

PHYSICIAN ASSISTANT POLICY COMMITTEE MINUTES
September 9, 2008

The meeting was called to order at approximately 1:45 p.m. on Tuesday, September 9, 2008.

Committee members present: Eugene Imbrogno, M.D.; John Jonesco, D.O.; David Ballinger, PA-C.; Lance Talmage, M.D.; Robert Zaayer, P.A.-C.; and Michael Bowen, P.A.-C.

Staff members present: Cathy Hacker and Kay Rieve.

Guests: Beth Adamson, Executive Director, Ohio Association of Physician Assistants, Kenneth Westerheide, M.D.; Natalie Chorey, PA-C.; and Thomas Hunt, PA-C, Cardinal Orthopaedic Institute.

I. Review of the June 10, 2008 minutes.

Mr. Bowen moved to approve the June 10, 2008 minutes of the Physician Assistant Policy Committee. Dr. Jonesco seconded the motion. All members voted aye. The motion carried.

II. Review of Special Services Plan applications

The committee began the meeting by discussing the applications from **The Cardinal Orthopaedic Institute** that are requesting approval of: injections of the ankle, greater trochanter bursa hip injections, lateral and medial epicondylitis injections, subtalar injections, acromioclavicular shoulder injections, subacromial shoulder injections, and olecranon bursa injections.

The committee was joined by representatives from The Cardinal Orthopaedic Institute. The committee noted that they had reviewed these applications in March 2008 and tabled them pending receipt of clarification on several issues.

Dr. Talmage started the discussion by explaining to the representatives from this group that the Board has historically not approved these types of applications unless they are for extra-articular injections.

Dr. Westerheide asked for clarification of the approval process and Dr. Talmage explained the sequence of Committee and Board approval.

Dr. Talmage asked Dr. Westerheide who was making the decision that the patients need the injection. Dr. Westerheide responded by saying that it was on a case by case basis but that he felt that after the training process outlined in these applications that the PA's could see, evaluate and treat patients without the physician seeing the patients. Ms. Chorey stated that all patients are first seen by the physician. Mr. Hunt informed the committee that he is aware of the physicians protocol and that based on

the physician protocol that he can see, evaluate and recommend physical therapy and if physical therapy were to fail than the physician would inject the patient since PA's were not at this time able to do the injections. Ms. Chorey stated that Cardinal Orthopaedic physician assistant committee has set into place that PA's are not able to see new patients to the practice or existing patients with new conditions. The PA's can only see established patients to the practice that have a plan of care that has be set forth by the supervising physician and that if the patient is not responsive to the plan of care then the physician would need to see the patient prior to the plan of care being changed.

The committee requested an explanation for the offsite supervision when there are so many supervising physicians in the practice. After much discussion it was determined that there was not a need for offsite supervision and Dr. Westerheide agreed to amend these applications to reflect 100% onsite supervision.

The committee requested that this group send in a copy of the their physician assistant credentialing criteria that would show that PA's are not able to see new patients to the practice or existing patients that present with new conditions unless the supervising physician sees and evaluates these patients. They also requested that the group amend their applications to reflect a percentage of chart review and recommended that the PA's have at least 2 years experience in orthopaedics prior to being allowed to perform these injections.

Dr. Talmage moved to approve these applications with the above amendments. Dr. Jonesco requested that the committee wait to approve these applications until they had these amendments in front of them to review. It was noted that if the amendments were not received prior to the meeting of the physician assistant committee on September 10, 2008 that the PA committee would most likely not approve these applications. It was further stated that if the PAPC were to table them this month it would just prolong the process. Dr. Imbrogno seconded the motion to approve. All members voted aye with the exception of Dr. Jonesco. The motion carried.

The committee then discussed the application from William Lovett, M.D. that is requesting approval of exercise stress testing.

The committee recognized that the Board has historically requested that this procedure be performed with no less than 100% onsite supervision and that this group is requesting 98% offsite supervision. The committee requested that staff send a letter to Dr. Lovett and ask him to amend this to 100% onsite supervision. It also appears from this application that this training is very specific to one physician assistant and that this application needs to reflect training and education that would be available to any other physician assistant that may be employed by this practice in the future.

Mr. Ballinger moved to table this application. Dr. Jonesco seconded the motion. All members voted aye. The motion carried.

The Physician Assistant Policy Committee meeting was adjourned at approximately 3:44 p.m. on Tuesday September 9, 2008.

I hereby attest that these are true and accurate minutes of the Physician Assistant Policy Committee of the State Medical Board of Ohio, meeting on September 9, 2008.

Robert Zaayer, P.A.-C
Chair

Copies of documents and/or materials referenced in the minutes of the Physician Assistant Policy Committee meeting are available at the Board offices.