to this rule, a written plan for the supervision of more than 2 physician's assistants by a licensed physician must be filed with, reviewed, and recommended for approval by the council, and approved by the board.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.09 Transfer of responsibility. Another licensed physician may be designated by the supervising physician to supervise a physician's assistant for periods not to exceed 8 weeks per year. Except in an emergency, such designation shall be made in writing to the substitute supervising physician and to the physician's assistant, and must be executed and a copy thereof filed with the council prior to the supervising physician's absence.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.10 Qualification, application, examination, re-examination. (1) To be qualified for admission to examination for certification as a physician's assistant in this state, an applicant must supply evidence satisfactory to the board that the applicant:

(a) Is of good professional character.

(b) Has successfully completed a formal physician's assistant educational program approved by the board. Until January 1, 1980, the board may waive this requirement for an applicant who has been employed in practice as a physician's assistant, as defined in these rules for 24 consecutive months during the 3 calendar years preceding January 1, 1975.

(2) Application for certification as a physician's assistant may be made at the time and place designated by the board, and shall be made as a verified statement in such form as the board may designate, and shall be accompanied by satisfactory evidence setting out the qualifications imposed in subsection (1).

(3) Having complied with subsection (2), the applicant shall be examined. Examination may be both written and oral. The council shall advise the board as to content of examinations required under this subsection and passing grades therein, and the board shall provide for such content and such passing grades. In lieu of its own examinations, the board may make such use as it deems appropriate of examinations prepared, administered, and scored by national examining agencies. The board designates the council as its agent in conducting examinations.

(4) The board may require an applicant who fails to appear for, or to complete, the required examinations, to reapply for certification before admitting him to subsequent examinations.

(5) An applicant who fails to achieve a passing grade in the required examinations may request re-examination, and may be re-examined not more than twice at not less than 6 month intervals, and shall pay a re-examination fee for each such re-examination. An applicant who fails to achieve a passing grade on the second such re-examination shall not be admitted for further examinations until he reapplies for certification and also presents to the board evidence of such further professional training or education that the board may deem appropriate.

(6) There is no provision for waiver of examination or for reciprocity with other licensing jurisdictions under these rules.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.

Med 50.11 Exclusions. None of the provisions of this chapter shall be construed to permit the independent prescribing or dispensing of any drug, or the practice of acupuncture in any form, by any physician's assistant.

History: Cr. Register, March, 1975, No. 231, eff. 4-1-75.