

**11/01/01**

**STATE OF OKLAHOMA  
PHYSICIAN ASSISTANT ACT  
Title 59 O.S., Sections 519 - 524**

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## **Section 519. Repealed**

### **Section 519.1. Short title**

The provisions of this act shall be known and may be cited as the "Physician Assistant Act".

*Added by Laws 1993, c. 289, § 1, emerg. eff. June 3, 1993.*

### **Section 519.2. Definitions**

As used in the Physician Assistant Act:

1. "Board" means the State Board of Medical Licensure and Supervision;
2. "Committee" means the Physician Assistant Committee;
3. "Health care services" means services which require training in the diagnosis, treatment and prevention of disease, including the use and administration of drugs, and which are performed by physician assistants under the supervision and at the direction of physicians. Such services include, but are not limited to:
  - a. initially approaching a patient of any age group in a patient care setting to elicit a detailed history, performing a physical examination, delineating problems and recording the data,
  - b. assisting the physician in conducting rounds in acute and long-term inpatient care settings, developing and implementing patient management plans, recording progress notes and assisting in the provision of continuity of care in other patient care settings,
  - c. ordering, performing or interpreting, at least to the point of recognizing deviations from the norm, common laboratory, radiological, cardiographic and other routine diagnostic procedures used to identify pathophysiologic processes,
  - d. ordering or performing routine procedures such as injections, immunizations, suturing and wound care, and managing simple conditions produced by infection, trauma or other disease processes,
  - e. assisting in the management of more complex illness and injuries, which may include assisting surgeons in the conduct of operations and taking initiative in performing evaluation and therapeutic procedures in response to life-threatening situations,
  - f. instructing and counseling patients regarding compliance with prescribed

therapeutic regimens, normal growth and development, family planning, emotional problems of daily living and health maintenance,

g. facilitating the referral of patients to the community's health and social services agencies when appropriate, and

h. providing health care services which are delegated by the supervising physician when the service:

- (1) is within the physician assistant's skill,
- (2) forms a component of the physician's scope of practice, and
- (3) is provided with supervision, including authenticating with the signature any form that may be authenticated by the supervising physician's signature with prior delegation by the physician.

Nothing in the Physician Assistant Act shall be construed to permit physician assistants to provide health care services independent of physician supervision;

4. "Patient care setting" means a physician's office, clinic, hospital, nursing home, extended care facility, patient's home, ambulatory surgical center or any other setting authorized by the supervising physician;

5. "Physician assistant" means a health care professional, qualified by academic and clinical education and licensed by the State Board of Medical Licensure and Supervision, to provide health care services in any patient care setting at the direction and under the supervision of a physician or group of physicians;

6. "Physician Assistant Drug Formulary" means a list of drugs and other medical supplies, approved by the State Board of Medical Licensure and Supervision after consultation with the State Board of Pharmacy, that physician assistants are permitted to prescribe and order under the direction of their supervising physicians;

7. "Remote patient care setting" means an outpatient clinic or physician's office that qualifies as a Rural Health Clinic, a Federally Qualified Health Center, a nonprofit community-based health center, or any other patient care setting approved by the State Board of Medical Licensure and Supervision, and that provides service to a medically underserved population, as defined by the appropriate government agency;

8. "Supervising physician" means an individual holding a license as a physician from the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, who supervises physician assistants;

9. "Supervision" means overseeing and accepting the responsibility for the health care services performed by a physician assistant; and

10. "Application to practice" means a written description that defines the scope of practice and the terms of supervision of a physician assistant in a medical practice.

*Added by Laws 1993, c. 289, § 2, emerg. eff. June 3, 1993; Amended by Laws 1997, c. 47, § 1, emerg. eff. April 7, 1997; Amended by Laws 1998, c. 128, § 2, eff. November 1, 1998; Amended by Laws 2001, SB 32, c. 385, § 2, eff. November 1, 2001.*

### **Section 519.3. Physician Assistant Committee--Powers and duties**

A. There is hereby created the Physician Assistant Committee, which shall be composed of seven (7) members. Two members of the Committee shall be physician assistants appointed by the State Board of Medical Licensure and Supervision from a list of qualified individuals submitted by the Oklahoma Academy of Physician Assistants. One member shall be a physician appointed by the Board from its membership. One member shall be a physician appointed by the Board from a list of qualified individuals submitted by the Oklahoma State Medical Association and who is not a member of the Board. One member shall be a physician appointed by the State Board of Osteopathic Examiners from its membership. One member shall be a physician appointed by the State Board of Osteopathic Examiners from a list of qualified individuals submitted by the Oklahoma Osteopathic Association and who is not a member of said board. One member shall be a licensed pharmacist appointed by the Board of Pharmacy.

B. The term of office for each member of the Committee shall be five (5) years. Provided, of those members initially appointed to the Committee by the Board, two shall serve three-year terms and two shall serve five-year terms, as designated by the Board; of those members initially appointed to the Committee by the State Board of Osteopathic Examiners, one shall serve a two-year term and one shall serve a four-year term, as designated by said board; and the member initially appointed by the Board of Pharmacy shall serve a five-year term.

C. The Committee shall meet at least quarterly. At the initial meeting of the Committee, members shall elect a chair. The chair shall represent the Committee at all meetings of the Board. Four members shall constitute a quorum for the purpose of conducting official business of the Committee.

D. The State Board of Medical Licensure and Supervision is hereby granted the power and authority to promulgate rules, which are in accordance with the provisions of Section 519.1 et seq. of this title, governing the requirements for licensure as a physician assistant, as well as to establish standards for training, approve institutions for training, and regulate the standards of practice of a physician assistant after licensure, including the power of revocation of a license.

E. The State Board of Medical Licensure and Supervision is hereby granted the power and authority to investigate all complaints, hold hearings, subpoena witnesses and initiate prosecution concerning violations of Section 519.1 et seq of this title. When such complaints

involve physicians licensed by the State Board of Osteopathic Examiners, the State Board of Osteopathic Examiners shall be officially notified of such complaints.

- F. 1. The Committee shall advise the Board on matters pertaining to physician assistants, including, but not limited to:
- a. educational standards required to practice as a physician assistant,
  - b. licensure requirements required to practice as a physician assistant,
  - c. methods and requirements to assure the continued competence of physician assistants after licensure,
  - d. the drugs and other medical supplies for which physician assistants are permitted to prescribe and order under the direction of their supervising physicians,
  - e. the grounds for revocation or suspension of a license for a physician assistant,
  - f. education and experience requirements to receive approval to practice in remote patient care settings, and
  - g. all other matters which may pertain to the practice of physician assistants.

2. The Committee shall review and make recommendations to the Board on all applications for licensure as a physician assistant and all applications to practice which shall be approved by the Board. When considering applicants for licensure, to establish standards of training or approve institutions for training, the Committee shall include the Director, or designee, of all Physician Assistant educational programs conducted by institutions of higher education in the state as members.

3. The Committee shall assist and advise the Board in all hearings involving physician assistants who are deemed to be in violation of Section 519.1 et seq. of this title or the rules of the Board.

*Added by Laws 1993, c. 289, § 3, emerg. eff. June 3, 1993; Amended by Laws 1997, c. 47, § 2, emerg. eff. April 07, 1997; Amended by Laws 1998, c. 128, § 3, eff. November 01, 1998.*

#### **Section 519.4. Licensure requirements**

To be eligible for licensure as a physician assistant pursuant to the provisions of Section 519.1 et seq. of this title an applicant shall:

1. Be of good moral character;
2. Have graduated from an accredited physician assistant program recognized by the

State Board of Medical Licensure and Supervision; and

3. Successfully pass an examination for physician assistants recognized by the Board.

*Added by Laws 1993, c. 289, § 4, emerg. eff. June 3, 1993; Amended by Laws 1997, c. 47, § 3, emerg. eff. April 07, 1997.*

### **Section 519.5. Repealed**

### **Section 519.6. Filing of application to practice--Services performed--Posting of public notice**

A. No health care services may be performed by a physician assistant unless a current application to practice, jointly filed by the supervising physician and physician assistant, is on file with and approved by the State Board of Medical Licensure and Supervision. The application shall include a description of the physician's practice, methods of supervising and utilizing the physician assistant, and names of alternate supervising physicians who will supervise the physician assistant in the absence of the primary supervising physician.

B. The supervising physician need not be physically present nor be specifically consulted before each delegated patient care service is performed by a physician assistant, so long as the supervising physician and physician assistant are or can be easily in contact with one another by radio, telephone or other means of telecommunication. In all patient care settings, the supervising physician shall provide appropriate methods of supervising the health care services provided by the physician assistant including:

a. being responsible for the formulation or approval of all orders and protocols, whether standing orders, direct orders or any other orders or protocols, which direct the delivery of health care services provided by a physician assistant, and periodically reviewing such orders and protocols,

b. regularly reviewing the health care services provided by the physician assistant and any problems or complications encountered,

c. being available physically or through direct telecommunications for consultation, assistance with medical emergencies or patient referral, and

d. being on-site to provide medical care to patients a minimum of one-half (1/2) day per week. Additional on-site supervision may be required at the recommendation of the Physician Assistant Committee and approved by the Board; and

e. that it remains clear that the physician assistant is an agent of the supervising physician; but, in no event shall the supervising physician be an employee of the physician

assistant.

C. In patients with newly diagnosed chronic or complex illnesses, the physician assistant shall contact the supervising physician within forty-eight (48) hours of the physician assistant's initial examination or treatment and schedule the patient for appropriate evaluation by the supervising physician as directed by the physician.

D. 1. A physician assistant under the direction of a supervising physician may prescribe written and oral prescriptions and orders. The physician assistant may prescribe drugs, including controlled medications in Schedules II through V pursuant to Section 2-312 of Title 63 of the Oklahoma Statutes, and medical supplies and services as delegated by the supervising physician and as approved by the State Board of Medical Licensure and Supervision after consultation with the State Board of Pharmacy on the Physician Assistant Drug Formulary

2. A physician assistant may write an order for a Schedule II drug for immediate or ongoing administration on site. Prescriptions and orders for Schedule II drugs written by a physician assistant must be included on a written protocol determined by the supervising physician and approved by the medical staff committee of the facility or by direct verbal order of the supervising physician. Physician assistants may not dispense drugs, but may request, receive, and sign for professional samples and may distribute professional samples to patients.

E. A physician assistant may perform health care services in patient care settings as authorized by the supervising physician.

F. A physician assistant shall obtain approval from the State Board of Medical Licensure and Supervision prior to practicing in remote patient care settings. Such approval requires documented experience in providing a comprehensive range of primary care services, under the direction of a supervising physician, for at least one (1) year prior to practicing in such settings and such other requirement as the Board may require. The Board is granted the authority to waive this requirement for those applicants possessing equivalent experience and training as recommended by the Committee.

G. Each physician assistant licensed under the Physician Assistant Act shall keep his or her license available for inspection at the primary place of business and shall, when engaged in professional activities, identify himself or herself as a physician assistant.

*Added by Laws 1993, c. 289, § 6, emerg. eff. June 3, 1993; Amended by Laws 1998, c. 128, § 4, eff. November 1, 1998; Amended by Laws 2001, SB 32, c. 385, § 3, eff. November 1, 2001.*

### **Section 519.7. Temporary approval of application to practice**

The Secretary of the State Board of Medical Licensure and Supervision is authorized to grant temporary approval of a license and application to practice to any physician and a physician

assistant who have jointly filed a license and application to practice which meets the requirements set forth by the Board. Such temporary approval to practice shall be reviewed at the next regularly scheduled meeting of the Board. The temporary approval may be approved, extended or rejected by the Board. If rejected, the temporary approval shall expire immediately.

*Added by Laws 1993, c. 289, § 7, emerg. eff. June 3, 1993; Amended by Laws 2001, SB 32, c. 385, § 4, eff. November 1, 2001.*

### **Section 519.8. License renewal--Fees**

A. Licenses issued to physician assistants shall be renewed annually on a date determined by the State Board of Medical Licensure and Supervision. Each application for renewal shall document that the physician assistant has earned at least twenty (20) hours of continuing medical education during the preceding calendar year.

B. The Board shall promulgate, in the manner established by its rules, fees for the following:

1. Initial licensure;
2. License renewal;
3. Late license renewal;
4. Application to practice; and
5. Disciplinary hearing.

*Added by Laws 1993, c. 289, § 8, emerg. eff. June 3, 1993; Amended by Laws 1997, c. 47, § 5, eff. April 07,1997.*

### **Section 519.9. Preexisting certificates**

Any person who holds a certificate as a physician assistant from the State Board of Medical Licensure and Supervision prior to June 3, 1993, shall be granted licensure as a physician assistant under the provisions of Section [519.1](#) et seq. of this title.

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*Added by Laws 1993, c. 289, § 9, emerg. eff. June 3, 1993; Amended by Laws 1997, c. 47, § 6, eff. April 07,1997; Laws 1997, c. 47, § 6 Repealed by Laws 1997, c. 250, § 15, eff. November 1, 1997; Amended by Laws 1997, c. 250, § 14, eff. November 01,1997.*

### **Section 519.10. Violations--Penalties**

Any person who holds herself or himself out as a physician assistant or uses the title "Physician Assistant" without being licensed, or who otherwise violates the provisions of Section 519.1 et seq. of this title shall be guilty of a misdemeanor and, upon conviction, shall be punished by a fine of not less than Fifty Dollars (\$50.00), nor more than Five Hundred Dollars (\$500.00), by imprisonment in the county jail for not less than five (5) days, nor more than thirty (30) days, or by both such fine and imprisonment. Each day of a violation of the provisions of Section 519.1 et seq. of this title shall constitute a separate and distinct offense. Conviction shall also be grounds for the suspension or revocation of the license of a duly licensed physician assistant.

*Added by Laws 1993, c. 289, § 10, emerg. eff. June 3, 1993; Amended by Laws 1997, c. 47, § 7, emerg. eff. April 07, 1997.*

### **Section 519.11. Construction of act**

A. Nothing in this act shall be construed to prevent or restrict the practice, services or activities of any persons of other licensed professions or personnel supervised by licensed professions in this state from performing work incidental to the practice of their profession or occupation, if that person does not represent himself as a physician assistant.

B. Nothing stated in this act shall prevent any hospital from requiring the physician assistant and/or the supervising physician to meet and maintain certain staff appointment and credentialing qualifications for the privilege of practicing as, or utilizing, a physician assistant in the hospital.

C. Nothing in this act shall be construed to permit a physician assistant to practice medicine or prescribe drugs and medical supplies in this state except when such actions are performed under the supervision and at the direction of a physician approved by the State Board of Medical Licensure and Supervision.

*Added by Laws 1993, c. 289, § 11, emerg. eff. June 3, 1993.*

### **Section 520. Repealed**

### **Section 521. Exceptions**

No health care services may be performed under this act in any of the following areas:

(a) The measurement of the powers or range of human vision, or the determination of the accommodation and refractive states of the human eye or the scope of its functions in general, or the fitting or adaptation of lenses or frames for the aid thereof.

(b) The prescribing or directing the use of, or using, any optical device in connection with ocular exercises, visual training, vision training or orthoptics.

(c) The prescribing of contact lenses for, or the fitting or adaptation of contact lenses to, the human eye. Nothing in this section shall preclude the performance of routine visual screening.

*Laws 1972, c. 220, § 3, emerg. eff. April 7, 1972.*

**Section 522. Repealed**

**Section 523. Repealed**

**Section 524. Abortion - Infant prematurely born alive - Right to medical treatment**

The rights to medical treatment of an infant prematurely born alive in the course of an abortion shall be the same as the rights of an infant of similar medical status prematurely born.

*Laws 1977, c. 10, § 1, emerg. eff. March 11, 1977.*