PHYSICIAN ASSISTANTS, REGISTRATION

CHAPTER 147A

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Delegated authority to prescribe, dispense, and administer drugs and medical devices.

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147A.08 EXEMPTIONS.

- (a) This chapter does not apply to, control, prevent, or restrict the practice, service, or activities of persons listed in section 147.09, clauses (1) to (6) and (8) to (13), persons regulated under section 214.01, subdivision 2, or persons defined in section 144.1501, subdivision 1, paragraphs (f), (h), and (i).
 - (b) Nothing in this chapter shall be construed to require registration of:
- (1) a physician assistant student enrolled in a physician assistant or surgeon assistant educational program accredited by the Committee on Allied Health Education and Accreditation or by its successor agency approved by the board;
- (2) a physician assistant employed in the service of the federal government while performing duties incident to that employment; or
- (3) technicians, other assistants, or employees of physicians who perform delegated tasks in the office of a physician but who do not identify themselves as a physician assistant.

History: 1Sp2005 c 4 art 6 s 40

147A.18 DELEGATED AUTHORITY TO PRESCRIBE, DISPENSE, AND ADMINIS-TER DRUGS AND MEDICAL DEVICES.

Subdivision 1. Delegation. (a) A supervising physician may delegate to a physician assistant who is registered with the board, certified by the National Commission on Certification of Physician Assistants or successor agency approved by the board, and who is under the supervising physician's supervision, the authority to prescribe, dispense, and administer legend drugs, medical devices, and controlled substances subject to the requirements in this section. The authority to dispense includes, but is not limited to, the authority to request, receive, and dispense sample drugs. This authority to dispense extends only to those drugs described in the written agreement developed under paragraph (b).

- (b) The agreement between the physician assistant and supervising physician and any alternate supervising physicians must include a statement by the supervising physician regarding delegation or nondelegation of the functions of prescribing, dispensing, and administering of legend drugs and medical devices to the physician assistant. The statement must include a protocol indicating categories of drugs for which the supervising physician delegates prescriptive and dispensing authority. The delegation must be appropriate to the physician assistant's practice and within the scope of the physician assistant's training. Physician assistants who have been delegated the authority to prescribe, dispense, and administer legend drugs and medical devices shall provide evidence of current certification by the National Commission on Certification of Physician Assistants or its successor agency when registering or reregistering as physician assistants. Physician assistants who have been delegated the authority to prescribe controlled substances must present evidence of the certification and hold a valid DEA certificate. Supervising physicians shall retrospectively review the prescribing, dispensing, and administering of legend and controlled drugs and medical devices by physician assistants, when this authority has been delegated to the physician assistant as part of the delegation agreement between the physician and the physician assistant. This review must take place as outlined in the internal protocol. The process and schedule for the review must be outlined in the delegation agreement.
 - (c) The board may establish by rule:

- (1) a system of identifying physician assistants eligible to prescribe, administer, and dispense legend drugs and medical devices;
- (2) a system of identifying physician assistants eligible to prescribe, administer, and dispense controlled substances;
- (3) a method of determining the categories of legend and controlled drugs and medical devices that each physician assistant is allowed to prescribe, administer, and dispense; and
- (4) a system of transmitting to pharmacies a listing of physician assistants eligible to prescribe legend and controlled drugs and medical devices.

[For text of subd 2, see M.S.2004]

- Subd. 3. Other requirements and restrictions. (a) The supervising physician and the physician assistant must complete, sign, and date an internal protocol which lists each category of drug or medical device, or controlled substance the physician assistant may prescribe, dispense, and administer. The supervising physician and physician assistant shall submit the internal protocol to the board upon request. The supervising physician may amend the internal protocol as necessary, within the limits of the completed delegation form in subdivision 5. The supervising physician and physician assistant must sign and date any amendments to the internal protocol. Any amendments resulting in a change to an addition or deletion to categories delegated in the delegation form in subdivision 5 must be submitted to the board according to this chapter, along with the fee required.
- (b) The supervising physician and physician assistant shall review delegation of prescribing, dispensing, and administering authority on an annual basis at the time of reregistration. The internal protocol must be signed and dated by the supervising physician and physician assistant after review. Any amendments to the internal protocol resulting in changes to the delegation form in subdivision 5 must be submitted to the board according to this chapter, along with the fee required.
 - (c) Each prescription initiated by a physician assistant shall indicate the following:
 - (1) the date of issue;
 - (2) the name and address of the patient;
 - (3) the name and quantity of the drug prescribed;
 - (4) directions for use; and
 - (5) the name and address of the prescribing physician assistant.
- (d) In prescribing, dispensing, and administering legend drugs and medical devices, including controlled substances as defined in section 152.01, subdivision 4, a physician assistant must conform with the agreement, chapter 151, and this chapter.

[For text of subds 4 and 5, see M.S.2004]

History: 2005 c 147 art 6 s 1,2