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**22.01.03 - RULES FOR THE REGISTRATION OF PHYSICIAN'S ASSISTANTS**

**000. LEGAL AUTHORITY.**

Pursuant to Idaho Code Section 54-1806(2), the Idaho State Board of Medicine is authorized to promulgate rules to govern activities of persons employed as physician's assistants by persons licensed to practice medicine and surgery or osteopathic medicine and surgery in Idaho. (7-1-93)

**001. TITLE AND SCOPE.**

Pursuant to Idaho Code Section 54-1807(2), physician's assistants must register with the Board prior to commencement of activities. These rules shall be cited as IDAPA 22.01.03, "Rules for the Registration of Physician's Assistants." (7-1-93)

**002. -- 009. (RESERVED).**

**010. DEFINITIONS:**

01. Board. The Idaho State Board of Medicine. (7-1-93)
02. Approved Program. A course of study for the education and training of physician's assistants which is approved by the Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Programs. (7-1-93)
03. Supervising Physician. A person approved by the Board who is licensed to practice medicine and surgery or osteopathic medicine and surgery in Idaho, who co-signs the application for registration of a physician's assistant, and who is responsible for the direction and supervision of the activities of the physician's assistant. (7-1-93)
04. Substitute Supervising Physician. A physician licensed to practice medicine and surgery or osteopathic medicine and surgery in Idaho who has been designated by the supervising physician and authorized by the Board to supervise the physician's assistant in the temporary absence of the supervising physician. (7-1-93)
05. Physician's Assistant. A person who is a graduate of an approved program and who is qualified by general education, training, experience and personal character, and who has been authorized by the Board, to render patient services under the direction of a supervising physician. (7-1-93)
06. Protocol. A written document mutually agreed upon and signed and dated by the physician's assistant and supervising physician. The Board of Medicine may review written protocols, job descriptions, policy statements, or other documents that define the responsibilities of the physician's assistant in the practice setting, and may require such changes as needed to achieve compliance with these rules, and to safeguard the public. (7-1-93)

**011. -- 019. (RESERVED).**

**020. APPLICATION.**

01. Registration Applications. All applications for registration as physician's assistants shall be made to the Board on forms supplied by the Board. (7-1-93)
02. Reapplication. If more than two (2) years have elapsed since a physician's assistant has actively engaged in practice, reapplication to the Board as a new applicant is required. The Board may require evidence of an educational update and close supervision to assure safe and qualified performance. (7-1-93)

**021. REQUIREMENTS FOR REGISTRATION.**

01. Baccalaureate Degree. Applicants for registration shall provide evidence of having received a

college baccalaureate degree and completed an approved program as defined in Subsection 010.02. (7-1-93)

02. National Certifying Examination. Satisfactory completion and passage of the certifying examination for physician's assistants, administered by the National Commission of Certification for physician's assistants or such other examinations, which may be written, oral or practical, as the Board may require; and (7-1-96)

a. A listing of the specific activities which will be performed by the applicant. (7-1-93)

b. The specific locations and facilities in which the physician's assistant will function; and (7-1-93)

c. The methods to be used to insure responsible direction and control of the activities of the applicant. A copy of an agreement providing for a supervising physician registered pursuant to the rules of the Idaho State Board of Medicine, and a copy of an agreement providing for an alternate supervising physician in the absence of the supervising physician. Copies of the agreement shall be signed by both parties, The agreement shall provide for: (7-1-93)

i. Collaborative development and periodic review (at least annually) of written protocols providing for the laboratory and diagnostic studies, management of stable, chronically ill patients and prescription writing. (7-1-93)

ii. An on-site visit at least monthly. (7-1-93)

iii. Regularly scheduled conferences between the supervising physician and the physician's assistant. (7-1-93)

iv. Periodic review of a representative sample of records and a periodic review of the medical services being provided by the physician's assistant. This review shall also include an evaluation of adherence to protocols. (7-1-93)

v. Availability of the supervising physician to the physician's assistant in person or by telephone. (7-1-93)

03. Personal Interview. Each applicant, together with his supervising physician, shall be personally interviewed by the Board as follows: (7-1-96)

a. If neither the applicant nor the supervising physicians have previously been interviewed by the Board; or (7-1-96)

b. If a registered physician's assistant makes application for supervision by a new supervising physician who has not previously been interviewed by the Board, only the supervising physician must be personally interviewed by the Board; or (7-1-96)

c. If a new applicant applies for registration with a supervising physician who has previously acted as a supervising physician, only the physician's assistant shall be personally interviewed by the Board. (7-1-93)

04. On-site Review. The Board, by and through its designated agents, is authorized and empowered to conduct on-site reviews of the activities of physician's assistants and the locations and facilities in which the physician's assistant practices on an annual basis, when there is any change in the practice locations or at such other times as the Board deems necessary. (7-1-93)

05. Protocol Review. This will include a review of protocols and adherence to these protocols. (7-1-93)

**022. -- 025. (RESERVED).**

**026. REGISTRATION BY ENDORSEMENT.**

Reciprocal registration or registration by endorsement is not permitted and applicants currently registered in other states must comply with the requirements set forth in Section 021 in order to be registered in Idaho. (7-1-93)

**027. (RESERVED).**

**028. SCOPE OF PRACTICE.**

01. Physical Examination. A physician's assistant may evaluate the physical and psychosocial health status through a comprehensive health history and physical examination. This may include the performance of pelvic examinations and pap smears; and (7-1-93)

02. Screening and Evaluating. Initiate appropriate laboratory or diagnostic studies, or both, to screen or evaluate the patient's health status and interpret reported information in accordance with protocols and knowledge of the laboratory or diagnostic studies, provided such laboratory or diagnostic studies are related to and consistent with the physician assistant's scope of practice. (7-1-93)

03. Minor Illness. Diagnose and manage minor illnesses or conditions. (7-1-93)

04. Manage Care. Manage the health care of the stable chronically ill patient in accordance with the medical regimen initiated by the supervising physician. (7-1-93)

05. Emergency Situations. Institute appropriate care which might be required to stabilize a patient's condition in an emergency or potentially life threatening situation until physician consultation can be obtained. (7-1-93)

06. Surgery. The acts of surgery which may be performed by a physician's assistant are minor office surgical procedures such as punch biopsy, sebaceous cyst and ingrown toenail removal, cryotherapy for wart removal, etc.; and the repair of lacerations not involving nerve, tendon, or major vessel. (7-1-96)

07. Casting. Manage the routine care of non-displaced fractures and sprains. (7-1-96)

**029. CONTINUING EDUCATION REQUIREMENTS.**

01. Continuing Competence. A physician's assistant may be required by the Board at any time to demonstrate continuing competence in the performance of any of the tasks for which he has been previously approved. (7-1-93)

02. Requirements for Renewal. Every other year, and prior to renewal of registration for that year, physician's assistants will be required to present evidence, on forms supplied by the Board, of having received one hundred (100) hours of continuing medical education over a two (2) year period. The courses and credits shall be subject to approval of the Board. (7-1-93)

**030. PRACTICE STANDARDS.**

01. Identification. The physician's assistant must at all times when on duty wear a placard or plate identifying himself as a physician's assistant. (7-1-93)

02. Advertise. No physician's assistant may advertise or represent himself, either directly or indirectly, as a physician. (7-1-93)

03. Unauthorized Procedures. A physician's assistant shall not write prescriptions or complete and issue prescription blanks previously signed by any physician; or, act as or engage in the functions of a physician's assistant when the supervising physician is absent and other physician coverage is not available. (7-1-93)

**031. -- 035. (RESERVED).**

**036. GRADUATE PHYSICIAN'S ASSISTANT.**

01. Certification Examination. Any person who has graduated from an approved program and meets all

requirements, but has not yet taken and passed the certification examination, may register with the Board as a graduate physician's assistant. Such registration automatically terminates upon receipt of the certification examination score if the graduate physician's assistant fails to pass the certifying examination. (7-1-96)

02. Board Consideration. Registration as a graduate physician's assistant may also be considered by the Board when: (7-1-96)

a. All application requirements have been met as set forth in Subsection 021.01, except receipt of a baccalaureate degree; and (7-1-93)

b. A personal interview with the applicant and the supervising physician has been conducted by a designated member of the Board. (7-1-93)

c. A plan shall be submitted and approved by the Board for the completion of the baccalaureate degree. (7-1-96)

03. No Prescribing Authority. Physician's assistants operating under a graduate physician's assistant registration shall not be entitled to write any prescriptions and shall be required to have a weekly record review by their supervising physician. (4-2-93)

**037. TERMINATION OF APPROVAL AND DISCIPLINARY PROCEEDINGS.**

01. Discipline. Every person registered as a physician's assistant is subject to discipline pursuant to the procedures and powers established by and set forth in Section 54-1806A, Idaho Code and the Administrative Procedures Act. (7-1-93)

02. Grounds for Discipline. In addition to the grounds for discipline set forth in Section 54-1814, Idaho Code, persons registered as physician's assistants are subject to discipline upon the following grounds: (7-1-93)

a. The physician's assistant had held himself or herself out, or permitted another to represent him or her to be a licensed physician; (7-1-93)

b. The physician's assistant had in fact performed otherwise than at the discretion and under the supervision of a physician licensed by the Board; (7-1-93)

c. The physician's assistant has performed a task or tasks beyond the scope of activities allowed by Section 028. (7-1-93)

d. The physician's assistant is a habitual or excessive user of intoxicants or drugs; (7-1-93)

e. The physician's assistant had demonstrated manifest incapacity to carry out the functions of a physician's assistant (7-1-93)

03. Registration Cancellation. upon termination of an employment relationship between a physician's assistant and his supervising physician, the Board shall be notified and the registration shall be automatically canceled if written notice of a new employment relationship, position description and protocols are not received and approved by the Board. (7-1-96)

**038. -- 040. (RESERVED).**

**041. PHYSICIAN'S ASSISTANT TRAINEE.**

01. Training. Any person undergoing training as a physician's assistant must register with the Board as a trainee, and must comply with the rules as set forth herein. (7-1-93)

02. Approved Program. Notwithstanding any other provision of these rules, a trainee may perform patient services when such services are rendered within the scope of an approved program. (7-1-93)

**042. PRESCRIPTION WRITING.**

01. Approval and Authorization Required. A physician's assistant may write prescriptions for drugs only in accordance with approval and authorization granted. (7-1-93)

02. Application. A physician's assistant who wishes to apply for prescription writing authority shall submit an application for such purpose to the Board of Medicine. In addition to the information contained in the general application for physician's assistant approval, the application for prescription writing authority shall include the following information: (7-1-93)

a. Documentation of all pharmacology course content completed, the length and whether a passing grade was achieved (at least thirty (30) hours). (7-1-93)

b. A statement of the frequency with which the supervising physician will review prescriptions written. (7-1-93)

c. A signed statement from the supervising physician certifying that, in the opinion of the supervising physician, the physician's assistant is qualified to prescribe the drugs for which the physician's assistant is seeking approval and authorization. (7-1-93)

d. If the applicant has prescribed medications in another state prior to application for prescription writing authority, the following information will be submitted: (7-1-93)

i. A listing of drugs previously prescribed and an estimate of the frequency with which the physician's assistant prescribed the drugs in Section 054 of these rules. (7-1-93)

ii. Statement of the length of time drugs were previously prescribed, and the length of time the applicant has practiced as a physician's assistant stating the site(s) and supervising physician(s). (7-1-93)

03. Prescription Forms. Prescription forms used by the physician's assistant must be printed with the name, address, and telephone number of the physician's assistant and of the supervising physician. (7-1-93)

04. Record Keeping. The physician's assistant shall maintain accurate records, accounting for all prescriptions written and medication delivered. (7-1-93)

**043. DELIVERY OF MEDICATION.**

01. Pre-Dispensed Medication. The physician's assistant may legally provide a patient with more than one (1) dose of a medication at sites or at times when a pharmacist is not available. The pre-dispensed medications shall be for an emergency period to be determined on the basis of individual circumstances, but the emergency period will extend only until a prescription can be obtained from a pharmacy. (7-1-93)

02. Consultant Pharmacist. The physician's assistant shall have a consultant pharmacist responsible for providing the physician's assistant with pre-dispensed medication in accordance with federal and state statutes for packaging, labelling, and storage. (7-1-93)

03. Limitation of Items. The pre-dispensed medication shall be limited to only those categories of drug identified in the formulary, except a physician's assistant may provide other necessary emergency medication to the patient as directed by a physician. (7-1-93)

04. Exception from Emergency Period. Physician's assistant in agencies, clinics or both, providing family planning, communicable disease and chronic disease services under government contract or grant may provide pre-dispensed medication for these specific services and shall be exempt from the emergency period. Agencies, clinics or both, in remote sites without pharmacies shall be exempt from the emergency period, providing that they must submit an application and obtain formal approval from the Board of Medicine. (7-1-93)

**044. -- 050. (RESERVED).**

**051. FEES:**

01. Registration Fee. The fee for registering with the Board shall not be less than eighty dollars (\$80) for a physician's assistant, and not less than ten dollars (\$10) for the physician's assistant trainee. (7-1-93)

02. Annual Renewal. Registration shall be renewed annually on July 1 of every year. The Board shall collect a fee of not less than thirty dollars (\$30) for each renewal of registration. (7-1-93)

03. Registration Cancellation. Failure to reregister and pay the annual registration fee shall cause the registration to be canceled. However, registration can be renewed up to two (2) years following cancellation by payment of past renewal fees, plus a penalty fee of not less than twenty-five dollars (\$25). After two (2) years it will be necessary to file an original application for registration with payment of the appropriate fee. (7-1-93)

**052. EFFECTIVE DATE.**

These rules shall be effective May 5, 1982. Prescriptive privileges and further amendments effective March 24, 1989. Protocols and further amendments shall be effective after March 30, 1992. Amendments providing graduate physician's assistant registration effective April 2, 1993. (7-1-93)

**053. WRITTEN PROTOCOLS.**

Within one hundred and twenty (120) days of the effective date of these rules, all currently approved physician's assistants shall have written protocols as specified in IDAPA 22.01.03.010.06. (7-1-93)

**054. FORMULARY.**

Pursuant to protocols, a physician's assistant may write prescriptions only for medications from the following categories of legend drugs. Protocols should specify any limitations on the number of dosages that may be prescribed, any requirements for consultation prior to prescription writing, and any requirements for periodic review by the supervising physician during the course of treatment with the medication. No controlled substances may be prescribed. (7-1-93)

01. Categories of Legend Drugs. (7-1-96)
  - a. Antihistamines, decongestants, expectorants, and antitussives; (7-1-93)
  - b. Antibacterials, antibiotics (Probenecid when prescribed for treatment of gonorrhea in conjunction with penicillin sulfonamides); (7-1-93)
  - c. Nonnarcotic analgesics and muscle relaxants; (7-1-93)
  - d. Topical steroid preparations; (7-1-93)
  - e. Antipruritics; (7-1-93)
  - f. Topical eye, ear, nose, and throat preparations, excluding ophthalmic steroids; (7-1-93)
  - g. Antinauseants and antidiarrheals; (7-1-93)
  - h. Contraceptive agents and devices; (7-1-93)
  - i. Dietary supplements, i.e., iron, vitamins, including fluorides; (7-1-93)
  - j. Antifungals, anthelmintics, scabicides, and pediculicides; (7-1-93)
  - k. Topical and local anesthetics; (7-1-93)
  - l. Immunizations and vaccines (Biologicals); (7-1-93)

- m. Antiviral agents; (7-1-93)
- n. Diuretics; (7-1-93)
- o. Smoking cessation agents; (7-1-93)
- p. Gastrointestinal agents, antiflatulants; (7-1-93)
- q. Nonsteroidal anti-inflammatory agents; (7-1-93)
- r. Bronchial dilators, antihypertensives, antispasmodics; (7-1-93)
- s. Hormonal therapy; (7-1-93)
- t. Antidiabetics, antiarthritics, antigout, antilipids; (7-1-93)
- u. Antianginal preparations; (7-1-93)
- v. Anticonvulsants; (7-1-93)
- w. Chemotherapeutics; (7-1-93)
- x. Antidepressants; (7-1-93)
- y. Anti-anxiety agents - limited to Buspirone; (7-1-96)
- z. Migraine preparations; (7-1-96)
- aa. Short-term prescriptions of corticosteroids limited to prescriptions for fourteen (14) days or less. (7-1-96)
- 02. Refills. A physician's assistant may order refills for other drugs originally prescribed by the supervising physician for patients with stable chronic illness. (7-1-96)

**055. -- 999. (RESERVED).**



**APPENDIX A**  
**GUIDELINES FOR PROTOCOLS**

Revised Physician's Assistant Rules specify that protocols mutually agreed upon and signed and dated by the physician's assistant and the physician, and specified in the scope of practice of physician's assistants, shall be developed and available for review for: laboratory and diagnostic studies, excluding major or acute illness, management of the stable chronically ill patient, and prescription writing (Rule IDAPA 22.01.03.010.06).

**LABORATORY AND DIAGNOSTIC STUDIES**

Identify the laboratory and diagnostic studies that may be:

1. Ordered and interpreted independently.
2. Ordered and interpreted following consultation.
3. Laboratory tests relating to major or acute illness.

**MANAGEMENT OF HEALTH CARE OF THE STABLE CHRONICALLY ILL PATIENT**

Identify chronic disease problems that may be:

1. Managed independently by the Physician's Assistant.
2. Managed after consultation.

**PRESCRIPTION WRITING**

Identify the categories of drugs on the formulary that:

1. Will not be prescribed.
2. Require consultation prior to prescription writing.
3. Require any limitations in the number of dosages that may be prescribed.
4. Require periodic review by the supervising physician during the course of treatment.
5. Prescription writing authority is limited to the specified authorization in the authorized scope of practice.

The protocols should be reviewed periodically (at least annually). Rule IDAPA 22.01.03.021.02.c.i.

Records should indicate adherence to the protocols.