

**OREGON BOARD OF MEDICAL EXAMINERS
PHYSICIAN ASSISTANT COMMITTEE MINUTES**

September 8, 2005

1500 SW 1st Ave Suite 620

Portland, Oregon 97201

Board Approved 10/7//05

Committee Approved 12/8/05

MEMBERS PRESENT

Dana Gray, PA, Chairperson
Randy Randolph, PA
Bruce Carlson, MD
Darrel Purkerson, RPh
Sheridan A. Thiringer, DO, Board Liaison

STAFF PRESENT

Kathleen Haley, Executive Director
Diana Dolstra, Licensing Administrator
Jennifer Lannigan, Licensing Coordinator
Candice Kramer, Physician Assistant Licensing Specialist

GUEST

Ted J. Ruback, MS, PA, Oregon Society of Physician Assistants (OSPA)

AGENDA

EXECUTIVE SESSION:

Update on Physician Assistants currently under Board investigation – Gary Stafford, Chief Investigator

Review application for unlimited licensure

Review Memorandum from Assistant Attorney General – Kathleen Haley

PUBLIC SESSION:

Approve Minutes from the June 9, 2005 Committee meeting.

Proposed administrative rule changes – Final Review – OAR 847-050-0029 (3) – Locum Tenens

Review amendments to ORS 183.333, agencies that appoint advisory committees to work on rules must ask the advisory committee for recommendations on whether the rules "will have a fiscal impact, what the extent of that impact will be and whether the rule will have a significant adverse impact on small businesses".

Proposed administrative rule changes – First Review

OAR 847-050-0026 Limited License, Special; OAR 847-050-0041 Prescription Privileges; OAR 847-050-0065 Duties of the Committee

Discussion item: Is there a need for a change of the definition of "Agent" as defined by OAR 847-050-0010(1)? – Sheridan Thiringer, DO

Discussion item – Shall the phrase “new hire PA” be removed or further defined under Chart Review, page five of the practice description?

Discussion item – What is the desired action, if a physician assistant applicant or his/her supervising physician fails the Physician Assistant/Supervising Physician Applicant Questionnaire on the Medical Practice Act & Administrative Rules more than three times?

Discussion item – May staff approve secondary supervisors on a permanent level rather than temporarily as is the current standard? – Sheridan Thiringer, DO

Discussion item – Shall the Board eliminate Limited License Postgraduate as a temporary licensure option for physician assistants as the PANCE exam is administered quarterly?

Discussion item – Development of Physician Assistant Advisory Committee mission statement – Randy Randolph, PA

Discussion item – New Request for Dean’s Letter form– Randy Randolph, PA

Approval of new applicants and practice changes needing Committee review

Approval of new licensee consent agenda

Approval of consent agenda

Approval of Limited Licenses, Special

Approval of physician assistant students training in Oregon

Approve future meeting dates

WORKING LUNCH

Dana Gray, PA, Chairperson, called the meeting to order at 9:30 a.m.

EXECUTIVE SESSION:

UPDATE ON PHYSICIAN ASSISTANTS CURRENTLY UNDER BOARD INVESTIGATION – GARY STAFFORD, CHIEF INVESTIGATOR

REVIEW APPLICATION FOR UNLIMITED LICENSURE

REVIEW MEMORANDUM FROM ASSISTANT ATTORNEY GENERAL – KATHLEEN HALEY, EXECUTIVE DIRECTOR

REVIEW REQUEST FOR PRACTICE DESCRIPTION REVISION

**TAB AA
EXECUTIVE SESSION**

PUBLIC SESSION:

REVIEW APPLICATION FOR UNLIMITED LICENSURE

TAB BB
EXECUTIVE SESSION

It is the consensus of the Physician Assistant Advisory Committee that Client 32982 shall be referred to the October 7, 2005 Board meeting for review and then to the Oregon Board of Medical Examiners Investigative Committee to make the final decision about licensure.

15 MINUTE PUBLIC COMMENT

It was moved and seconded that

THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE WILL ALLOW FOR A SESSION FOR PUBLIC COMMENT TOTALING FIFTEEN MINUTES AT THE BEGINNING OF PUBLIC SESSION AGENDA BUSINESS.

Members present voted unanimously to pass the motion.

No public comment made.

APPROVE THE MINUTES FROM THE JUNE 8, 2005, PHYSICIAN ASSISTANT ADVISORY COMMITTEE MEETING

It was moved and seconded that

THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE APPROVES THE MINUTES OF THE JUNE 8, 2005 PHYSICIAN ASSISTANT COMMITTEE MEETING.

Members present voted unanimously to pass the motion.

**PROPOSED ADMINISTRATIVE RULE CHANGES – FINAL REVIEW
OAR 847-050-0029 (3) – LOCUM TENENS**

EXHIBIT A

It was moved and seconded that

THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE PROPOSED ADDITION TO ORS 847-050-0029 (3) AS SUBMITTED.

Members present voted unanimously to pass the motion.

HB 3238 SPECIFIES THAT AGENCIES THAT APPOINT ADVISORY COMMITTEES TO WORK ON RULES MUST ASK THE ADVISORY COMMITTEE FOR RECOMMENDATIONS ON WHETHER THE RULES “WILL HAVE A FISCAL IMPACT, WHAT THE EXTENT OF THAT IMPACT WILL BE AND WHETHER THE RULE WILL HAVE A SIGNIFICANT ADVERSE IMPACT ON SMALL BUSINESSES”.

EXHIBIT B

Ms. Haley explained that the Governor appointed a new regulatory streamlining professional who brought the bill forward. She further explained that the main issue of fiscal impact is outlined in the second paragraph; that small businesses or small medical practices would not be adversely impacted by the Board's rules. She further clarified that the Committee would need to comment specifically on the fiscal piece as the Committee reviewed rules.

The Committee requested that staff research what defines a small business as well as what mechanisms are to be used to establish impact. The Committee also directed staff to develop an outline highlighting salient points to consider regarding the fiscal impact of administrative rules.

**PROPOSED ADMINISTRATIVE RULE CHANGES: FIRST REVIEW
OAR 847-050-0026 LIMITED LICENSE, SPECIAL; OAR 847-050-0041 PRESCRIPTION
PRIVILEGES; OAR 847-050-0065 DUTIES OF THE COMMITTEE *EXHIBIT C***

It was moved and seconded that

**THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF
MEDICAL EXAMINERS APPROVE THE PROPOSED CHANGES TO OAR 847-050-0026, OAR
847-050-0041, AND OAR 847-050-0065 AS SUBMITTED.**

Members present voted unanimously to pass the motion

DEFINITION OF "AGENT" AS DEFINED BY OAR 847-050-0010(1) *EXHIBIT D*

Dr. Thiringer expressed concern that the issue of "agent" does need to be addressed, but that he had no suggestions at this time.

Ms. Haley suggested that an article for the Oregon Board of Medical Examiners newsletter detailing the agent's responsibility in supervision of a physician assistant would be helpful.

The Committee concurred with Ms. Haley's suggestion.

It was moved that

**THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF
MEDICAL EXAMINERS APPROVE ADDING THE "AGENT" DISCUSSION TO THE DECEMBER
2005 MEETING AGENDA AND THAT THE COMMITTEE COMES UP WITH A POLICY
STATEMENT THAT WOULD BE APPROPRIATE PENDING ANY LEGISLATIVE ACTION THAT
MAY BE NECESSARY.**

Motion died for lack of second

It was moved and seconded that

**THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF
MEDICAL EXAMINERS APPROVE THE COMMITTEE'S DRAFTING OF AN AWARENESS
STATEMENT ACKNOWLEDGING THAT PRACTICES WHERE THERE ARE A NUMBER OF
PHYSICIAN ASSISTANTS AND MANY PHYSICIANS PRESENT, WITH APPROPRIATE LEVEL
OF SUPERVISION, WOULD BE CONSIDERED APPROPRIATE MEDICAL CARE. HOWEVER,
THERE MAY BE A REGULATORY ISSUE WITH THIS THAT THE COMMITTEE SHOULD
EXPLORE AS TO WHETHER THE COMMITTEE NEEDS TO REQUEST LEGISLATION TO
FURTHER CLARIFY THIS.**

Members present voted unanimously to pass the motion

THE PHRASE “NEW HIRE PA”, CHART REVIEW, PAGE FIVE, PRACTICE DESCRIPTION

It was moved and seconded that

THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE LEVEL OF CHART REVIEW FOR AN “EXPERIENCED OREGON PA AND PREVIOUSLY BOARD APPROVED SUPERVISING PHYSICIAN” IF A “NEW HIRE PA” AND SUPERVISING PHYSICIAN HAVE BEEN IN THE SAME PRACTICE FOR AT LEAST SIX MONTHS.

Members present voted unanimously to pass the motion

FAILURE OF THE PHYSICIAN ASSISTANT/SUPERVISING PHYSICIAN APPLICANT QUESTIONNAIRE ON THE MEDICAL PRACTICE ACT & ADMINISTRATIVE RULES

Staff presented a copy of OAR 847-020-0170 (8) which outlines what the action will be if a MD/DO/DPM applicant fails an open-book exam three times, application must be reviewed by the Committee, and the applicant must attend an informal interview with a Board member, Board investigator, and/or Medical Director to discuss their failures, before being given a fourth and final attempt to pass the exam. If the applicant does not pass the exam on the fourth attempt, they may be denied licensure. The Committee reviewed the rule. Mr. Gray stated that he felt that physician assistants and supervising physicians should have similar requirements.

It was moved and seconded that

THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE CREATION OF AN PHYSICIAN ASSISTANT LICENSING ADMINISTRATIVE RULE SIMILAR TO OAR 847-020-0170 (8).

Members present voted unanimously to pass the motion

PERMANENT APPROVAL OF SECONDARY SUPERVISORS BY STAFF

It was moved and seconded that

THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS DELEGATE STAFF TO PERMANENTLY APPROVE SECONDARY SUPERVISING PHYSICIANS WHO SUBMIT PRACTICE DESCRIPTIONS THAT ARE IDENTICAL TO OTHER CURRENT PRACTICE DESCRIPTIONS OF THE PA.

Members present voted unanimously to pass the motion

LIMITED LICENSE POSTGRADUATE AS A TEMPORARY LICENSURE OPTION FOR PHYSICIAN ASSISTANTS

Mr. Gray states that one of the reasons that the Limited License Postgraduate (LLPG) was offered in the mid-eighties was because physician assistants could not take the exam until after they had graduated. Mr. Gray expressed concern that eliminating this temporary licensure, regardless of the year-round administration, would create hardship on getting employment.

Staff explained that the PANCE exam can be taken a week after graduation and that it can be taken any time within each quarter.

Mr. Randolph indicated that there are a number of students that don't want to take the exam immediately after graduation from a PA program.

Staff explained that physician assistants are applying for the LLPG much less frequently since the PANCE exam became available on a year-round basis.

Mr. Randolph stated that the Board has to allow physician assistants an opportunity to be able to practice before they get certified. He further indicated that there are only two states that do not allow licensure prior to certification. He stated that allowing physician assistants temporary licensure without certification does not jeopardize public safety.

Mr. Purkerson noted that in his profession a pharmacist must be licensed and certified before s/he can practice.

The Committee decided to take no action on the issue at this time.

PHYSICIAN ASSISTANT ADVISORY COMMITTEE MISSION STATEMENT - RANDY RANDOLPH, PA

Mr. Randolph shared mission statements from other state Boards and their respective Committees. He also presented the mission statement from the Oregon Board. He pointed out that he felt that the key statement of most mission statements was the issue of quality care. He shared the 1996 Institute of Medicine's definition of quality of care as "The degree to which health services for individuals in populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge". He asked the Committee if they wanted to create their own mission statement that would take the BME's mission statement into account. Finally, he presented the following mission statement for the Committee's possible consideration: "The mission of the Physician Assistant Committee is to protect the health, safety, and well-being of Oregon citizens by regulating the practice of medicine in an objective manner that promotes quality of care through the effective utilization of physician assistants".

Dr. Carlson suggested that the statement be reworded to say: "The mission of the Physician Assistant Committee is to support the [Oregon] Board of Medical Examiners in their mission of protecting the health, safety, and well-being of Oregon citizens by regulating the practice of medicine in an objective manner that promotes quality of care through the effective utilization of physician assistants".

Dr. Thiringer wondered if the statement would create problems with other entities such as hospitals.

Ms. Haley stated that the effective utilization portion of the proposed statement is beyond the duties of the Committee; therefore, that phrase could not be a part of any possible mission statement. She outlined the duties of the Committee including reviewing applications, reviewing applications for dispensing, and making recommendations to the Board regarding these applications.

Dr. Thiringer stated that the Board would not want to fight the battle of effective utilization and that the Board would never approve a mission statement that included a reference to utilization. He elaborated that to do so would change the role of the Board.

Ms. Haley concurred with Dr. Thiringer stating that including a piece on effective utilization would require statutory change.

Dr. Carlson suggested substituting the words "effective utilization" with "safe utilization".

Mr. Randolph summarized Ms. Haley's statements by confirming that the Committee could not create a mission statement as described above because the Committee is not given authority to do so.

Ms. Haley clarified that the Committee is not charged to advocate for effective utilization; that perhaps it would be the charge of a professional association, but not the Committee.

Mr. Gray stated that the Committee's mission statement is, by default, the Board's mission statement as the Committee is a Committee of the Board.

Mr. Randolph stated that when he first asked the question about a mission statement that he did not realize that the Board had a mission statement, but that he had since learned otherwise. He offered to rework the mission statement he presented to be more consistent with statute and present the new version at the next meeting, if the Committee so desired. He stated that, if nothing else, a discussion about a mission statement was an important exercise to keep the Committee's focus on that which they have been charged to do. He stated that it is important to remain mindful of the Board's mission statement as the Committee proceeds with future business.

The Committee decided to take no action on the issue of a Physician Assistant Advisory Committee mission statement at this time.

REQUEST FOR DEAN'S LETTER FORM - RANDY RANDOLPH, PA

EXHIBIT E

Mr. Randolph questioned whether or not a discrepancy that he recently pointed out to staff between the physician assistant application form and the Request for Dean's Letter form had been the cause the change in the Dean's Letter form. The discrepancy that he noted was that the previous Dean's Letter form did not use similar language as the physician assistant application regarding suspension and/or disciplinary action.

Staff explained that the new form was created in the likeness of the other licensing programs' education and training verification forms in an effort to create consistency and efficiency throughout the Licensing programs.

Mr. Randolph expressed no concern with the streamlining effort, but did express concern regarding questions 3, 4, and 5, e.g., "Were there any concerns regarding the student's judgment, knowledge base, emotional stability, drugs, moral, and ethical character?" Mr. Randolph explained that Pacific University's program has an academic review process that is proactive about bringing in any students who may have such problems in order to remediate the issue(s) prior to graduation, and he felt that the questions on the Dean's Letter form were not pertinent because of this remediation.

Ms. Haley suggested the addition of the word "ongoing" to questions 3, 4, and 5. She explained; however, that these questions must be asked because the Board needs to know as it is a safety issue for the public.

Mr. Randolph said that it would be easier to answer the questions if words like "unremediated" or "unresolved" were added to clarify questions 3, 4, and 5.

Staff indicated that, regardless of remediation, institutions that respond regarding applicants in the Board's other programs provide detailed information regarding applicants' education and that these details are required in order to ensure public safety.

Mr. Purkerson remarked that other professions may be interested in using similar forms for their graduates.

Staff explained that there have been recent applicants who did have successful remediation during their programs, but nonetheless, the actions that required remediation spoke to the applicant's professionalism and ethical behavior that the Board found to be problematic during the licensing process.

The Committee decided to take no action on the issue at this time.

APPROVAL OF NEW LICENSES AND PRACTICE CHANGES REQUIRING COMMITTEE REVIEW

PA – License # Supervising Physician – License #	Specialty, Primary Practice	Reason for Review
---	--------------------------------	-------------------

Kurt L. Atkin, PA00563 John Sattenspiel, MD12391	FP, Salem FP, Salem	Primary Supervising Physician
---	------------------------	-------------------------------

Committee Recommendation:

Approve John Sattenspiel, MD, as a supervising physician for Kurt L. Atkin, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Emergency administering authority is not approved as physician will be available to issue a verbal and/or standing order.

Jeffrey T. Caba, PA00786 Michael N. Harris, MD12273	I, Bend I, Bend	revise the practice description
--	--------------------	---------------------------------

Committee Recommendation:

Approve the request to add conducting stress echocardiograms, adenosine nuclear tests, and dobutamine stress tests to the practice description of Jeffrey T. Caba, PA, under the Direct Supervision of Michael N. Harris, MD.

James A. Callis, LL15374
Rajaa M. Zayoud, MD23964

FP, Nyssa
FP, Nyssa

New Physician Assistant

Committee Recommendation:

Approve James A. Callis as a physician assistant in the State of Oregon under the supervision of Rajaa M. Zayoud, MD, per submitted practice description with Schedule II - V prescription privileges and the following amendments: Emergency dispensing is not approved as Dr. Zayoud is not registered with the Board as a Dispensing Physician. Dr. Zayoud must register with the Board as a Dispensing Physician before requesting dispensing privileges for a physician assistant supervisee.

Garnie Jo Carter-Powell, PA00691
Susan M. Gorman, MD22835

FP, Redmond
OBG, Bend

Secondary Supervising Physician

Committee Recommendation:

Approve Susan M. Gorman, MD, as a supervising physician for Garnie Jo Carter-Powell, PA, per the submitted practice description with Schedule III-V prescription privileges and the following amendments: None.

Jennifer H. Christiansen, PA00954
Jim A. Gosewehr, MD19412

ONC, Portland
GYN, Portland

Secondary Supervising Physician

Committee Recommendation:

Approve Jim A. Gosewehr, MD, as a supervising physician for Jennifer H. Christiansen, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Colposcopy with endometrial/cervical biopsies and vulvar biopsies are approved under Personal Supervision. Pursuant to OAR 847-050-0010 (8) (c), "Personal Supervision means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant." Dr. Gosewehr must provide the Board with documentation of training and a letter of competency for review and approval before Ms. Christiansen may receive Board approval to perform the procedure(s) under supervision other than personal. The letter should include the frequency and quantity of the aforementioned procedures that have been performed by both Dr. Gosewehr as well as Ms. Christiansen.

Jennifer H. Christiansen, PA00954
Lisa L. McCluskey, MD21717

ONC, Portland
OBG, Portland

Secondary Supervising Physician

Committee Recommendation:

Approve Lisa L. McCluskey, MD, as a supervising physician for Jennifer H. Christiansen, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Colposcopy with endometrial/cervical biopsies and vulvar biopsies are approved under Personal Supervision. Pursuant to OAR 847-050-0010 (8) (c), "Personal Supervision means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant." Dr. McCluskey must provide the Board with documentation of training and a letter of competency for review and approval before Ms. Christiansen may receive Board approval to perform the procedure(s) under supervision other than personal. The letter should include the frequency and quantity of the aforementioned procedures that have been performed by both Dr. McCluskey as well as Ms. Christiansen.

Carla Curtis-Klinger, PA00875
Melanie Hart, MD20987

I, Portland
I, Portland

Secondary Supervising Physician

Committee Recommendation:

Approve Melanie Hart, MD, as a supervising physician for Carla Curtis-Klinger, PA, per the submitted practice description with Schedule III-V prescription privileges and the following amendments: The phrase "order and interpret diagnostic studies" is revised to read "order and initial interpretation of diagnostic studies". The words "routine" and "non-routine" are not approved. Schedule II-V privileges are requested on page two of practice description form; however, "Delineated Scope of Practice" addendum states "except FDA Schedule II narcotics" under 5(a). Pending clarification of this discrepancy from Dr. Hart, Schedule II-V privileges are not approved.

Mark Christopher Davis, LL15281
Richard A. Rubinstein, Jr, MD15207

ORS, Portland
ORS, Portland

New Physician Assistant

Committee Recommendation:

Approve Mark Christopher Davis as a physician assistant in the State of Oregon under the supervision of Richard A. Rubinstein, Jr, MD, per submitted practice description with Schedule II - V prescription privileges and the following amendments: Reduction of simple fractures is approved under Personal Supervision. Pursuant to OAR 847-050-0010 (8), "Personal Supervision means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant." Dr. Rubinstein must provide the Board with documentation of training and a letter of competency for review and approval before Mr. Davis may receive Board approval to perform the procedure(s) under supervision other than personal or direct. The letter should include the frequency and quantity that the above-mentioned procedures have been performed by Mr. Davis as well as Dr. Rubinstein.

Jurandir Bezerra De Menezes Jr., LL15590
Juan R. Oyarzun, MD22709

CDS, Corvallis
CDS, Corvallis

New Physician Assistant

Committee Recommendation:

Approve Jurandir Bezerra De Menezes Jr. as a physician assistant in the State of Oregon under the supervision of Juan R. Oyarzun, MD, per submitted practice description with Schedule II - V prescription privileges and the following amendments: Removal of center/arterial lines percutaneously and removal of Swan Ganz catheter are approved under Personal Supervision. Pursuant to OAR 847-050-0010 (8), "Personal Supervision" means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant. Dr. Oyarzun must provide the Board with documentation of training and a letter of competency for review and approval before Mr. De Menezes, Jr. may receive Board approval to perform the procedure(s) under supervision other than personal or direct. The letter should include the frequency and quantity that arterial and venous conduit for grafting is performed by both Dr. Oyarzun as well as Mr. De Menezes.

Cassandra G. Dixon, PA01012
Eddy Young, MD18357

C, Bend
C, Bend

revise the practice description

Committee Recommendation:

Approve the request to add "perform and supervise diagnostic cardiac stress tests to include supervision of adenosine, dobutamine, exercise stress testing, and tilt-table testing" to the practice description of Cassandra G. Dixon, PA, under the General Supervision of Eddy Young, MD.

Caroline M. Fung, PA00763
Paul Tseng, MD16438

GYN, Portland
GYN, Portland

Secondary Supervising Physician

Committee Recommendation:

Approve Paul Tseng, MD, as a supervising physician for Caroline M. Fung, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: colposcopy with cervical/endometrial/vaginal/vulvar biopsies; paracentesis; and Port-a-cath removal are approved under Personal Supervision. Pursuant to OAR 847-050-0010 (8) (c), "Personal Supervision means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant." Dr. Tseng must provide the Board with documentation of training and a letter of competency for review and approval, before Ms. Fung may receive Board approval to perform the procedure(s) under supervision other than personal. The letter should include the frequency and quantity of the aforementioned procedures that have been performed by both Dr. Tseng as well as Ms. Fung.

Dean Kao, LL15524
Michael L. Oglesbay, DO24099

FP, Hermiston
FP, Hermiston

New Physician Assistant

Committee Recommendation:

Approve Dean Kao as a physician assistant in the State of Oregon under the supervision of Michael L. Oglesbay, DO, per submitted practice description with Schedule II - V prescription privileges and the following amendments: Emergency administering is not approved as the use of sample medications does not require emergency administration authority.

Patricia Keith-Moore, PA00256
Kevin R. Smith, MD18891

P, Portland
P, Portland

Revise the Practice Description

Committee Recommendation:

Approve the request for additional medical/surgical services to the practice description of Patricia A. Keith-Moore, PA, under the supervision of Kevin R. Smith, MD, with Schedule III-V prescription privileges and the following amendments: electroconvulsive therapy is approved under Personal Supervision. Pursuant to OAR 847-050-0010 (8) (c), "Personal Supervision means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant." Dr. Smith must provide the Board with documentation of training and a letter of competency for review and approval, before Ms. Keith-Moore may receive Board approval to perform the procedure(s) under supervision other than Personal.

Michael Krueger, PA01022
Charles Wong, MD14849

I, Portland
I, Gresham

Revise the Practice Description

Committee Recommendation:

Request to add emergency dispensing authority is not approved as Dr. Wong is not registered with the Board as a Dispensing Physician. Emergency administration is not approved as physician is available to issue a verbal and/or standing order.

Kenneth D. Long, PA00535
Matthew M. Eschelbach, DO17196

ORS, Redmond
EM, Redmond

Secondary Supervising Physician

Committee Recommendation:

Approve Matthew M. Eschelbach, DO, as a supervising physician for Kenneth D. Long, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Emergency administration authority is not approved as physician is available to issue a verbal and/or standing order.

Margaret Lovell, LL15527
Regan Mon Look, MD20544

ONC, Portland
ONC, Portland

New Physician Assistant

Committee Recommendation:

Approve Margaret Lovell as a physician assistant in the State of Oregon under the supervision of Regan Mon Look, MD, per submitted practice description with Schedule II - V prescription privileges and the following amendments: Emergency administering is not approved as physician will be available to issue a verbal and/or standing order.

George Harris Miller, PA00776
Phillip Shapiro, MD14234

P, Portland
P, Portland

Primary Supervising Physician

Committee Recommendation:

Approve Phillip Shapiro, MD, as a supervising physician for George Harris Miller, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: As Dr. Shapiro has never been Board approved to supervise a physician assistant, the 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, chart review may be reduced to 10% of charts, no less than 10 charts per month.

Joel P. Myers, LL15587
Joshua C.H. Cook, DO20329

EM, Prineville
EM, Prineville

New Physician Assistant

Committee Recommendation:

Approve Joel P. Myers as a physician assistant in the State of Oregon under the supervision of Joshua C.H. Cook, DO, per submitted practice description with Schedule III - V prescription privileges and the following amendments: Emergency administering is not approved as on-site physician will be available to issue a verbal and/or standing order.

Sean Pearce, PA00612
Peter E. Goodkin, MD09756

D, Clackamas
D, Clackamas

revise the practice description

Committee Recommendation:

Approve the request to add "use of Candela Lasers" to the practice description of Sean Pearce, PA, under the General Supervision of Peter E. Goodkin, MD. Botox Cosmetic Injections is approved under Personal Supervision as criteria determined per the Board's approval 1/14/05, "only after the PA has observed at least 10 procedures, performed at least 10 procedures under Personal Supervision" has not been fulfilled.

Renee Pype, PA00506
John R. Swartzel, MD11004

I, Portland
I, Portland

revise the practice description

Committee Recommendation:

Approve the request to add running a spinal assessment clinic with evaluation of persons with acute lumbar sacral pain with or without radiculopathy; make plan; and refer as needed to the practice description of Renee Pype, PA, under the General Supervision of John R. Swartzel, MD.

Cindy Quale, PA00465
Kathy A. Crispell, MD17237

C, Clackamas
C, Clackamas

revise the practice description

Committee Recommendation:

Approve the request to add "perform exercise stress tests and make initial interpretation of their results" to the practice description of Cindy Quale, PA, under the General Supervision of Kathy A. Crispell, MD.

Laura Deesha Ramme, LL15547
M. Alan Martin, MD20553

CDS, Portland
CDS, Portland

New Physician Assistant

Committee Recommendation:

Approve Laura Deesha Ramme as a physician assistant in the State of Oregon under the supervision of M. Alan Martin, MD, per submitted practice description with Schedule II - V prescription privileges and the following amendments: Chest tube placement and removal; thoracentesis; pacemaker evaluation, interrogation and reprogramming; needle thoracostomy; removal of endotracheal tubes; insert and remove intravenous and arterial catheters, including Swan-ganz catheters; insert and remove intra-aortic balloon pump; operate various assist devices such as, artificial heart devices, intra-aortic balloon pumps, blood scavenger systems and blood gas determination machines are approved under Personal Supervision. Harvest vein and arteries for bypass conduit is approved under Direct Supervision. Conscious sedation is not approved, pending receipt, PA Committee review, and Board approval of hospital credentialing. Pursuant to OAR 847-050-0010 (8), Personal Supervision means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant. Direct Supervision means the supervising physician or designated agent must be in the facility when the physician assistant is practicing. Dr. Martin must provide the Board with documentation of training and a letter of competency for review and approval before Ms. Ramme may receive Board approval to perform the procedure(s) under supervision other than personal or direct. The letter should include the frequency and quantity that the aforementioned procedures have been performed by Ms. Ramme as well as Dr. Martin.

Charles A. Roberts, PA00257
Randy Reese, MD17594

FP, Veneta
FP, Veneta

Primary Supervising Physician

Committee Recommendation:

Approve Randy Reese, MD, as a supervising physician for Charles A. Roberts, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Emergency administration authority is not approved as physician is available to issue a verbal and/or standing order. As Dr. Reese has never been Board approved to supervise a physician assistant, the 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, chart review may be reduced to 10% of charts, no less than 10 charts per month.

JoDee R. Rundall, PA00912
Gary A. Goby, MD08601

FP, Albany
FP, Albany

revise the practice description

Committee Recommendation:

Emergency dispensing authority is not approved as Dr. Goby is not registered with the Board as a Dispensing Physician. Emergency administration is not approved as physician is available to issue a verbal and/or standing order.

Mary Pat Sauer, PA00633
Jonathan G. Hill, MD13534

CDS, Portland
CDS, Portland

Secondary Supervising Physician

Committee Recommendation:

Approve Jonathan G. Hill, MD, as a supervising physician for Mary Pat Sauer, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Chest tube placement and removal; thoracentesis; removal of endotracheal tubes; harvest vein and arteries for bypass conduit; insert and remove intravenous and arterial catheters, including swan-ganz catheters; insert and removal of intra-aortic balloon pump; and operate artificial heart devices, intra-aortic balloon pumps, and blood gas determination machines are approved under Direct Supervision. Pacemaker evaluation, interrogation and reprogramming is approved under Personal 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; 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. Pursuant to OAR 847-050-0010 (8) (c), "Personal Supervision" means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant. "Direct Supervision" means the supervising physician or designated agent must be in the facility when the physician assistant is practicing. Dr. Hill must provide the Board with documentation of training and a letter of competency for review and approval before Ms. Sauer may receive Board approval to perform the procedure(s) under supervision other than Personal or Direct.

Antonina Pavlovna Strickland, LL15597
Randall V. Bream, MD22201

C, Corvallis
C, Corvallis

New Physician Assistant

Committee Recommendation:

Approve Antonina Pavlovna Strickland as a physician assistant in the State of Oregon under the supervision of Randall V. Bream, MD, per submitted practice description with Schedule III - V prescription privileges and the following amendments: Supervise standard treadmill and stress echo testing (exercise and pharmacologic); checking electronic data to verify proper pacemaker function; and adjust pacemaker settings are approved under personal supervision. Pursuant to OAR 847-050-0010 (8), "Personal Supervision means the supervising physician or designated agent must be at the side of the physician assistant at all times, personally directing the action of the physician assistant." Dr. Bream must provide the Board with documentation of training and a letter of competency for review and approval before Ms. Strickland may receive Board approval to perform the procedure(s) under supervision other than personal. The letter should include the frequency and quantity that the aforementioned procedures have been performed by both Ms. Strickland as well as Dr. Bream.

Scott K. Swindells, PA00289
Beverly Steinman, MD13506

FP, Grants Pass
FP, Grants Pass

Primary Supervising Physician

Committee Recommendation:

Approve Beverly Steinman, MD, as a supervising physician for Scott K. Swindells, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Emergency administration authority is not approved as physician is available to issue a verbal and/or standing order. Emergency dispensing authority is not approved as Dr. Steinman is not registered with the Board as a Dispensing Physician.

Kathleen J. Thompson, PA00742
Roger J. Dreiling, MD20932

FP, Corvallis
C, Corvallis

revise the practice description

Committee Recommendation:

Approve the request to add "perform treadmill, pharmacologic, and nuclear stress tests" to the practice description of Kathleen J. Thompson, PA, under the General Supervision of Roger J. Dreiling, MD.

Angela E. Watson, PA00394
L. Paul Wilson, MD11715

R, Eugene
R, Eugene

Primary Supervising Physician

Committee Recommendation:

Approve L. Paul Wilson, MD, as a supervising physician for Angela E. Watson, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: Placement of hemodialysis and Groshong catheters, and PICC lines are approved under Direct Supervision. Pursuant to OAR 847-050-0010 (8) (c), "Direct Supervision means the supervising physician or designated agent must be in the facility when the physician assistant is practicing." Dr. Wilson must provide the Board with documentation of training and a letter of competency for review and approval before Ms. Watson may receive Board approval to perform the procedure(s) under supervision other than Direct.

It was moved and seconded that

THE PHYSICIAN ASSISTANT COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE AFOREMENTIONED RECOMMENDATIONS.

Members present voted unanimously to pass the motion.

NEW LICENSEE CONSENT AGENDA

Physician Assistant / License Specialty / Primary Practice Site	Supervising Physician / License Specialty / Primary Practice Site
Julie Lynn Higgins, LL15662 N, Portland	Mark S. Yerby, MD10835 N, Portland
Craig Jamison, PA ORS, Caldwell, ID	George A. Nicola, MD25427 ORS, Caldwell, ID
David Partch, LL15375 NEP, Portland	Rubin Chandran, MD24328 NEP, Portland
Daniel P. Sellers, LL15640 ORS, Portland	Stephen R. Southerland, MD23726 ORS, Portland
Jeffrey Dale Smith, LL15627 ORS, Caldwell, ID	George A. Nicola, MD25427 ORS, Caldwell, ID

It was moved and seconded that

THE PHYSICIAN ASSISTANT ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE ABOVE LISTED NEW LICENSEE CONSENT AGENDA ITEMS.

Members present voted unanimously to pass the motion.

PA COMMITTEE CONSENT AGENDA

Physician Assistant / License Specialty / Primary Practice Site	Reason for Review: Schedule II Prescription Privileges	Supervising Physician / License Specialty / Primary Practice Site
Staff Recommendation Approve the addition of Schedule II prescription privileges to the practice descriptions of following physician assistants, under the supervision of the listed supervising physicians.		
Bryan L. Braun, PA00659 I, Baker City		Charles E. Hofmann, MD12678 I, Baker City
Lynn E. Caton, PA00841 FP, Portland		John W. Saultz, MD14885 FP, Portland
Lisa M. Cowan, PA00679 ORS, Tualatin		Timothy L. Keenen, MD15842 ORS, Tualatin
Hugh R. Gapay, PA01016 GS, Portland		John M. Ham, MD23440 GS, Portland
Timothy A. Hall, PA00695 PMR, Medford		Daniel A. Saviers, MD16932 PMR, Medford
Ryan Kremppges, PA01021 ORS, Salem		Mark E. Foglesong, MD19910 ORS, Salem
Harry Randolph, III, PA00566 FP, St. Helens, OR		Janet Kelly, MD14315 FP, St. Helens

Physician Assistant / License Specialty / Primary Practice Site	Reason for Review	Supervising Physician / License Specialty / Primary Practice Site
Mike J. Bevers, PA000649 D, Portland	Secondary Supervising Physician	Clark E. Sisk, MD12188 D, Portland
Committee Recommendation:	Approve Clark E. Sisk, MD, as a supervising physician for Mike J. Bevers, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Richard E. Cooksley, PA00272 EM, Roseburg	Secondary Supervising Physician	Steven A. Blum, MD21400 I, Roseburg
Committee Recommendation:	Approve Steven A. Blum, MD, as a supervising physician for Richard E. Cooksley, PA, per the submitted practice description with Schedule III-V prescription privileges and the following amendments: None.	
Richard E. Cooksley, PA00272 EM, Roseburg	Secondary Supervising Physician	Gregory A. Falk, DO13695 GP, Canyonville
Committee Recommendation:	Approve Gregory A. Falk, DO, as a supervising physician for Richard E. Cooksley, PA, per the submitted practice description with Schedule III-V prescription privileges and the following amendments: None.	
Karen B. Coville, PA00240 FP, Stayton	Revise the Practice Description	Stephanie S. Welch, MD24782 FP, Stayton
Committee Recommendation:	Approve request to remove endometrial biopsy and colposcopy as an additional medical and surgical service from the practice description of Karen B. Coville, PA, under the supervision of Stephanie S. Welch, MD.	
Sandra M. Ford, PA00238 P, Portland	Secondary Supervising Physician	Phillip Shapiro, MD14234 P, Portland
Committee Recommendation:	Approve Phillip Shapiro, MD, as a supervising physician for Sandra M. Ford, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Brian E. Granvall, PA00846 I, Portland	Secondary Supervising Physician	Christopher S.B. Thoming, MD15349 I, Portland
Committee Recommendation:	Approve Christopher S.B. Thoming, MD, as a supervising physician for Brian E. Granvall, PA, per the submitted practice description, with Schedule II-V prescription privileges and the following amendments: None.	
Diane Nunley Hungerford, PA00848 I, Woodburn	Reactivation	Maurice F. Golden III, MD16474 I, Woodburn
Committee Recommendation:	Approve the reactivation of Oregon physician assistant license of Diane Nunley Hungerford, PA, under the supervision physician for Maurice F. Golden, MD, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	

Melanie J. Johnson, PA00939 EM, Portland	Secondary Supervising Physician	Carrie Ware, MD17329 I, Clackamas
Committee Recommendation:	Approve Carrie Ware, MD, as a supervising physician for Melanie J. Johnson, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Dean Jordan, PA00073 ORS, Corvallis	Primary Practice Location Change	John J. Coen, MD21639 ORS, Corvallis
Committee Recommendation:	Approve primary practice location change to office and/or clinic and hospital from hospital only for Dean Jordan, PA, under the supervision of John J. Coen MD.	
Amanda K. Kleven, PA00958 D, Bend	Primary Supervising Physician	William J. Delgado, MD20951 D, Bend
Committee Recommendation:	Approve William J. Delgado, MD, as a supervising physician for Amanda K. Kleven, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Dianne K. Koenig, PA00605 PD, McMinnville	Secondary Supervising Physician	Raymond P. Nolan, MD10560 I, McMinnville
Committee Recommendation:	Approve Raymond P. Nolan, MD, as a supervising physician for Dianne K. Koenig, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Scott Lange, PA00880 GS, Coos Bay	Secondary Supervising Physician	Robert W. Gerber, MD18057 FP, Coos Bay
Committee Recommendation:	Approve Robert W. Gerber, MD, as a supervising physician for Scott Lange, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Jeffrey J. Lawrence, PA00376 CDS, Eugene	Primary Supervising Physician	Warren M. Glover, MD16408 CDS, Eugene
Committee Recommendation:	Approve Warren M. Glover, MD, as a supervising physician for Jeffrey J. Lawrence, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Theresa Moller, PA00370 I, Tualatin	Primary Supervising Physician	F. Chester North, MD13100 I, Tualatin
Committee Recommendation:	Approve F. Chester North, MD, as a supervising physician for Theresa Moller, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	

Gilbert "Paul" Moyer, PA00737 FP, The Dalles	Primary Supervising Physician	Brendan B. Ramey, MD25561 FP, The Dalles
Committee Recommendation:	Approve Brendan B. Ramey, MD, as a supervising physician for Gilbert "Paul" Moyer, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: As Dr. Ramey has never before received Board approval as a supervising physician, the required chart review is a minimum 50% of charts for the first 30 days, 30% for the next 60 days, and 20% for the next 90 days. After 6 months, chart review may be reduced to 10 percent of charts per month or no less than 10 charts per month.	
Kristi L. Skoog, PA00568 FP, Eugene	Secondary Supervising Physician	Michael Boespflug, MD17644 FP, Eugene
Committee Recommendation:	Approve Michael Boespflug, MD, as a supervising physician for Kristi L. Skoog, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Sheryl J. Williams, PA00743 I, Portland	Primary Supervising Physician— <i>Relationship termed 8/19/05</i>	Barbara A. Graham, MD15611 I, Portland
Committee Recommendation:	Approve Barbara A. Graham, MD, as a supervising physician for Sheryl J. Williams, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Paul A. Winkler II, PA00964 EM, Klamath Falls	Secondary Supervising Physician	Kevin T. Heaton, DO22887 ORS, Klamath Falls
Committee Recommendation:	Approve Kevin T. Heaton, DO, as a supervising physician for Paul A. Winkler II, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: 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. Dr. Heaton stated that he would review 100% of charts; the Board has concerns that this level of chart review will be difficult to maintain.	
Karoline Voitke, PA00647 FP, Lake Oswego	Secondary Supervising Physician	Lisa Annette Powell Els, MD20727 I, Clackamas
Committee Recommendation:	Approve Lisa Annette Powell Els, MD, as a supervising physician for Karoline Voitke, PA, per the submitted practice description with Schedule II-V prescription privileges and the following amendments: None.	
Margaret A. Wolf, PA00050 ORS, Portland	Secondary Supervising Physician	Richard B. Rosenfield, MD22597 OBG, Portland
Committee Recommendation:	Approve Richard B. Rosenfield, MD, as a supervising physician for Margaret A. Wolf, PA, per the submitted practice description with no prescription privileges and the following amendments: None.	

It was moved and seconded that

THE PHYSICIAN ASSISTANT COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE ABOVE LISTED CONSENT AGENDA.

Members present voted unanimously to pass the motion.

APPROVAL OF LIMITED LICENSES, SPECIAL

Belch, Alan David	Kao, Dean	Ramme, Laura Deesha
Callis, James Alton	Lovell, Margaret Michelle	Sellers, Daniel Phillip
Davis, Mark Christopher	Myers, Joel Preston	Smith, Jeffrey Dale
De Menezes Jr., Jurandir Bezerra	Partch, David Schofield	Strickland, Antonina Pavlovna

It was moved and seconded that

THE PHYSICIAN ASSISTANT COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE AFOREMENTIONED LIMITED LICENSE, SPECIALS.

Members present voted unanimously to pass the motion.

APPROVAL OF PA STUDENTS TRAINING IN OREGON FROM PA PROGRAMS OUTSIDE OF OREGON

Student PA Name	Training Dates	Supervising Physician	Practice Location
Cooper, Mariana	8/29/05-2/24/06	Leslie Stone, MD	Ashland, Oregon
Yim, Tiffany	12/1/05-12/31/05	Ira Weintraub, MD	Warm Springs, Oregon

The following physician assistant students will train at **Oregon Health & Science University Division of Physician Assistant Education**

under the supervision of **Francis Biagioli, MD** from **June 2005** to **August 2006**:

Class of 2005	Class of 2006	Class of 2007
Abou-Jaoude, Emad	Antoncich, Christa	Alessi, Dran
Baker, Sally	Boyle, John	Brandt, Kerith
Berman, Sarah	Brown, Leanna	Brown, Deborah
Biggs, Kimberly	Clark-Nicholson, Ella	Brunson, Patrick
Boothe, Amy	Cunningham, Cindy	Byrne, Liza
Bottom, Juliene	Fay, Shannon	Campbell, Christopher
Curran, Theresa	Furber, Matthew	Clemons, Alison
Caratan, Jill	Gehring, Kristen	Coffman, Jessica
Dang, Theresa-Huong	Harzewski, Renee	Davidson, Heather
Eames, Anthony	Hsu, Robert	Drake, Brian
Gossen, Sharene	Humphrey, Kyle	Erickson, Joy
Carlsen, Ivy	Keller, Douglas	Godell, Johanna
Jensen, Tate	Lee, Christina	Graslie, Jennifer
Kliewer, Darcy	Liebler, Katherine	Grothe, Michelle
Gillan, James	Merz, Stacey	Johnson, Andrew
Lemke, Erika	Miller, Carl	Jones, Carmen
McColly, James	Miller, Graciela	Kamstra, Kristin
Miller, Amanda	Nahabedian, Jeannine	King, Adam
Porto, Karen	Noorani, Shafiq	Legard, Annie
Pennington, Melissa	Price, Sarah	Lemke, Rachel
Pulliam, Julia	Ruenji, Njanja	Lovgren, Marcie
Schlump, Jessica	Salguero, Catherine	McWilliam, Laura
Sivertson, Kari	Sandoval, Dorothy	Reed, Matthew
Wacek, Paul	Sands, Amber	Roth, John
Wagon, Scott	Shields, Dawn	Sullivan, Kelsey
Wellnitz, Jill	Starosta, Sarah	Thompson, Zoryana
Williamson, Matt	Stein, Daniel	Tong, Candice
Yetter, Michael	Stimson, Scott	Vieira, Carrie
	Welke, Lori	Waymire, Jennifer
		Wiesman, Mandy
		Williams, Matthew

It was moved and seconded that

THE PHYSICIAN ASSISTANT COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE AFOREMENTIONED STUDENTS.

Four members voted to pass the motion. Randy Randolph, PA, recused.

APPROVE FUTURE MEETING DATES:

(2005 Board Dates for reference)

PA Committee December 8, 2005
 PA Committee March 9, 2006 **(Proposed)**

BME January 12-13, 2006
 BME April 13-14, 2006 **(Proposed)**

WORKING LUNCH

NOTE: 10/7/05 – The Board accepted the aforementioned Committee recommendations.

ADJOURNMENT

There being no further business to discuss, Dana Gray, PA, adjourned the meeting at 12:45 p.m.

OREGON ADMINISTRATIVE RULES
CHAPTER 847, DIVISION 050 – BOARD OF MEDICAL EXAMINERS

EXHIBIT A

PROPOSED RULES CHANGES – OCTOBER 2005

FINAL REVIEW BY THE BOARD

Proposed rules specify that an applicant for a locum tenens must have an active or locum tenens registration status with the Board.

847-050-0029

Locum Tenens

Locum tenens means a temporary absence by the physician assistant or physician is filled by a substitute physician assistant or physician. The following is required of an applicant for locum tenens:

(1) A minimum of two weeks prior to the intended locum tenens, the supervising physician of the practice which desires the substitute must submit a letter of request to the Board.

(2) The request must include the name of the substitute physician assistant or physician, duration of the locum tenens, a description of how supervision of the physician assistant will be maintained, and any changes in the approved practice description for the practice during the locum tenens. Approval must be obtained in advance from the Executive Director of the Board of Medical Examiners.

(3) The physician assistant or physician must be currently licensed in Oregon, **with active or locums tenens registration status**, and **be** in good standing with the Board.

(4) The physician assistant must be qualified to provide the same type of service as described in the current approved practice description for the locum tenens.

(5) The physician must be as qualified as the physician who is being replaced during the locum tenens.

(6) The Board Executive Director may give temporary approval which is subject to approval **by the Board of Medical Examiners**.

73rd OREGON LEGISLATIVE ASSEMBLY--2005 Regular Session

Enrolled

House Bill 3238

Sponsored by Representative THATCHER; Representatives ANDERSON, BARNHART, BERGER, BOQUIST, BROWN, BRUUN, BUCKLEY, BURLEY, CAMERON, DALLUM, DALTO, ESQUIVEL, FLORES, GALIZIO, GARRARD, GILMAN, HANNA, HUNT, JENSON, KOMP, KRIEGER, KROPF, KRUMMEL, LIM, MINNIS, MORGAN, NELSON, OLSON, RICHARDSON, ROBLAN, SCHAUFLER, SCOTT, G SMITH, P SMITH, SUMNER, WHISNANT

CHAPTER

AN ACT

Relating to state administrative rules; creating new provisions; and amending ORS 183.333, 183.335 and 183.540.

Whereas a vibrant and growing small business sector is critical to creating jobs in a dynamic economy; and

Whereas changes that are needed in the regulatory and enforcement culture of state agencies to make them more responsive to small businesses can be made without compromising the roles of the agencies; and

Whereas when adopting rules to protect the health, safety and economic welfare of Oregonians, state agencies should seek to achieve statutory goals effectively and efficiently without imposing unnecessary burdens on small businesses; and

Whereas uniform regulatory and reporting requirements can impose unnecessary and disproportionately burdensome demands, including legal, accounting and consulting costs, on small businesses with limited resources; and

Whereas failure to recognize differences in scale and resources among regulated businesses can adversely affect competition in the marketplace, discourage innovation and restrict productivity; and

Whereas unnecessary rules create entry barriers in many industries and discourage potential entrepreneurs from introducing beneficial products and processes; and

Whereas treating all regulated businesses the same leads to inefficient use of regulatory agency resources, enforcement problems and, in some cases, actions inconsistent with the intent of health, safety, environmental and economic welfare legislation; and

Whereas alternative regulatory approaches that do not conflict with the stated objective of applicable statutes may be available to minimize the adverse economic effect of rules on small businesses; and

Whereas agencies should solicit ideas and comments from small businesses, to examine the effect of proposed and existing rules on small businesses and to review the need for existing rules; now, therefore,

Be It Enacted by the People of the State of Oregon:

SECTION 1. { + Sections 2 and 3 of this 2005 Act are added to

and made a part of ORS 183.325 to 183.410. + }

SECTION 2. { + (1) The statement of cost of compliance effect on small businesses required by ORS 183.335 (2)(b)(E) must include:

(a) An estimate of the number of small businesses subject to the proposed rule and identification of the types of businesses and industries with small businesses subject to the proposed rule;

(b) A brief description of the projected reporting, recordkeeping and other administrative activities required for compliance with the proposed rule, including costs of professional services;

(c) An identification of equipment, supplies, labor and increased administration required for compliance with the proposed rule; and

(d) A description of the manner in which the agency proposing the rule involved small businesses in the development of the rule.

(2) An agency shall utilize available information in complying with the requirements of this section. + }

SECTION 3. { + (1) Not later than five years after adopting a rule, an agency shall review the rule for the purpose of determining:

(a) Whether the rule has had the intended effect;

(b) Whether the anticipated fiscal impact of the rule was underestimated or overestimated;

(c) Whether subsequent changes in the law require that the rule be repealed or amended; and

(d) Whether there is continued need for the rule.

(2) An agency shall utilize available information in complying with the requirements of subsection (1) of this section.

(3) If an agency appoints an advisory committee pursuant to ORS 183.333 for consideration of a rule subject to the requirements of this section, the agency shall provide the advisory committee with a report on a review of the rule conducted under this section.

(4) The provisions of this section do not apply to the amendment or repeal of a rule.

(5) The provisions of this section do not apply to:

(a) Rules adopted to implement court orders or the settlement of civil proceedings;

(b) Rules that adopt federal laws or rules by reference;

(c) Rules adopted to implement legislatively approved fee changes; or

(d) Rules adopted to correct errors or omissions. + }

SECTION 4. ORS 183.333 is amended to read:

183.333. (1) The Legislative Assembly finds and declares that it is the policy of this state that whenever possible the public be involved in the development of public policy by agencies and in the drafting of rules. The Legislative Assembly encourages agencies to seek public input to the maximum extent possible before giving notice of intent to adopt a rule. The agency may appoint an advisory committee that will represent the interests of persons likely to be affected by the rule, or use any other means of obtaining public views that will assist the agency in drafting the rule.

(2) Any agency in its discretion may develop a list of interested parties and inform those parties of any issue that may

comments on the issue.

{ + (3) If an agency appoints an advisory committee for consideration of a rule under subsection (1) of this section, the agency shall seek the committee's recommendations on whether the rule will have a fiscal impact, what the extent of that impact will be and whether the rule will have a significant adverse impact on small businesses. If the committee indicates that the rule will have a significant adverse impact on small businesses, the agency shall seek the committee's recommendations on compliance with ORS 183.540.

(4) An agency shall consider an advisory committee's recommendations provided under subsection (3) of this section in preparing the statement of fiscal impact required by ORS 183.335 (2)(b)(E).

(5) If an agency does not appoint an advisory committee for consideration of a permanent rule under subsection (1) of this section and 10 or more persons likely to be affected by the rule object to the agency's statement of fiscal impact as required by ORS 183.335 (2)(b)(E) or an association with at least 10 members likely to be affected by the rule objects to the statement, the agency shall appoint a fiscal impact advisory committee to provide recommendations on whether the rule will have a fiscal impact and what the extent of that impact will be. An objection under this subsection must be made not later than 14 days after the notice required by ORS 183.335 (1) is given. If the agency determines that the statement does not adequately reflect the rule's fiscal impact, the agency shall extend the period for submission of data or views under ORS 183.335 (3)(a) by at least 20 days. The agency shall include any recommendations from the committee in the record maintained by the agency for the rule.

(6) Subsection (5) of this section does not apply to any rule adopted by an agency to comply with a judgment or a settlement of a judicial proceeding. + }

SECTION 5. ORS 183.335, as amended by section 206, chapter 794, Oregon Laws 2003, is amended to read:

183.335. (1) Prior to the adoption, amendment or repeal of any rule, the agency shall give notice of its intended action:

(a) In the manner established by rule adopted by the agency under ORS 183.341 (4), which provides a reasonable opportunity for interested persons to be notified of the agency's proposed action;

(b) In the bulletin referred to in ORS 183.360 at least 21 days prior to the effective date;

(c) At least 28 days before the effective date, to persons who have requested notice pursuant to subsection (8) of this section; and

(d) At least 49 days before the effective date, to the persons specified in subsection (15) of this section.

(2)(a) The notice required by subsection (1) of this section { - shall state - } { + must include:

(A) A caption of not more than 15 words that reasonably identifies the subject matter of the agency's intended action. The agency shall include the caption on each separate notice, statement, certificate or other similar document related to the intended action.

(B) An objective, simple and understandable statement summarizing + } the subject matter and purpose of the intended action in sufficient detail to inform a person that the person's interests may be affected, and the time, place and manner in

which interested persons may present their views on the intended action.

(b) The agency shall include with the notice of intended action given under subsection (1) of this section:

(A) A citation of the statutory or other legal authority relied upon and bearing upon the promulgation of the rule;

(B) A citation of the statute or other law the rule is intended to implement;

(C) A statement of the need for the rule and a statement of how the rule is intended to meet the need;

(D) A list of the principal documents, reports or studies, if any, prepared by or relied upon by the agency in considering the need for and in preparing the rule, and a statement of the location at which those documents are available for public inspection. The list may be abbreviated if necessary, and if so abbreviated there shall be identified the location of a complete list;

(E) A statement of fiscal impact identifying state agencies, units of local government and the public which may be economically affected by the adoption, amendment or repeal of the rule and an estimate of that economic impact on state agencies, units of local government and the public. In considering the economic effect of the proposed action on the public, the agency shall utilize available information to project any significant economic effect of that action on businesses which shall include a cost of compliance effect on small businesses affected. For an agency specified in ORS 183.530, the statement of fiscal impact shall also include a housing cost impact statement as described in ORS 183.534;

(F) If an advisory committee is not appointed under the provisions of ORS 183.333, an explanation as to why no advisory committee was used to assist the agency in drafting the rule; and

(G) A request for public comment on whether other options should be considered for achieving the rule's substantive goals while reducing the negative economic impact of the rule on business.

(c) The Secretary of State may omit the information submitted under paragraph (b) of this subsection from publication in the bulletin referred to in ORS 183.360.

(d) When providing notice of an intended action under the provisions of subsection (1)(c) of this section, the agency shall provide a copy of the rule that the agency proposes to adopt, amend or repeal, or an explanation of how the person may acquire a copy of the rule. The copy of an amended rule shall show all changes to the rule by bracketing material to be deleted and showing all new material in boldfaced type.

(3)(a) When an agency proposes to adopt, amend or repeal a rule, it shall give interested persons reasonable opportunity to submit data or views. Opportunity for oral hearing shall be granted upon request received from 10 persons or from an association having not less than 10 members before the earliest date that the rule could become effective after the giving of notice pursuant to subsection (1) of this section. An agency holding a hearing upon a request made under this subsection shall give notice of the hearing at least 21 days before the hearing to the person who has requested the hearing, to persons who have requested notice pursuant to subsection (8) of this section and to the persons specified in subsection (15) of this section. The agency shall publish notice of the hearing in the bulletin

referred to in ORS 183.360 at least 14 days before the hearing. The agency shall consider fully any written or oral submission.

(b) If an agency is required to conduct an oral hearing under paragraph (a) of this subsection, and the rule for which the hearing is to be conducted applies only to a limited geographical area within this state, or affects only a limited geographical area within this state, the hearing shall be conducted within the geographical area at the place most convenient for the majority of the residents within the geographical area. At least 14 days before a hearing conducted under this paragraph, the agency shall publish notice of the hearing in the bulletin referred to in ORS 183.360 and in a newspaper of general circulation published within the geographical area that is affected by the rule or to which the rule applies. If a newspaper of general circulation is not published within the geographical area that is affected by the rule or to which the rule applies, the publication shall be made in the newspaper of general circulation published closest to the geographical area.

(c) Notwithstanding paragraph (a) of this subsection, the Department of Corrections and the State Board of Parole and Post-Prison Supervision may adopt rules limiting participation by inmates in the proposed adoption, amendment or repeal of any rule to written submissions.

{ + (d) If requested by at least five persons before the earliest date that the rule could become effective after the agency gives notice pursuant to subsection (1) of this section, the agency shall provide a statement that identifies the objective of the rule and a statement of how the agency will subsequently determine whether the rule is in fact accomplishing that objective. + }

{ - (d) - } { + (e) + } An agency that receives data or views concerning proposed rules from interested persons shall maintain a record of the data or views submitted. The record shall contain:

(A) All written materials submitted to an agency in response to a notice of intent to adopt, amend or repeal a rule.

(B) A recording or summary of oral submissions received at hearings held for the purpose of receiving those submissions.

{ - (C) Comments of the committees submitted under subsection (16) of this section. - }

{ + (C) Any public comment received in response to the request made under subsection (2)(b)(G) of this section and the agency's response to that comment.

(D) Any statements provided by the agency under paragraph (d) of this subsection. + }

(4) Upon request of an interested person received before the earliest date that the rule could become effective after the giving of notice pursuant to subsection (1) of this section, the agency shall postpone the date of its intended action no less than 21 nor more than 90 days in order to allow the requesting person an opportunity to submit data, views or arguments concerning the proposed action. Nothing in this subsection shall preclude an agency from adopting a temporary rule pursuant to subsection (5) of this section.

(5) Notwithstanding subsections (1) to (4) of this section, an agency may adopt, amend or suspend a rule without prior notice or hearing or upon any abbreviated notice and hearing that it finds practicable, if the agency prepares:

(a) A statement of its findings that its failure to act promptly will result in serious prejudice to the public interest

or the interest of the parties concerned and the specific reasons for its findings of prejudice;

(b) A citation of the statutory or other legal authority relied upon and bearing upon the promulgation of the rule;

(c) A statement of the need for the rule and a statement of how the rule is intended to meet the need;

(d) A list of the principal documents, reports or studies, if any, prepared by or relied upon by the agency in considering the need for and in preparing the rule, and a statement of the location at which those documents are available for public inspection; and

(e) For an agency specified in ORS 183.530, a housing cost impact statement as defined in ORS 183.534.

(6)(a) A rule adopted, amended or suspended under subsection (5) of this section is temporary and may be effective for a period of not longer than 180 days. The adoption of a rule under this subsection does not preclude the subsequent adoption of an identical rule under subsections (1) to (4) of this section.

(b) A rule temporarily suspended shall regain effectiveness upon expiration of the temporary period of suspension unless the rule is repealed under subsections (1) to (4) of this section.

(7) Notwithstanding subsections (1) to (4) of this section, an agency may amend a rule without prior notice or hearing if the amendment is solely for the purpose of:

(a) Changing the name of an agency by reason of a name change prescribed by law;

(b) Correcting spelling;

(c) Correcting grammatical mistakes in a manner that does not alter the scope, application or meaning of the rule; or

(d) Correcting statutory references.

(8) Any person may request in writing that an agency mail to the person copies of its notices of intended action given pursuant to subsection (1) of this section. Upon receipt of any request the agency shall acknowledge the request, establish a mailing list and maintain a record of all mailings made pursuant to the request. Agencies may establish procedures for establishing and maintaining the mailing lists current and, by rule, establish fees necessary to defray the costs of mailings and maintenance of the lists.

(9) This section does not apply to rules establishing an effective date for a previously effective rule or establishing a period during which a provision of a previously effective rule will apply.

(10) This section does not apply to ORS 279.835 to 279.855, 279A.140 to 279A.155, 279A.250 to 279A.290, 279A.990, 279B.050 to 279B.085, 279B.200 to 279B.240, 279B.270, 279B.275, 279B.280, 279C.360, 279C.365, 279C.370, 279C.375, 279C.380, 279C.385, 279C.500 to 279C.530, 279C.540, 279C.545, 279C.550 to 279C.570, 279C.580, 279C.585, 279C.590, 279C.600 to 279C.625, 279C.650 to 279C.670 and 279C.800 to 279C.870 relating to public contracts and purchasing.

(11)(a) { - No - } { + Except as provided in paragraph (c) of this subsection, a + } rule is { + not + } valid unless adopted in substantial compliance with the provisions of this section in effect on the date the rule is adopted.

(b) In addition to all other requirements with which rule adoptions must comply, { - no rule adopted after October 3, 1979, - } { + a rule + } is { + not + } valid { - unless - } { + if the rule has not been + } submitted to the Legislative

Counsel { - under - } { + in the manner required by + } ORS 183.715.

{ + (c) A rule is not subject to judicial review or other challenge by reason of failing to comply with subsection (2)(a)(A) of this section. + }

(12) { + (a) + } Notwithstanding the provisions of subsection (11) of this section, { + but subject to paragraph (b) of this subsection, + } an agency may correct its failure to substantially comply with the requirements of subsections (2) and (5) of this section in adoption of a rule by an amended filing, so long as the noncompliance did not substantially prejudice the interests of persons to be affected by the rule. { - However, This subsection does not authorize correction of a failure to comply with subsection (2)(b)(E) of this section requiring inclusion of a fiscal impact statement with the notice required by subsection (1) of this section. - }

{ + (b) An agency may use an amended filing to correct a failure to include a fiscal impact statement in a notice of intended action, as required by subsection (2)(b)(E) of this section, or to correct an inaccurate fiscal impact statement, only if the agency developed the fiscal impact statement with the assistance of an advisory committee or fiscal impact advisory committee appointed under ORS 183.333. + }

(13) Unless otherwise provided by statute, the adoption, amendment or repeal of a rule by an agency need not be based upon or supported by an evidentiary record.

(14) When an agency has established a deadline for comment on a proposed rule under the provisions of subsection (3)(a) of this section, the agency may not extend that deadline for another agency or person unless the extension applies equally to all interested agencies and persons. An agency shall not consider any submission made by another agency after the final deadline has passed.

(15) The notices required under subsections (1) and (3) of this section must be given by the agency to the following persons:

(a) If the proposed adoption, amendment or repeal results from legislation that was passed within two years before notice is given under subsection (1) of this section, notice shall be given to the legislator who introduced the bill that subsequently was enacted into law, and to the chair or cochairs of all committees that reported the bill out, except for those committees whose sole action on the bill was referral to another committee.

(b) If the proposed adoption, amendment or repeal does not result from legislation that was passed within two years before notice is given under subsection (1) of this section, notice shall be given to the chair or cochairs of any interim or session committee with authority over the subject matter of the rule.

(c) If notice cannot be given under paragraph (a) or (b) of this subsection, notice shall be given to the Speaker of the House of Representatives and to the President of the Senate who are in office on the date the notice is given.

(16)(a) Upon the request of a member of the Legislative Assembly or of a person who would be affected by a proposed adoption, amendment or repeal, the committees receiving notice under subsection (15) of this section shall review the proposed adoption, amendment or repeal for compliance with the legislation from which the proposed adoption, amendment or repeal results.

(b) The committees shall submit their comments on the proposed adoption, amendment or repeal to the agency proposing the adoption, amendment or repeal.

SECTION 6. ORS 183.540 is amended to read:

183.540. If the { - economic effect analysis - } { + statement of cost of compliance effect on small businesses required by ORS 183.335 (2)(b)(E) + } shows that { - the - } { + a + } rule has a significant adverse effect upon small business, to the extent consistent with the public health and safety purpose of the rule, the agency shall reduce the economic impact of the rule on small business by:

- (1) Establishing differing compliance or reporting requirements or time tables for small business;
(2) Clarifying, consolidating or simplifying the compliance and reporting requirements under the rule for small business;
(3) Utilizing objective criteria for standards;
(4) Exempting small businesses from any or all requirements of the rule; or
(5) Otherwise establishing less intrusive or less costly alternatives applicable to small business.

SECTION 7. { + Sections 2 and 3 of this 2005 Act and the amendments to ORS 183.333, 183.335 and 183.540 by sections 4, 5 and 6 of this 2005 Act apply only to rules for which the notice required under ORS 183.335 (1) is delivered to the Secretary of State on or after the effective date of this 2005 Act for the purpose of publication in the bulletin referred to in ORS 183.360. + }

Passed by House June 30, 2005

Repassed by House August 1, 2005

Chief Clerk of House

Speaker of House

Passed by Senate July 30, 2005

President of Senate

Received by Governor:

.....M.,....., 2005

Approved:

.....M.,....., 2005

Governor

Filed in Office of Secretary of State:

.....M.,....., 2005

Secretary of State

CHAPTER 847, DIVISION 050 - BOARD OF MEDICAL EXAMINERS

PROPOSED RULES CHANGES – OCTOBER 2005

FIRST REVIEW BY THE BOARD

Proposed rules make a correction to the rules text regarding the duration the Limited License, Special is valid, add requirements regarding chronic/intractable pain management authority utilizing Schedule II medications, and change “certification” to “licensure” and add Schedule II controlled substances under duties of the committee.

847-050-0026

Limited License, Special

(1) Under the authority of the Board of Medical Examiners, the Physician Assistant Committee may grant a Limited License, Special to physician assistants not previously licensed in the state, subject to final Board approval.

(2) A Limited License, Special is valid until the next regularly scheduled [~~committee~~] **Board** meeting for which the applicant is eligible, and may be granted only if the following criteria are met:

(a) The applicant meets the qualifications of OAR 857-050-0020 (1) and (2);

(b) The application file is complete;

(c) The supervising physician has completed a practice description under ORS 677.510 to the satisfaction of the Board;

(d) The supervising physician is in good standing with the Board; and

(e) The applicant has submitted the appropriate form and fee for a Limited License, Special.

(3) Prescription privileges, including emergency dispensing and emergency administration, and remote supervision in a medically disadvantaged, underserved, or health professional shortage area may be granted with a Limited License, Special if requested by the supervising physician in the practice description.

(4) Prior to being granted a Limited License, Special, a new applicant and the supervising physician may be required to appear for an interview at the next regularly scheduled committee meeting if there are questions

concerning the application or the practice description.

847-050-0041

Prescription Privileges

(1) An Oregon grandfathered physician assistant may issue written or oral prescriptions for medications, Schedule III-V, which the supervising physician has determined the physician assistant is qualified to prescribe commensurate with the practice description and approved by the Board if the physician assistant has passed a specialty examination approved by the Board prior to July 12, 1984, and the conditions in (2) (a) and (b) are met.

(2) A physician assistant may issue written or oral prescriptions for medications, Schedule II-V, which the supervising physician has determined the physician assistant is qualified to prescribe commensurate with the practice description and approved by the Board if the following conditions are met:

(a) The physician assistant has met the requirements of OAR 847-050-0020(1); or is an Oregon grandfathered physician assistant who has passed the Physician Assistant National Certifying Examination (PANCE).

(b) The applicant must document adequate training and/or experience in pharmacology commensurate with the practice description;

(c) The Board may require the applicant to pass a pharmacological examination which may be written, oral, practical, or any combination thereof based on the practice description.

(d) **Schedule II.** An application for Schedule II controlled substances prescription privileges must be submitted to the Board by the physician assistant's supervising physician and must be accompanied by the practice description of the physician assistant. The Schedule II controlled substances prescription privileges of a physician assistant shall be limited by the practice description approved by the board and may be restricted further by the supervising physician at any time. To be eligible for Schedule II controlled substances prescription privileges, a physician assistant must be certified by the National Commission for the Certification of Physician Assistants and must complete all required continuing medical education coursework.

(3) The prescribing physician assistant, to be authorized to issue prescriptions for Schedules II through V controlled substances, must be registered with the Federal Drug Enforcement Administration.

(4) Written prescriptions shall be on a blank which includes the printed or handwritten name, office address, and telephone number of the supervising physician and the printed or handwritten name of the physician assistant. The prescription shall also bear the name of the patient and the date on which the prescription was written. The physician assistant shall sign the prescription and the signature shall be followed by the letter "P.A." Also the physician assistant's Federal Drug Enforcement Administration number shall be shown on prescriptions for controlled substances.

(5) **Emergency administration and emergency dispensing.** A licensed physician assistant may make application to the Board for emergency administering and dispensing authority. The application must be submitted in writing to the Board by the supervising physician and must explain the need for the request, as follows:

(a) Location of the practice site;

(b) Accessibility to the nearest pharmacy, and

(c) Medical necessity for emergency administering or dispensing.

(6) The dispensed medication must be pre-packaged by a licensed pharmacist, manufacturing drug outlet or wholesale drug outlet authorized to do so under ORS 689 and the physician assistant shall maintain records of receipt and distribution.

(7) A physician who supervises a physician assistant who is applying for emergency dispensing privileges must be registered with the Board of Medical Examiners as a dispensing physician.

(8) Chronic/intractable pain management authority utilizing Schedule II medications.

(a) Physician assistants and their supervising physicians must meet the following requirements in order for physician assistants to be granted chronic/intractable pain management authority, under general supervision:

(A) The physician assistant must have completed six (6) hours of accredited training in chronic/intractable pain management and a one (1) hour pain management course specific to the State of Oregon provided by the Pain Management Commission;

(B) The supervising physician must have DEA certification for Schedule II medications;

(b) Supervising physicians must review a minimum of ten (10) percent of physician assistant patient charts regarding chronic/intractable pain management with Schedule II medications for one year following approval of physician assistant chronic/intractable pain management authority.

847-050-0065

Duties of the Committee

The Physician Assistant Committee shall:

- (1) Review all applications for physician assistants' [~~certification~~] **licensure** and for renewal thereof.
- (2) Review applications of physician assistants for dispensing privileges.
- (3) Recommend approval or disapproval of applications submitted under subsection (1) or (2) of this section to the Board of Medical Examiners for the State of Oregon.
- (4) Recommend criteria to be used in granting dispensing privileges under ORS 677.515.
- (5) Recommend the formulary for prescriptive privileges which may include all or parts of Schedules **II, III, IV** and **V** controlled substances and the procedures for physician assistants and supervising physicians to follow in exercising the prescriptive privileges.
- (6) Recommend the approval, disapproval, or modification of the application for prescriptive privileges for any physician assistant.
- (7) All actions of the physician assistant committee shall be subject to review and approval by the Board.

847-050-0010

Definitions

As used in OAR 847-050-0005 to 847-050-0065:

(1) "Agent" means a physician designated by the supervising physician who provides direction and regular review of the medical services of the physician assistant when the supervising physician is unavailable for short periods of time.

847-050-0038

Agents

(1) The supervising physician may designate an agent or agents to direct and supervise the physician assistant. The agents must meet the following requirements:

(a) Be currently in practice and licensed as a medical or osteopathic physician under ORS 677 and in good standing with the Board;

(b) Practice in the same city, or practice area as the supervising physician or physician assistant.

(2) The supervising physician is responsible for informing the agent of the duties of an agent. Prior to such time as the physician assistant is acting under the direction of an agent, the supervising physician must determine that the agent understands and accepts supervisory responsibility. Supervision by the agent will continue for a certain, predetermined, limited period of time, after which supervisory duties revert to the supervising physician.

(3) In the absence of the supervising physician, the agent assumes the same responsibilities as the supervising physician.

677.510

Approval of board required before using services of physician assistant;

(3) The supervising physician may have a different specialty from the physician assistant. A physician assistant may be supervised by no more than four physicians. A physician may supervise four physician assistants. The board may review and approve applications from 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 to supervise more than four physician assistants, and applications from physician assistants to be supervised by more than four physicians. A physician assistant may render services in an emergency room and other hospital settings, a nursing home, a corrections institution and any site included in the practice description.

REQUEST FOR DEAN LETTER

EXHIBIT E

INSTRUCTIONS: 1. Applicant to complete UPPER portion of form and forward (via fax or mail) to educational institution. 2. The Dean is to complete LOWER portion of form and submit it DIRECTLY to the Board in an envelope with Institution’s return address printed on it. THIS FORM WILL NOT BE ACCEPTED IF RETURNED BY THE APPLICANT OR IF IT APPEARS THAT THE APPLICANT HAS WRITTEN IN THE LOWER PORTION OF THE FORM.


Student’s Last Name _____ First Name _____ Middle Name _____ Social Security # _____

Student’s Former Name, If Different at the Time of Attendance _____ Student’s Date of Birth _____

ATTN: Program Director/Dean of Institution _____ Name of Institution _____

Institution’s Address _____ City _____ State _____ Zip Code _____

I authorize the release of all pertinent information, favorable or otherwise, to the Oregon Board of Medical Examiners.

 **Signature of Applicant** _____

TO DEAN: Please complete and sign section below. Return this form to the Board at the above address in an envelope with your return address printed on it. **Please do not fax.**

Dates of Attendance **FROM** Month:____ Day:____ Year:____ **TO** Month:____ Day:____ Year:____

Diploma Issue Date:_____

1	Check here <i>if</i> it is your policy to release <i>only</i> attendance and diploma dates (<i>Go to signature block below</i>)	<input type="checkbox"/>
<small>PLEASE NOTE THAT THE GRADUATE WILL BE REQUIRED TO SUBMIT HIS/HER OFFICIAL TRANSCRIPTS IF THIS BOX IS CHECKED.</small>		
2	Was the student ever restricted, suspended, terminated, requested to voluntarily resign, placed on probation, and/or subject to formal disciplinary action?	<input type="checkbox"/> YES* <input type="checkbox"/> NO
3	Were there any concerns regarding the student’s judgment, knowledge base, and/or emotional stability?	<input type="checkbox"/> YES* <input type="checkbox"/> NO
4	Were there any concerns regarding abuse of alcohol, narcotics, barbiturates, amphetamines, and/or other drugs?	<input type="checkbox"/> YES* <input type="checkbox"/> NO
5	Were there any concerns regarding the student’s moral and ethical character?	<input type="checkbox"/> YES* <input type="checkbox"/> NO

***For a “yes” response to questions 2-5 use page 2 for explanation** (Affix official seal above, if applicable)

School Official’s Signature	Date Signed / /
Printed Name of School Official Completing this Form	
School Official’s Title	
Name of Educational Institution	
Mailing Address	
City	State Zip Phone # ()

Use this page to provide an explanation to a “yes” response to questions 2-5 on page 1 of this form. If there is any supporting

**documentation, please submit this with this form.
If more space is needed, please submit a letter to the Board.**

2. Was the student ever restricted, suspended, terminated, requested to voluntarily resign, placed on probation, and/or been subject to formal disciplinary action?

3. Were there any concerns regarding the student's judgment, knowledge base, emotional stability?

4. Were there any concerns regarding abuse of alcohol, narcotics, barbiturates, amphetamines, and/or other drugs?

5. Were there any concerns regarding the student's moral and ethical character?