

OVERVIEW
(SAMPLE NO. 1 -- SUPERVISORY AGREEMENT)

Successful team practice by supervising physicians and physician assistants depends on all parties having a clear understanding of delegated duties and supervisory responsibilities. Written supervisory agreements help facilitate this understanding. Being clear enough about team practice to commit its parameters to writing will serve the physician-physician assistant team, their colleagues, and their patients.

A “supervisory agreement” outlines in a general way the patient conditions and procedures that the physician authorizes the physician assistant to address or perform. The agreement should be reviewed and updated periodically, as the physician-physician assistant team evolves in the way it delivers care. Like any partnership, the physician-physician assistant team requires open communication and ongoing evaluation to remain effective.

While each practice is unique, there are some basic expectations that supervising physicians should have for physician assistants and physician assistants for physicians. The Board has developed this sample supervisory agreement to facilitate this process.

- *** **Multiple Supervising Physicians:** The supervisory agreement may be utilized by multiple supervising physicians for each physician assistant.
- *** **Accurate and Up-To-Date:** Each supervising physician shall ensure that the information contained in the supervisory agreement is accurate and up-to-date.
- *** **Copy of the Agreement:** Each supervising physician shall maintain a copy of the agreement and provide a copy to the Iowa Board of Medicine upon request.
- *** **Sample Only:** This Supervisory Agreement is a sample only and should not be construed as legal advice. You may want to consult your attorney.
- *** **Remote Medical Site:** “Remote medical site” means a medical clinic for ambulatory patients which is 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 when the remote medical site is open. “Remote medical site” does not apply to nursing homes, patient homes, hospital outpatient departments, outreach clinics, or any location at which medical care is incidentally provided (e.g., diet center, free clinic, site for athletic physicals, jail facility). The supervisory agreement shall include a provision which ensures that the supervising physician visits a remote medical site to provide additional medical direction, medical services and consultation at least every two weeks or less frequently as specified in unusual or emergency circumstances.

SAMPLE NO. 1 -- SUPERVISORY AGREEMENT

Review of Requirements: The supervising physician and physician assistant have reviewed the requirements for physician assistant licensure, practice, supervision, and delegation. See Iowa Code Chapters 148 and 148C and Iowa Administrative Code Chapters 653 – 21 and 645 – 326, 327, 328 and 329. Find these resources at www.medicalboard.iowa.gov

Supervising Physician: _____

Physician Assistant: _____

Supervising Physician: _____

Supervising Physician: _____

Supervising Physician: _____

Education, Training, Skills and Experience: The supervising physician has assessed the education, training, skills, and experience of the physician assistant and the supervising physician and physician assistant have determined that each party has the appropriate education, training, skills, and experience to successfully collaborate on patient care.

Supervising Physician: _____

Physician Assistant: _____

Supervising Physician: _____

Supervising Physician: _____

Supervising Physician: _____

Practice Sites: Description of the practice sites where the physician assistant is authorized to perform patient care activities:

Scope of Practice: Description of the supervising physician's scope of practice:

Delegated Duties: Description of the duties and responsibilities the supervising physician is delegating to the physician assistant, including assessment, diagnosis, treatment, delegated prescriptive authority, and ordering or performing diagnostic and therapeutic procedures:

Unauthorized Practice: Description of the duties and responsibilities (i.e specific or categories of patient care activities or prescription medications) the supervising physician is not authorizing or delegating to the physician assistant:

Communication: Description of the plan for communication, including consultation on patient complaints, medical problems, complications, emergencies, and patient referrals. Here are some examples when a physician assistant should consider seeking consultation with the supervising physician: life-threatening, persistent, or unusual cases; irate or hostile patients or family members; cases that may have legal ramifications best handled by the supervising physician; upon a patient's request; and other situations the supervising physician and physician assistant have pre-determined will be best served by the supervising physician's input):

Discussion of Supervisory Agreement: Description of the plan for ongoing discussion and evaluation of the supervisory agreement, including expectations for both parties.

Chart Reviews: Description of the plan for completing chart reviews of a representative sample of the physician assistant's patient charts:

Alternate Supervision: Description of the plan for alternate supervision if the supervising physician will not be available for any reason:

I certify that I have read and fully understand the terms of this Supervisory Agreement.

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| Supervising Physician | Date | Physician Assistant | Date |
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Supervising Physician **Date**

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