

# Table Of Contents

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## 22.01.03 - Rules For The Licensure Of Physician Assistants

000. Legal Authority. ....	2
001. Title And Scope. ....	2
002. -- 009. (Reserved). ....	2
010. Definitions. ....	2
011. -- 019. (Reserved). ....	2
020. Application. ....	2
021. Requirements For Licensure. ....	3
022. -- 025. (Reserved). ....	3
026. Licensure By Endorsement. ....	3
027. (Reserved). ....	3
028. Scope Of Practice. ....	3
029. Continuing Education Requirements. ....	4
030. Practice Standards. ....	4
031. -- 035. (Reserved). ....	5
036. Graduate Physician Assistant. ....	5
037. Termination Of Approval And Disciplinary Proceedings. ....	5
038. -- 040. (Reserved). ....	6
041. Physician Assistant Trainee. ....	6
042. Prescription Writing. ....	6
043. Delivery Of Medication. ....	7
044. -- 050. (Reserved). ....	7
051. Fees. ....	7
052. Effective Date. ....	7
053. Delegation Of Services Agreement. ....	7
054. -- 999. (Reserved). ....	7

**IDAPA 22  
TITLE 01  
Chapter 03**

**22.01.03 - RULES FOR THE LICENSURE OF PHYSICIAN 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 assistants by persons licensed to practice medicine and surgery or osteopathic medicine and surgery in Idaho. (3-19-99)

**001. TITLE AND SCOPE.**

**01. Title.** These rules shall be cited as IDAPA 22.01.03, "Rules for the Licensure of Physician Assistants". (3-19-99)

**02. Scope.** Pursuant to Idaho Code, Section 54-1807(2), physician assistants must be licensed with the Board prior to commencement of activities. (3-19-99)

**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 assistants which is approved by the Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Programs. (3-19-99)

**03. Supervising Physician.** A person registered by the Board who is licensed to practice medicine and surgery or osteopathic medicine and surgery in Idaho, who is responsible for the direction and supervision of the activities of the physician assistant. (3-19-99)

**04. Alternate 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 assistant in the temporary absence of the supervising physician. (3-19-99)

**05. Physician 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. (3-19-99)

**06. Delegation Of Services (DOS) Agreement.** A written document mutually agreed upon and signed and dated by the physician assistant and supervising physician that defines the working relationship and delegation of duties between the supervising physician and the physician assistant as specified by Board rule. The Board of Medicine may review the written delegation of services agreement, job descriptions, policy statements, or other documents that define the responsibilities of the physician assistant in the practice setting, and may require such changes as needed to achieve compliance with these rules, and to safeguard the public. (3-19-99)

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

**020. APPLICATION.**

**01. License Applications.** All applications for licensure as physician assistants shall be made to the Board on forms supplied by the Board. (3-19-99)

**02. Reapplication.** If more than two (2) years have elapsed since a physician 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. (3-19-99)

**021. REQUIREMENTS FOR LICENSURE.**

**01. Baccalaureate Degree.** Applicants for licensure shall provide evidence of having received a college baccalaureate degree and completed an approved program as defined in Subsection 010.02. (3-19-99)

**02. National Certifying Examination.** Satisfactory completion and passage of the certifying examination for physician assistants, administered by the National Commission of Certification of Physician Assistants or such other examinations, which may be written, oral or practical, as the Board may require. (3-19-99)

**03. Personal Interview.** The Board may at its discretion, require the applicant or the supervising physician or both to appear for a personal interview. (3-19-99)

**04. Completion Of Form.** If the applicant is to practice in Idaho, complete a form provided by the Board indicating: (3-19-99)

a. The applicant has completed a delegation of services agreement signed by the physician assistant, supervising physician and alternate supervising physicians; and (3-19-99)

b. The agreement is on file at the Idaho practice sites; or (3-19-99)

c. Complete a form provided by the Board indicating the applicant is not practicing in Idaho and prior to practicing in Idaho, the applicant will meet the requirements of Subsections 021.04.a. and 021.04.b. (3-19-99)

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

**026. LICENSURE BY ENDORSEMENT.**

Reciprocal licensure or licensure by endorsement is not permitted and applicants currently registered or licensed in other states must comply with the requirements set forth in Section 021 in order to be licensed in Idaho. (3-19-99)

**027. (RESERVED).**

**028. SCOPE OF PRACTICE.**

**01. Physical Examination.** A physician 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 (3-19-99)

**02. Screening And Evaluating.** Initiate appropriate laboratory or diagnostic studies, or both, to screen or evaluate the patient health status and interpret reported information in accordance with 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. (3-19-99)

**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 assistant are minor office surgical procedures such as punch biopsy, sebaceous cyst and ingrown toenail removal, cryotherapy for wart removal; assist in surgery with retraction, surgical wound exposure, and skin closure with direct personal supervision of the supervising physician; and the repair of lacerations, not involving nerve, tendon, or major vessel. (3-19-99)

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

**08. Hospital Discharge Summary.** May complete hospital discharge summaries and the discharge summary shall be co-signed by the supervising physician. (3-19-99)

**029. CONTINUING EDUCATION REQUIREMENTS.**

**01. Continuing Competence.** A physician 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. (3-19-99)

**02. Requirements For Renewal.** Every other year, and prior to renewal of license for that year, physician assistants will be required to present evidence of having received one hundred (100) hours of continuing medical education over a two-year period. The courses and credits shall be subject to approval of the Board. (3-19-99)

**030. PRACTICE STANDARDS.**

**01. Identification.** The physician assistant must at all times when on duty wear a placard or plate identifying himself as a physician assistant. (3-19-99)

**02. Advertise.** No physician assistant may advertise or represent himself, either directly or indirectly, as a physician. (3-19-99)

**03. Unauthorized Procedures.** A physician assistant shall not write prescriptions or complete and issue prescription blanks previously signed by any physician; diagnose and manage major illnesses or conditions or manage the health care of unstable or acutely ill or injured patients unless those conditions are minor; or, act as or engage in the functions of a physician assistant when the supervising physician is absent and other physician coverage is not available. (3-19-99)

**04. Delegation Of Services Agreement.** Each licensed physician assistant shall maintain a current copy of a Delegation of Services (DOS) Agreement between the physician assistant and each of his or her supervising physicians. This agreement shall not be sent to the Board, but must be maintained on file at each location in which the physician assistant is practicing. This agreement shall be made immediately available to the Board upon request and shall include: (3-19-99)

a. A listing of the specific activities which will be performed by the physician assistant. (3-19-99)

b. The specific locations and facilities in which the physician assistant will function; and (3-19-99)

c. The methods to be used to insure responsible direction and control of the activities of the physician assistant which shall provide for: (3-19-99)

i. An on-site visit at least monthly; (3-19-99)

ii. Regularly scheduled conferences between the supervising physician and the physician assistant; (3-19-99)

iii. Periodic review of a representative sample of records and a periodic review of the medical services being provided by the physician assistant. This review shall also include an evaluation of adherence to the delegation of services agreement; (3-19-99)

iv. Availability of the supervising physician to the physician assistant in person or by telephone and procedures for providing backup for the physician assistant in emergency situations; and (3-19-99)

v. Procedures for addressing situations outside the scope of practice of the physician assistant. (3-19-99)

d. The drug categories or specific legend drugs and controlled drugs, Schedule III through V that will be prescribed provided that the legend drugs and controlled drugs shall be consistent with the regular prescriptive practice of the supervising physician. (3-19-99)

**05. 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 assistants and the locations and facilities in which the physician assistant practices at such times as the Board deems necessary. (3-19-99)

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

**036. GRADUATE PHYSICIAN 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 be licensed with the Board as a graduate physician assistant. Such license shall automatically be canceled upon receipt of the certification examination score if the graduate physician assistant fails to pass the certifying examination. (3-19-99)

**02. Board Consideration.** Registration as a graduate physician assistant may also be considered by the Board when: (3-19-99)

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 or the supervising physician or both may be required and will be conducted by a designated member of the Board. (3-19-99)

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 assistants operating under a graduate physician assistant license shall not be entitled to write any prescriptions and shall be required to have a weekly record review by their supervising physician. (3-19-99)

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

**01. Discipline.** Every person licensed as a physician 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. (3-19-99)

**02. Grounds For Discipline.** In addition to the grounds for discipline set forth in Section 54-1814, Idaho Code, persons licensed as physician assistants are subject to discipline upon the following grounds: (3-19-99)

a. The physician assistant had held himself or herself out, or permitted another to represent him or her to be a licensed physician; (3-19-99)

b. The physician assistant had in fact performed otherwise than at the discretion and under the supervision of a physician licensed by the Board; (3-19-99)

c. The physician assistant has performed a task or tasks beyond the scope of activities allowed by Section 028. (3-19-99)

d. The physician assistant is a habitual or excessive user of intoxicants or drugs; (3-19-99)

e. The physician assistant had demonstrated manifest incapacity to carry out the functions of a physician assistant. (3-19-99)

f. The physician assistant has failed to complete or maintain a current copy of the Delegation of Services Agreement as specified by Subsection 030.04. (3-19-99)

g. The physician assistant has failed to notify the Board of a change or addition of a supervising physician as specified by Subsection 037.03. (3-19-99)

**03. Notification Of Change Or Addition Of Supervising Physician.** A physician assistant upon changing supervising physicians or adding an additional supervising physician must notify the Board. Such notification shall include: (3-19-99)

a. The name, business address and telephone of the new or additional supervising physician(s); (3-19-99)

b. The name, business address, and telephone number of the physician assistant; and (3-19-99)

c. Comply with the requirements of Subsection 021.04. (3-19-99)

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

**041. PHYSICIAN ASSISTANT TRAINEE.**

**01. Training.** Any person undergoing training as a physician assistant must register with the Board as a trainee, and must comply with the rules as set forth herein. (3-19-99)

**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 assistant may issue written or oral prescriptions for legend drugs and controlled drugs, Schedule III through V only in accordance with approval and authorization granted by the Board and in accordance with the current delegation of services agreement and shall be consistent with the regular prescriptive practice of the supervising physician. (3-19-99)

**02. Application.** A physician 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 assistant approval, the application for prescription writing authority shall include the following information: (3-19-99)

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 assistant is qualified to prescribe the drugs for which the physician assistant is seeking approval and authorization. (3-19-99)

d. The physician assistant to be authorized to prescribe Schedule III through V drugs shall be registered with the Federal Drug Enforcement Administration and the Idaho Board of Pharmacy. (3-19-99)

**03. Prescription Forms.** Prescription forms used by the physician assistant must be printed with the name, address, and telephone number of the physician assistant and of the supervising physician. (3-19-99)

**04. Record Keeping.** The physician assistant shall maintain accurate records, accounting for all prescriptions written and medication delivered. (3-19-99)

**043. DELIVERY OF MEDICATION.**

**01. Pre-Dispensed Medication.** The physician 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. (3-19-99)

**02. Consultant Pharmacist.** The physician assistant shall have a consultant pharmacist responsible for providing the physician assistant with pre-dispensed medication in accordance with federal and state statutes for packaging, labelling, and storage. (3-19-99)

**03. Limitation Of Items.** The pre-dispensed medication shall be limited to only those categories of drug identified in the delegation of services agreement, except a physician assistant may provide other necessary emergency medication to the patient as directed by a physician. (3-19-99)

**04. Exception From Emergency Period.** Physician 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. (3-19-99)

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

**051. FEES.**

**01. Licensure Fee.** The fee for licensure shall be one hundred twenty dollars (\$120) for a physician assistant, and ten dollars (\$10) for registration as physician assistant trainee. (3-18-99)

**02. Annual Renewal.** License shall be renewed annually on July 1 of every year. The Board shall collect a fee of fifty dollars (\$50) for each renewal of a license. (3-18-99)

**03. License Cancellation.** Failure to renew a license and pay the annual renewal fee shall cause the license to be canceled. However, a license can be renewed up to two (2) years following cancellation by payment of past renewal fees, plus a penalty fee of twenty-five dollars (\$25). After two (2) years it will be necessary to file an original application for licensure with payment of the appropriate fee. (3-18-99)

**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. DELEGATION OF SERVICES AGREEMENT.**

Within one hundred and twenty (120) days of the effective date of these rules, all currently licensed physician assistants shall have a written delegation of services agreement as specified in IDAPA 22.01.03, "Rules for the Licensure of Physician Assistants," Subsection 030.04. (3-19-99)

**054. -- 999. (RESERVED).**

# Subject Index

- A**  
Advertise 4  
Alternate Supervising Physician 2  
Annual Renewal 7  
Application 2  
Application, Physician Assistant To  
    Apply For Prescription Writing  
    Authority 6  
Approval And Authorization  
    Required 6  
Approved Program 2  
Approved Program, Physician's  
    Assistant Trainee 6
- B**  
Baccalaureate Degree 3  
Board 2  
Board Consideration 5
- C**  
Casting 4  
Certification Examination 5  
Completion Of Form 3  
Consultant Pharmacist 7  
Continuing Competence 4  
Continuing Education Requirements 4
- D**  
Definitions 2  
Delegation Of Services (DOS)  
    Agreement 2  
Delegation Of Services Agreement 7  
Delegation Of Services Agreement,  
    Practice Standards 4  
Delivery Of Medication 7  
Discipline 5
- E**  
Effective Date 7  
Emergency Situations 3  
Exception From Emergency Period 7
- F**  
Fees 7
- G**  
Graduate Physician's Assistant 5  
Grounds For Discipline 5
- H**  
Hospital Discharge Summary 4
- I**  
Identification 4
- L**  
Legal Authority 2  
License Applications 2  
License Cancellation 7  
Licensure By Endorsement 3  
Licensure Fee 7  
Limitation Of Items 7
- M**  
Manage Care 3  
Minor Illness 3
- N**  
National Certifying Examination 3  
No Prescribing Authority 5  
Notification Of Change Or Addition Of  
    Supervising Physician 6
- O**  
On-Site Review 5
- P**  
Personal Interview 3  
Physical Examination 3  
Physician Assistant 2  
Physician's Assistant Trainee 6  
Practice Standards 4  
Pre-Dispensed Medication 7  
Prescription Forms 6  
Prescription Writing 6
- R**  
Reapplication 2  
Record Keeping 6  
Requirements For Licensure 3  
Requirements For Renewal 4
- S**  
Scope 2  
Scope Of Practice 3  
Screening And Evaluating 3  
Supervising Physician 2  
Surgery 3
- T**  
Termination Of Approval And  
    Disciplinary Proceedings 5  
Title 2  
Title And Scope 2  
Training 6
- U**  
Unauthorized Procedures 4