

OREGON MEDICAL BOARD

PHYSICIAN ASSISTANT COMMITTEE

Meeting – June 12, 2008

The Physician Assistant (PA) Committee of the Oregon Medical Board (OMB or “Board”) held a regular quarterly meeting Thursday June 12, 2008, at the OMB office, 1500 S.W. First Ave., Suite 620, Portland. The meeting was called to order by Bruce Carlson, MD, at 9:30 a.m. A quorum was present, consisting of the following members:

MEMBERS PRESENT

Bruce Carlson, MD, Committee Chair
Nathalie Johnson, MD, Board Liaison, via telephone
Theodore “Ted” Ruback, PA-C
Theresa Curran, PA-C

MEMBERS ABSENT

David “Dave” Jones, PA-C

STAFF PRESENT

Kathleen Haley, JD, Executive Director
Jennifer Lannigan, Licensing Coordinator
Michele Provinsal, Physician Assistant Licensing Specialist
Michael Bielaski, Physician Licensing Specialist
Randy Day, Complaint Resource Officer

GUESTS

Juan Oyarzun, MD
Christina Rehm, MD
Fred C. Williams, Jr, MD
John Young, MD
Michael Young, MD

Agenda

EXECUTIVE SESSION:

Update on Physician Assistants Currently Under Board Investigation
– Randy Day, Complaint Resource Officer

PUBLIC SESSION:

Acknowledgment of Bruce Carlson, MD's Service to the Committee

Approve Minutes from March 13, 2008 Committee Meeting

Summary from April 11, 2008 Board Meeting – Nathalie Johnson, MD

Approval of Physician Assistant Students Training in Oregon

Approval of Locum Tenens Assignments

Approval of Consent Agenda

Committee Review of New Licensees and Practice Description Changes

Interviews for Upcoming Vacant Committee Position

Juan Oyarzun, MD
Christina Rehm, MD
John Young, MD
Michael Young, MD
Fred C. Williams, Jr, MD

First Review of Administrative Rules:

OAR 847-050-0042 Registration

OAR 847-050-0043 Inactive Registration, and Reactivation from Inactive to Active

OAR 847-050-0063 Physician Assistant Committee

Personal History Question #13 of Application

Procedure Summaries

Physician Assistant Scope of Practice

Selection of Committee Chair

15 Minute Public Comment Session

Approval of Future Meeting Dates

Working Lunch

Bruce Carlson, MD, called the meeting to order at 9:30 a.m.

Members present voted unanimously to pass the following motions and recommendations unless otherwise noted.

EXECUTIVE SESSION:

**Update on Physician Assistants Currently Under Board Investigation
– Randy Day, Complaint Resource Officer**

PUBLIC SESSION:

Approve Minutes from March 13, 2008 Committee Meeting

Ted Ruback, PA-C, noted that page 1519 should read American Academy of Physician Assistants rather than American Association of Physician Assistants.

It was moved and seconded that:

The Physician Assistant Committee approve the minutes of the March 13, 2008 Committee meeting with the above mentioned correction.

Summary from April 11, 2008 Board Meeting – Nathalie Johnson, MD

Nathalie Johnson, MD, summarized for the Committee the decisions made at the April 11, 2008 Board meeting regarding matters related to the Physician Assistant Advisory Committee.

Approval of Physician Assistant Students Training in Oregon

Accredited Training Program	Physician Assistant Student	Responsible Oregon Physician	Dates of Preceptorship
Medex Northwest	Kari Duclos	David Evans, MD20755	3/31/08-4/4/08
Medex Northwest	Jeremy Wellman	Bruce Carlson, MD07786	3/31/08-4/4/08
Medex Northwest	Chad Tiller	Bruce Carlson, MD07786	4/7/08-4/11/08
Medex Northwest	Gricelda Isabeles	Thomas Farney, MD15383	5/26/08-6/20/08
Western University	Amber Emery	Paul Reicherter, MD23536	7/1/08-7/30/08
Medex Northwest	Malynda Calkins	Derrick Sorweide, DO20800	9/22/08-1/3/09

The following physician assistant students will train at **Pacific University Physician Assistant Program** under the supervision of **Richard Gicking, MD18365**, from **May 12, 2008** through **August 7, 2009**.

Donna Anderson	Sean Brown	Jennifer Byrne
Kitty Carlile	Young Cho	Curtis Cole
Erin Cramer	Nicole Dwyer	Nancy Espelin
Gregg Fletcher	Emily Forsythe	Judson Hall
Lily Ho	Carissa Honeycutt	Ryan Kendrick
Camille Kinzler	Jason Kwiatkowski	Winslow Lewis
My Ly	Kathryn Mayhew	Maureen McCaffrey
Philip McKay	Mahkameh Mehdiannad	Cynthia Melean
Andrea Moore	Scott Murray	Christopher Newhouse
Van-Minh Nguyen	Kyle Ohisa	Felipson Ramos
Aklil Rostai	Brittany Rowan	Amy Scheer
Mary Schindeler	Bradley Scott	Sonja Skovsted
Matthew Stark	McKenzie Thurman	Tad Westdale
Audrea Williams	Carmel Wimber	Jennifer Zupfer

It was moved and seconded that:

The Physician Assistant Committee recommends the Oregon Medical Board approve the above physician assistant students training in Oregon.

Bruce Carlson, MD, abstained.

Approval of Locum Tenens Assignments

Physician Assistant	Physician	Location	Dates of Assignments
Avon Hansen, PA00749	E. Charles Douville, MD17068	The Oregon Clinic 1111 NE 99 th Ave Portland, OR 97220	3/20/08-3/30/08 7/26/08-8/3/08 8/14/08-8/31/08 9/12/08-9/28/08

It was moved and seconded that:

The Physician Assistant Committee recommends the Oregon Medical Board approve the above Locum Tenens assignments.

Ted Ruback, PA-C, suggested that an article be written for the OMB newsletter addressing how physician assistants can request locum tenens assignments. Kathleen Haley, JD, responded that there are other aspects of the locum tenens status that are currently being reviewed by the Board and that an article should be postponed until such reviews are complete.

Approval of Consent Agenda

PRACTICE DESCRIPTIONS OF NEWLY LICENSED PHYSICIAN ASSISTANTS

Physician Assistant	Physician	Reason for Review
Brian James Allen, PA01343	Shaun M. Hobson, MD22824	Primary Supervising Physician
Katherine Jennifer Fifer, PA01346	Michael Edward Knowler, MD15601	Primary Supervising Physician
Toby James Kenji Higa, PA01340	Ray Stangeland, MD09616	Primary Supervising Physician
Angela Christina Hoffman, PA01350	Kathleen M. Farrell, DO25860	Primary Supervising Physician
Nicole Kristine Hoyt, PA01345	John Lawrence Stoune, MD17616	Primary Supervising Physician
Kelly Marie King, PA01344	Sean L. Steward, MD19497	Primary Supervising Physician
Amee Joy Koch, PA01352	Brent Wesenberg, MD26812	Primary Supervising Physician
Mary Kathleen Lane, PA01341	William G. Barish, MD16945	Primary Supervising Physician
Jennifer Lynn Martin, PA01351	William B. Long, III, MD13786	Primary Supervising Physician
James David McColly, PA01342	Eddie Rodriguez-Lopez, MD24682	Primary Supervising Physician
Yuko Kimura Miller, PA01347	Ray G. Stangeland, MD09616	Primary Supervising Physician
Tessa Jane Molter, PA01348	James C. Ballard, MD24670	Primary Supervising Physician
Angila Marie Murray, PA01355	Nicole M. J. VanDerHeyden, MD26385	Primary Supervising Physician

NEW PRACTICE DESCRIPTIONS OF LICENSED PHYSICIAN ASSISTANTS

Clyde Terry Bancroft, PA00866	Steven Blum, MD21400	Secondary Supervising Physician
Kim Biggs, PA01062	Benjamin Ehst, MD27612	Primary Supervising Physician
Victoria C. Brownlow, PA00540	Joaquin E. Cigarroa, MD26510	Primary Supervising Physician
Chelsea Burchette, PA00781	Leslie Lee McCullough, MD11227	Secondary Supervising Physician
Teresa Cousineau, PA00625	Patrick Simning, MD15914	Primary Supervising Physician
Michael Cruise, PA01271	Laurie D. Ponte, MD16855	Primary Supervising Physician
Denis Dane Davis, PA00931	Ronald Jones, MD18968	Secondary Supervising Physician
Denis D. Davis, PA00931	James M. Benton, MD10154	Secondary Supervising Physician
Jacque F. Davis, PA00875	Surinder M. Vasdev, MD17690	Primary Supervising Physician
Haldin Waldron Dietz, PA00458	Greg Robert Zarelli, MD22338	Primary Supervising Physician

Physician Assistant	Physician	Reason for Review
Arden Jay Gage, Jr, PA01226	Lisa A. Steffey, DO22679	Secondary Supervising Physician
Gina Marie Glaubke, PA01136	Jonathan Schott, MD21468	Primary Supervising Physician
Jill Marie Hartley, PA00807	Robert Sewell, MD12994	Primary Supervising Physician
Frank P. Hillman, PA01213	Lois L. Garner, MD24805	Secondary Supervising Physician
Ben Douglas Johnson, PA00825	James Michael Benton, MD10154	Secondary Supervising Physician
Chad Arthur Jorgensen, PA01074	Andrea Halliday, MD25669	Primary Supervising Physician
Steven R. King, PA01236	Robert L. Shannon, MD24609	Primary Supervising Physician
Suzann Kruse, PA01040	Michael S. Rogers, MD25740	Secondary Supervising Physician
Laurie A. Leece, PA00333	Todd Knapp, MD23433	Primary Supervising Physician
Stephen Anthony Leonardo, PA00900	Scott E. Ashley, MD24702	Primary Supervising Physician
Carolyn K. Litak, PA00614	Shae Johnson, DO27594	Primary Supervising Physician
Ericka Luckel, PA00979	Timothy Bollom, MD25128	Primary Supervising Physician
Kimberly Matheson, PA01200	Arthur D. Hayward, MD10742	Primary Supervising Physician
George Miller, PA00776	Kevin R. Smith, MD18891	Secondary Supervising Physician
Dorothy K. Miner, PA00553	Leslie P. Stone, MD22484	Secondary Supervising Physician
Dorothy K. Miner, PA00553	P. Michael Stone, MD22527	Secondary Supervising Physician
Shaylyn B. Murphy, PA00919	Gregory Melby, MD24292	Primary Supervising Physician
Casey Osborne-Rodhouse, PA00855	Thomas Wendel, MD14467	Primary Supervising Physician
Ralph G. Peterson, PA00258	Glenn Keiper, MD20444	Primary Supervising Physician
Kathleen S. Pickering, PA01211	Peter A. Peruzzo, MD08964	Primary Supervising Physician
Jeannean M. Rasmussen, PA01179	Anthony I. Colorito, MD22621	Primary Supervising Physician
Cristin Rettler, PA00903	Se Jung Shin, MD22180	Primary Supervising Physician
Aimee Stein, PA01334	Barry Newman, MD27491	Primary Supervising Physician
Eric Cameron Stroud, PA00556	Reginald G. Williams, MD08253	Primary Supervising Physician
Scott Kennedy Swindells, PA00289	Kristin K. Miller, MD21845	Primary Supervising Physician
Scott Kennedy Swindells, PA00289	Kristin K. Miller, MD21845	Primary Supervising Physician
Mark E. Tabor, PA00726	Arthur Hayward, MD10742	Primary Supervising Physician
Mark E. Tabor, PA00726	Jozsef Lukacs, MD25998	Secondary Supervising Physician

Physician Assistant	Physician	Reason for Review
Susan Terran, PA00515	Shae Johnson, DO27594	Primary Supervising Physician
Tenielle Rhae Teske, PA01324	Janel R. Guyette, MD27138	Secondary Supervising Physician
Sarah Elizabeth Theborge, PA01331	Erik Egsieker, MD24200	Primary Supervising Physician
Robyn Lynn Triebold, PA00619	Tori Jones, MD27067	Primary Supervising Physician
Jessica M. Utt, PA01266	Edmundo Rosales, MD16949	Secondary Supervising Physician
Larissa Whalen Garfias, PA00952	Suniti Kumar, MD26057	Secondary Supervising Physician
Daniel James Zimmerman, PA00744	Jay Hamilton Chappell, MD17020	Primary Supervising Physician

REVISED PRACTICE DESCRIPTIONS OF LICENSED PHYSICIAN ASSISTANTS

Francine H. Boullosa, PA00124	Martin Altschul, MD14181	Revision to Practice Description
Brandee Nicole Danks, PA01010	Paul Mayer, MD22689	Revision to Practice Description
Sharon Marie Dickinson, PA01314	Kirk Walker, MD17301	Revision to Practice Description
Eric S. Dildine, PA01169	Keith W. Harless, MD08626	Revision to Practice Description
Michael Garland, PA00915	Mark Metzger, MD23691	Revision to Practice Description
Benjamin Luman, PA01125	Michael Dorsen, MD21968	Revision to Practice Description
Nicole Myers, PA01135	Gayle Schantzen, MD25111	Revision to Practice Description
Aimee Stein, PA01334	Sonia Butterworth, MD25838	Revision to Practice Description
Eric C. Stroud, PA00556	Reginald G. Williams, MD08253	Revision to Practice Description
George Van Meter, PA00779	David Noall, MD08774	Revision to Practice Description
Paul Wacek, PA01087	Michael Hutchens, MD22603	Revision to Practice Description

It was moved and seconded that:

The Physician Assistant Committee recommends the Oregon Medical Board approve the above consent agenda items.

Margaret Glissmeyer, PA00994	Nathalie Johnson, MD17901	Revision to Practice Description
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It was moved and seconded that:

The Physician Assistant Committee recommends the Oregon Medical Board approve the above consent agenda item.

Nathalie Johnson, MD, abstained.

Acknowledgment of Bruce Carlson, MD's Service to the Committee

Kathleen Haley, JD, and Committee members expressed their gratitude to Bruce Carlson, MD, for the 15 years of service to the Physician Assistant Advisory Committee.

Personal History Question #13 of Application

EXHIBIT A

The Committee reviewed proposed new language for Personal History Question #13 on the Application for Licensure. Committee members had conflicting opinions regarding the question.

Ted Ruback, PA-C, is concerned that the Board does not ask the same question of applicants and their training programs, resulting in the Board receiving information from the program that conflicts with information provided by the applicant. Mr. Ruback noted that the proposed new language for the application is more similar to the question asked of the training program.

Nathalie Johnson, MD, stated that she felt the current language is good in that it is a way to identify those applicants who may need additional review.

Kathleen Haley, JD, announced that this question will be part of a broader discussion during the next Board meeting, to include an article equating difficulties in training programs to difficulties as a licensee.

NOTE 7/11/08: The Board voted to remove the words "counseled" and "remedial" from the question in all disciplines so that the question will now read, "Have you ever been restricted, suspended, terminated, requested to voluntarily resign, placed on probation, received a warning or been subject to any disciplinary action during a medically related training program?"

Interviews for Upcoming Vacant Committee Position

The Committee interviewed physicians who had expressed interest in the vacant Committee position. Committee members stated that they were very impressed and honored to have such a highly qualified group of applicants.

The Committee's recommendation to the Board for filling the vacancy are, in order of preference:

Juan Oyarzun, MD
R. John Young, MD
Michael Young, MD

NOTE 7/11/08: The Board selected Juan Rodrigo Oyarzun, MD, as the new physician member of the Physician Assistant Committee.

Committee Review of New Licensees and Practice Description Changes

PA – License # Supervising Physician – License #	Specialty, Practice Location	Reason for Review
Kristen D. Perry, PA00297 Kathy Crispell, MD17237	C, Clackamas C, Clackamas	Primary Supervising Physician
Committee Recommendation:	Approve Kathy Crispell, MD, as a supervising physician for Kristen D. Perry, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Cardioversion of atrial dysrhythmias is approved under Direct Supervision.	
Melody Ann Berman, PA01235 Andrew C. Tsen, MD20029	CDS, Portland CDS, Portland	Primary Supervising Physician
Committee Recommendation:	Approve Andrew C. Tsen, MD, as a supervising physician for Melody Ann Berman, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Removal of temporary pacemaker wires; chest tube placement and removal; thoracentesis; pacemaker evaluation, interrogation and reprogramming; needle thoracostomy; management, exchange, and removal of tracheostomy tubes; emergency intubation; initiate resuscitation; removal of intravenous and arterial catheters, including swan-ganz catheters and removal of intra-aortic balloon pump (IABP) are approved under General Supervision. Removal of endotracheal tubes; harvest vein and arteries for bypass conduit; insertion of intravenous and arterial catheters, including swan-ganz catheters; insertion of IABP; and operate various assist devices such as intra-aortic balloon pumps, blood scavenger systems and blood gas determination machines, are approved under Direct Supervision. The operation of artificial heart devices is not approved as it is not within the Board's purview to grant this privilege. Conscious (moderate) sedation is not approved pending verification of hospital privileges for conscious (moderate) sedation. Once approved, physician assistant may only perform conscious (moderate) sedation at the hospital which granted certification and privilege and may only perform this procedure under Direct Supervision.	
Sarah Louise Scholl, PA01157 Michael P. Hutchens, MD22603	CCM, Portland AN, Portland	Revision to Practice Description
Committee Recommendation:	Approve the request to revise the Practice Description of Sarah Louise Scholl, PA, under the supervision of Michael P. Hutchens, MD, with the following conditions: The request to change the supervision level for central venous line placement/change and arterial line placement to direct supervision is approved.	
Robert Louis Courtois, PA00260 M. Alan Martin, MD20553	CDS, Portland CVS, Portland	Secondary Supervising Physician
Committee Recommendation:	Approve M. Alan Martin, MD, as a supervising physician for Robert Louis Courtois, PA, per submitted Practice Description with no prescription privileges and the following amendments: Operate various assist devices such as intra-aortic balloon pumps, blood scavenger systems, and blood gas determination machine; and insertion of intra-aortic balloon pump, intravenous catheters, arterial pressure monitoring catheters, pacemaker wires, and chest tubes are approved under Personal Supervision Harvest vein and artery for bypass conduit is approved under Direct Supervision. Opening and closing of incisions; removal of intra-aortic balloon pump, intravenous catheters, arterial pressure monitoring catheters, pacemaker wires, and chest tubes; insertion and removal of foley catheters and nasogastric tubes; initiate patient resuscitation procedures, including emergency re-entry sternotomy; and insertion and removal of skin closures	

PA – License # Supervising Physician – License #	Specialty, Practice Location	Reason for Review
	such as sutures or staples are approved under General Supervision. Operation of extracorporeal circuits is not approved as it is not within the Board's purview to grant this privilege.	
Robert Louis Courtox, PA00260 Andrew C. Tsen, MD20029	CDS, Portland CVS, Portland	Primary Supervising Physician
Committee Recommendation:	Approve Andrew C. Tsen, MD, as a supervising physician for Robert Louis Courtox, PA, per submitted Practice Description with no prescription privileges and the following amendments: Operate various assist devices such as intra-aortic balloon pumps, blood scavenger systems, and blood gas determination machine; and insertion of intra-aortic balloon pump, intravenous catheters, arterial pressure monitoring catheters, pacemaker wires, and chest tubes are approved under Personal Supervision Harvest vein and artery for bypass conduit is approved under Direct Supervision. Opening and closing of incisions; removal of intra-aortic balloon pump, intravenous catheters, arterial pressure monitoring catheters, pacemaker wires, and chest tubes; insertion and removal of foley catheters and nasogastric tubes; initiate patient resuscitation procedures, including emergency re-entry sternotomy; and insertion and removal of skin closures such as sutures or staples are approved under General Supervision. Operation of extracorporeal circuits is not approved as it is not within the Board's purview to grant this privilege.	
Jonathan Brady Miller, PA01356 Daniel R. Fear, MD19356	OTO, Grants Pass OTO, Grants Pass	Primary Supervising Physician
Committee Recommendation:	Approve Daniel R. Fear, MD, as a supervising physician for Jonathan Brady Miller, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Nasal Endoscopy and Flexible Nasal Laryngoscopy are approved under Direct Supervision.	
Paul Dennis Wacek, PA01087 Howard Kim Song, MD25264	CVS, Portland CVS, Portland	Primary Supervising Physician
Committee Recommendation:	Approve Howard Kim Song, MD, as a supervising physician for Paul Dennis Wacek, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Thoracentesis is approved under General Supervision. Chest thoracotomy is revised to read chest tube insertion and approved under General Supervision.	
Stuart Sharp, PA00984 Frederic J. Cole, Jr, MD26390	TRS, Portland TRS, Portland	Primary Supervising Physician
Committee Recommendation:	Approve Frederic J. Cole, Jr, MD, as a supervising physician for Stuart Sharp, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: The following are approved under Direct Supervision: Harvesting vein and arteries for bypass conduit, insertion of chest tubes, and insertion of intravenous and arterial catheters, excluding Swan-Ganz catheters. As above mentioned physician assistant has never worked under the supervision of above mentioned physician, the Board required chart review is a minimum of 50% of charts for the first 30 days, 30% for the next 60 days, and 20% for the next 90 days. After six months, reduce chart review to 10% of charts per month or no less than 10 charts per month.	

PA – License # Supervising Physician – License #	Specialty, Practice Location	Reason for Review
Paula Dietsch Kuiper, PA00475 William B. Long, III, MD13786	TRS, Portland TRS, Portland	Primary Supervising Physician
Committee Recommendation:	Approve William B. Long, III, MD, as a supervising physician for Paula Dietsch Kuiper, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Needle thoracostomy; insertion of intravenous and arterial catheters including swan-ganz catheters; insertion of intra-aortic balloon pump (IABP); chest tube placement; thoracentesis; pacemaker evaluation, interrogation and reprogramming; harvest vein and arteries for bypass conduit; and bone marrow aspiration and biopsy are approved under general supervision. As above mentioned physician assistant has never worked under the supervision of above mentioned physician, the Board required chart review is a minimum of 50% of charts for the first 30 days, 30% for the next 60 days, and 20% for the next 90 days. After six months, reduce chart review to 10% of charts per month or no less than 10 charts per month.	
Scott Patrick Sherry, PA00859 Kelly Gubler, DO23244	TRS, Portland TRS, Portland	Secondary Supervising Physician
Committee Recommendation:	Approve Kelly Gubler, DO, as a supervising physician for Scott Patrick Sherry, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Needle thoracostomy, Swan-Ganz and central venous catheter, and chest tube placement are approved under Direct Supervision. Conscious sedation is not approved pending the fulfillment of the following criteria, pursuant to the Board's decision July 9, 2004: physician assistant must receive hospital privileges, supervising physician shall request that the hospital provide the Board with documentation that physician assistant has received these privileges; physician assistant may only perform conscious sedation at the hospital which granted conscious sedation certification and privilege; physician assistant may only perform conscious sedation under Direct Supervision of the supervising physician or the physician's assigned agent.	
Diana Elaine Brewer, PA01336 Tibor Kovacsovics, MD24797	HEM/ONC, Portland HEM/ONC, Portland	Primary Supervising Physician
Committee Recommendation:	Approve Tibor Kovacsovics, MD, as a supervising physician for Diana Elaine Brewer, PA, per submitted Practice Description with Emergency Administration, Schedule III-V prescription privileges and the following amendments: Emergency administration of Fentanyl is not approved pending further information from the supervising physician regarding the use of this drug on an emergent basis. Emergency administration of Dilaudid, Morphine, and Demerol are approved. Lumbar puncture- diagnosis and lumbar puncture with chemotherapy instillation are approved under Personal Supervision. Bone marrow biopsy and aspiration and omya reservist - diagnostic tap with/without chemotherapy are approved under Direct Supervision.	

PA – License # Supervising Physician – License #	Specialty, Practice Location	Reason for Review
Kristine J. Windom, PA00978 David K. Winchester, MD14105	U, Portland U, Portland	Primary Supervising Physician
Committee Recommendation:	Approve David K. Winchester, MD, as a supervising physician for Kristine J. Windom, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Biofeedback therapy for incontinence is not approved pending submission of documentation of Ms. Windom's training in this procedure and documentation of performance of this procedure by other providers within this practice. Ultrasounds: bladder for post void residual, prostate and scrotal, are approved under general supervision. As above mentioned physician assistant has never worked under the supervision of above mentioned physician, the Board required chart review is a minimum of 50% of charts for the first 30 days, 30% for the next 60 days, and 20% for the next 90 days. After six months, reduce chart review to 10% of charts per month or no less than 10 charts per month.	
Kelly Mahara Bartholomew, PA00693 David Brian Lashley, MD18826	U, Portland U, Portland	Primary Supervising Physician
Committee Recommendation:	Approve David Brian Lashley, MD, as a supervising physician for Kelly Mahara Bartholomew, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Lysis of penile adhesions is approved under direct supervision.	
Debra Gay Robbins, PA00888 Katherine Davis, DO26219	GYN, Medford FP, Medford	Primary Supervising Physician
Committee Recommendation:	Approve Katherine Davis, DO, as a supervising physician for Debra Gay Robbins, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: IUD insertion, endometrial biopsy, colposcopy with biopsy and intrauterine insemination are approved under personal supervision. IUD removal with string visible is approved under general supervision. As above mentioned physician assistant has never worked under the supervision of above mentioned physician, the Board required chart review is a minimum of 50% of charts for the first 30 days, 30% for the next 60 days, and 20% for the next 90 days. After six months, reduce chart review to 10% of charts per month or no less than 10 charts per month.	
Dana Kathryn Rubin, PA00420 Connie Sue Dimarco, MD26386	GYN, Springfield GYN, Springfield	Primary Supervising Physician
Committee Recommendation:	Approve Connie Sue Dimarco, MD, as a supervising physician for Dana Kathryn Rubin, PA, per submitted Practice Description with Schedule II-V prescription privileges and the following amendments: Pessary fitting is approved under personal supervision.	
Brooke Mae Elliott, PA01332 George Allen, MD24825	IG, Vancouver IG, Vancouver, WA	Primary Supervising Physician
Committee Recommendation:	Approve George Allen, MD, as a supervising physician for Brooke Mae Elliott, PA, per submitted Practice Description with Schedule III-V prescription privileges and the following amendments: Skin testing for allergy (intradermal testing and patch testing) is approved under Personal Supervision. Supervising intravenous IG infusion pump; dose and schedule to be decided by physician is approved under Personal Supervision.	

It was moved and seconded that:

The Physician Assistant Committee recommends the Oregon Medical Board approve the above applicants and practice description changes.

First Review of Administrative Rules:

EXHIBIT B

OAR 847-050-0042 Registration

OAR 847-050-0043 Inactive Registration, and Reactivation from Inactive to Active

OAR 847-050-0063 Physician Assistant Committee

Committee members determined that the implementation of the above proposed rules in Exhibit B would create no fiscal impact.

The following suggestions were made:

847-050-0042 (1) Replace “registration” with “license” in two places and remove “satisfactorily.” The first sentence would then read, “The license renewal form must be complete and fee must be received in the Board office during regular business hours on or before December 31 of each odd-numbered year in order for the physician assistant’s license to be renewed for the next 24 months.”

847-040-0043 (1) Delete “and registered.”

847-050-0063 (1)(a) The Oregon Medical Board for the State of Oregon shall appoint one of its members and one physician. Add “The physician who is not a member of the Board must supervise a physician assistant.”

847-050-0063 (5) Replace “certification” with “licensure.”

NOTE 7/11/08: The Board determined that in order to achieve consistency in the Administrative Rules, the use of the term registration should be retained.

Procedure Summaries

EXHIBIT C

The Committee reviewed input from providers in Oregon regarding initial supervision levels for physician assistants for certain procedures in the specialties of orthopedics, cardiology and anesthesia.

It was moved and seconded that:

The Physician Assistant Committee recommends the initial supervision levels found in Exhibit C be used by staff as a guideline for temporary approval of requests submitted by physician/physician assistant teams.

ACTION PLAN: Add text to approval letters sent to physicians and physician assistants stating that a reduction in supervision level requires that a written request be submitted to the Board and subsequent Board approval.

Physician Assistant Scope of Practice

The committee reviewed an article from the American Academy of Physician Assistants regarding supervision of physician assistants. The discussion of supervision was tabled until the next meeting of the Committee.

ACTION PLAN: Place physician assistant scope of practice on the agenda for the September meeting of the Committee.

Selection of Committee Chair

Nathalie Johnson, MD, nominated Ted Ruback, PA-C, as the new Committee Chair.

It was moved and seconded that:

The Physician Assistant Committee appoint Ted Ruback, PA-C, as the new Committee Chair.

15 Minute Public Comment Session

Ted Ruback, PA-C, informed the Committee that an Oregon Society of Physician Assistants (OSPA) member is interested in acting as the liaison from the OSPA. Mr. Ruback will contact the OSPA to verify this and request that confirmation be sent to the Board.

Other Business

Bruce Carlson, MD, commented that rural physicians who wish to supervise more than four physician assistants may have a long waiting period for approval, as they must request that the Board waive the limit of four physician assistants. This can create access to care issues in rural and medically underserved populations.

It was moved and seconded that:

The Physician Assistant Committee recommends the Oregon Medical Board give staff the authority to grant temporary approval for supervision of more than four physician assistants to physicians serving federally designated underserved populations, or physicians in federally designated health professional shortage areas, federally designated medically underserved areas or areas designated as medically disadvantaged and in need of primary health care providers by the Director of Human Services or the Office of Rural Health.

NOTE 7/11/08: Gary LeClair, MD, and Douglas Kirkpatrick, MD, abstained.

Approval of Future Meeting Dates

September 11, 2008
December 11, 2008

The meeting was adjourned at 2:35 p.m.

Oregon Board of Medical Examiners Licensing Department

Memo

To: Physician Assistant Committee
From: Jen Lannigan, Licensing Coordinator
Date: May 19, 2008
Re: Application Question - Problems During Training

At the March 13, 2008 meeting of the Physician Assistant Committee, the PA Committee requested that staff research how other state Boards phrase questions to applicants regarding suspension and probation while in PA school. Board staff conducted a review of the language other state medical Boards use to inquire about problems a PA applicant for licensure may have had during a training program.

Summary of Application Language – Problems During Training – Other Medical Boards

27 of 42 states surveyed (**64%**) have no relevant screening question.

8 of 42 states (**19%**) inquire about action less serious than probation.

Terms used for action less serious than probation: counseling, letter of concern, advice, warning, caution, admonishment, reprimand, fine, modification, remediation, non-disciplinary sanction

Current Oregon PA Application Question:

Have you ever been restricted, suspended, terminated, requested to voluntarily resign, placed on probation, counseled, received a warning or been subject to any remedial or disciplinary action during a medically related training program?

Proposed Change:

Have you ever been restricted, suspended, terminated, requested to voluntarily resign, placed on probation, [~~counseled, received a warning~~] or been subject to any [~~remedial or~~] disciplinary action during a medically related training program?

Action Needed:

Recommend to the Board: approval of, amendment to, or rejection of the proposed change to the application question.

OREGON ADMINISTRATIVE RULES
CHAPTER 847, DIVISION 050 – OREGON MEDICAL BOARD
PROPOSED RULES CHANGES – JULY 2008
FIRST REVIEW BY THE BOARD

Proposed rule amendments ensure license renewal and reactivation requirements for physician assistants are consistent with those of other licensees of the Board. Rule amendments also bring rule language into conformity with ORS 677.540, which was amended as a result of Senate Bill 531 (2007).

847-050-0042**Registration**

(1) The registration renewal form and fee must be received in the Board office during regular business hours **and must be satisfactorily complete** on or before December 31 of each odd-numbered year in order for the physician assistant's registration to be renewed for the next 24 months. This application may also require the completion of a report by the supervising physician on the practice description and supervision arrangements.

(2) Upon failure to comply with section (1) of this rule, the ~~[registration shall]~~ **license will** automatically lapse as per ORS 677.228.

847-050-0043**Inactive Registration, and Reactivation from Inactive to Active**

(1) Any physician assistant licensed in this state and registered under ORS 677.525 who changes location to some other state or country, or who terminates employment with his/her supervising physician, ~~[shall]~~ **will** be listed by the Board as inactive. If the physician assistant wishes to resume active status **to practice in Oregon**, the physician assistant ~~[shall file an affidavit with the Board describing activities during the period of inactive status]~~ **must submit the Affidavit of Reactivation and processing fee, and satisfactorily complete the reactivation process before beginning active**

practice in Oregon .

(2) If, in the judgment of the Board, the conduct of the physician assistant has been such, during the period of inactive registration, that the physician assistant would have been denied a license if applying for an initial license, the Board may deny active registration.

(3) If a physician assistant in this state ceases to practice for a period of 12 or more consecutive months, the board in its discretion may require the person to prove to its satisfaction that the physician assistant has maintained the skills required to be a physician assistant. If there is reasonable cause to question that a physician assistant has not adequately maintained the skills required to be a physician assistant, the Board may require the physician assistant to do one or more of the following:

(a) Pass the examination given by the National Commission on the Certification of Physician Assistants (N.C.C.P.A.);

(b) Provide documentation of current N.C.C.P.A. certification;

(c) Document 25 hours of Category I continuing medical education acceptable to the Board for every year the licensee has ceased practice during the time their Oregon license was inactive or lapsed. Category I continuing education that meets N.C.C.P.A.'s recertification requirements would qualify as Board approved continuing education.

847-050-0063

Physician Assistant Committee

(1) There is created a Physician Assistant Committee which shall consist of five members. Members of the committee shall be appointed as follows:

(a) The Oregon Medical Board for the State of Oregon shall appoint one of its members and one physician. One of the two must supervise a physician assistant.

(b) ~~[The Oregon Society of Physician Assistants shall appoint two physician assistants.]~~ **The**

Oregon Medical Board shall appoint three physician assistants after considering persons nominated by the Oregon Society of Physician Assistants.

~~[(c) The State Board of Pharmacy shall appoint one pharmacist.]~~

(2) The term of each member of the committee shall be for three years. A member shall serve until a successor is appointed. If a vacancy occurs, it shall be filled for the unexpired term by a person with the same qualifications as the retiring member.

(3) If any vacancy under subsection (1) of this section is not filled within 45 days, the Governor shall make the necessary appointment from the category which is vacant.

(4) The committee shall elect its own chairperson with such powers and duties as the committee shall fix.

(5) A quorum of the committee shall be three members. The committee shall hold a meeting at least once quarterly and at such other times the committee considers advisable to review requests for prescription and dispensing privileges and to review applications for certification or renewal.

(6) The chairperson may call a special meeting of the Physician Assistant Committee upon at least 10 days' notice in writing to each member, to be held at any place designated by the chairperson.

(7) The committee members are entitled to compensation and expenses as provided in ORS 677.292.495.

ANESTHESIOLOGY

	NEW PA	EXPERIENCED PA
Procedure		
Arterial line change, placement and removal	P	D
Botulism injections	P	P
Cardioversion	P	D
Central line removal	D	D
Central venous line placement	P	D
Conscious sedation, pending PA receives hospital privileges; PA may only perform at the hospital which granted conscious sedation privilege and only under Direct	P	D
Electromyograms (EMG)-surface	P	D
Emergency Cricothyroidotomy	P	D
Emergency resternotomy	P	P
Fiberoptic bronchoscopy on intubated patients in Intensive Care Unit (ICU) only	P	D
Flexible bronchoscopy therapeutic on intubated patients only	P	D
Fluoroscopy radiologic guidance, not within the Board's purview to grant as privilege is granted through Radiologic Protection Services	P	D
Intrathecal pump management	P	D
IV infusion management-Physician must provide clarification of what will be used in the IV infusions before approval for supervision other than personal	P	G
Lumbar puncture	P	D
Paracentesis	P	D
Percutaneous tracheostomy	P	D
Post-operative neuraxial and regional infusion management	P	D
Pulmonary artery catheter insertion, management, and removal	P	D
Radiologic dye injection to test implantable pump function	P	D
Regional anesthesia - epidural, intrathecal, peripheral	P	D
Replacement of gastric and jejunal tubes	P	D
Sensory nerve testing	P	D
Spinal infusion pumps-refill and reprogram	P	D
Spinal stimulators-program	P	D
Spinal stimulators-reprogram	P	D
Thoracentesis	P	D
Thoracostomy/chest tube placement	P	D

Thoracostomy tube removal	P	G
Transesophageal echocardiography	P	D
Transthoracic echocardiography	P	D
Transvenous pacemaker insertion	P	D
Ultrasound guidance to facilitate nerve blocks and intrathecal pump management	P	D
Venous and arterial cutdown	P	D

CARDIOLOGY (including Thoracic and Cardiovascular Surgery)

	NEW PA	EXPERIENCED PA
Procedure		
Adenosine and dobutamine testing Pharmacologic stress testing	P	D
Administering local infiltrative anesthesia	P	D
Arterial catheter insertion Arterial Pressure monitoring catheter insertion Swanz Ganz catheter placement Pulmonary artery catheter removal	P	D
Arterial catheter removal Arterial line removal Swan Ganz catheter removal Pulmonary artery catheter removal	P	D
Arterial line placement	P	D
Arterial line removal	P	G
Arterial pressure monitoring catheter insertion	P	D
Central venous line placement	P	D
Central venous line removal	P	G
Chest tube placement Tube Thoracostomy	P	D
Chest tube removal	P	G
Coronary artery bypass conduit harvesting, including saphenous vein and radial artery	P	D
Diagnostic cardiac stress tests	P	D
Emergency intubation	P	G
Endotracheal intubation	P	G
Endotracheal tube removal	P	G
Exercise stress testing	P	D
Indwelling urinary catheter insertion	CORE	CORE
Initial interpretation of exercise stress test results	P	D
Initial interpretation of treadmill test results	P	D
Intra-aortic balloon pump insertion	P	P
Intra-aortic balloon pump monitoring	P	G
Intra-aortic balloon pump removal	P	D
Intravenous catheter insertion	P	G
IV line placement and removal	CORE	CORE
Lumbar punctures	P	D

Needle Thoracostomy	P	G
Nuclear stress testing	P	D
Operation of assist devices, intra-aortic balloon pump and blood scavenger systems	P	P
Pacemaker interrogation for checking electronic data to verify proper pacemaker function (evaluation and reprogramming)	P	D
Pacemaker setting adjustment	P	D
Pacing wire removal	P	D
Pharmacologic stress testing Adenosine and dobutamine testing	P	D
Reentry sternotomy	P	D
Stress echo testing	P	D
Swan Ganz catheter placement	P	D
Swan Ganz catheter removal	P	D
Thoracentesis	P	D
Tilt-table testing	P	P
Tracheostomy tube management, exchange or removal	P	D
Treadmill stress testing	P	D
Tube Thoracostomy Chest tube placement	P	D

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ORTHOPEDICS

	NEW PA	EXPERIENCED PA
Closed manipulations of the distal extremities	P	D
Closed reduction of metacarpal fracture dislocations	P	D
Closed reduction of metatarsal fractures	P	G
Closed reduction of midfoot fractures	P	D
Closed reduction of radius fractures	P	G
Closed reduction of ulna fractures	P	G
External fixator removal	P	G
Ilizarov Talor Spatial Frame removal	P	G
Management of fractures	G	G
Reduce closed fractures of the upper and lower extremities, not involving neurological or vascular injury, not to include the reduction of open fractures, pelvic fractures, spinal fracture/injury, or spine manipulation	P	G
Closed reduction of ankle fractures	P	D
Closed reduction of clavicle fractures	D	G
Closed reduction of digit fractures	D	G
Closed reduction of femur fractures	P	D
Closed reduction of fibula fractures	P	D
Closed reduction of foot fractures	P	D
Closed reduction of forearm fractures	P	D
Closed reduction of hand fractures	P	D
Closed reduction of humerus fractures	P	D
Closed reduction of patella fractures	G	G
Closed reduction of tibia fractures	P	D
Closed reduction of wrist fractures	P	D
Management of simple closed fractures including reduction, pending clarification regarding which locations of the body	D	G
Operation of C-arm fluoroscopy, beyond the Board of Medical Examiners' purview, under Board of Radiologic Technology	D	D
Percutaneous pin removal	D	G
Pin removal	G	G
Postoperative orders	G	G
Preoperative orders	G	G
Reduction of prosthetic hip dislocations	P	D
Reduction of simple fractures	D	G
Simple closed reductions of the distal extremities	D	G
Traction pin placement	D	G