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FOR IMMEDIATE RELEASE

Board reminds physicians of responsibilities when supervising up to 5 physician assistants

DES MOINES, IA -- With a new law that allows Iowa-licensed physicians to supervise up to five physician assistants at one time, the Iowa Board of Medicine is offering guidance for physicians who assume these important supervisory responsibilities.

The law, which became effective July 1, 2012, changed the supervisory ratio from 2 physician assistants per physician to no more than 5 physician assistants per physician. Approximately 17 percent of physicians who practice in Iowa report supervising at least one physician assistant.

A Board ad hoc committee chaired by Jeffrey Snyder, M.D., met last summer and fall to review expectations for supervising physicians in the wake of the new law. The committee met with representatives from the Iowa Board of Physician Assistants in October, and concluded that more education and guidance about existing laws and rules on physician assistant supervision would be helpful to physicians. On March 8, 2013, the Board approved the guidance offered in this press release.

The physician-physician assistant relationship is defined in [Chapters 148](#) and [148C](#) of the Iowa Code and in the Iowa Administrative Code (IAC) 645-Chapters [326](#) and [327](#) and 653-Chapters [21](#) and [23](#).

Responsibilities of a supervising physician include:

- The physician is ultimately responsible for the medical care provided by the physician-physician assistant team. ([IAC 645-326.1](#))
- The physician shall notify the Board of the physician assistant(s) under supervisor at the time of the physician's license renewal. ([IAC 653-Chapter 21.3](#))
- The physician must have sufficient training or experience to supervise a physician assistant in the area of medical practice in which a physician assistant is to be utilized. ([IAC 653-Chapter 21.4\(1\)](#))

- Diagnostic and therapeutic medical tasks for which the physician has sufficient training or experience may be delegated to the physician assistant after the physician determines the physician assistant's proficiency and competence. [\(IAC 645-Chapter 327.1\(1\) \)](#)
- The physician must ensure that the physician assistant is adequately supervised, including being available in person or by telecommunication to respond to the physician assistant. [\(IA 653-Chapter 21.4\(3\) \)](#)
- Patient care provided by the physician assistant shall be reviewed with the supervising physician, in person or by telecommunication, on an ongoing base as indicted by the clinical condition of the patient. [\(IAC 645-Chapter 326.8\(4\)\(a, b\) \)](#)
- A supervising physician must visit a physician assistant working at a remote medical site to provide additional medical direction, medical services and consultation at least every two weeks or less frequently as specified in special circumstances. [\(IAC 645-Chapter 327.4\(2\) \)](#) A remote medical site means a medical clinic away from the main practice location of a supervising physician and in which a supervising physician is present less than 50 percent of the time the site is open. [\(IAC 645-Chapter 326.1\)](#)
- When delegated prescribing occurs, the physician's name shall be used, record or otherwise indicated in connection with each individual prescription so that the individual who dispenses or administers the prescription knows under whose delegated authority the physician assistant is prescribing. [\(IAC 645-Chapter 327.6\(1\)\(d\) \)](#)

The Board noted that physicians can be disciplined for failure to meet the acceptable and prevailing standard of care when delegating or supervising medical services provided by another physician, health care practitioner, or other individual who is collaborating with or acting as an agent, associate, or employee of the physician responsible for the patient's care, whether or not injury results. [\(IAC 653-Chapter 23.1\(2\)\(g\) \)](#)

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