This rule was filed as Rule PA1-95 and Rule PA6-95.

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING

CHAPTER 18 OSTEOPATHIC PHYSICIAN'S ASSISTANTS

PART 1 GENERAL PROVISIONS

**16.18.1.1 ISSUING AGENCY:** [Regulation and Licensing Department - Board of Osteopathic Medical

Examiners]

[Recompiled 12/31/01]

**16.18.1.2 SCOPE:** [RESERVED]

[Recompiled 12/31/01]

**16.18.1.3 STATUTORY AUTHORITY:** [RESERVED]

[Recompiled 12/31/01]

**16.18.1.4 DURATION:** [Permanent]

[Recompiled 12/31/01]

**16.18.1.5 EFFECTIVE DATE:** [March 15, 1995, unless a later date is cited at the end of a section]

[Recompiled 12/31/01]

**16.18.1.6 OBJECTIVE:** [RESERVED]

[Recompiled 12/31/01]

**16.18.1.7 DEFINITIONS:** [RESERVED]

[Recompiled 12/31/01]

## 16.18.1.8 **OUALIFICATIONS FOR CERTIFICATION:**

- **A.** Education: Graduation from a program for physician assistants approved by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) or by an equivalent group which is organized, sponsored or otherwise affiliated with the American Osteopathic Association.
- **B.** Passage of the certification examination of the National Commission on Certification of Physician Assistants (NCCPA) or any similar examination developed to test the competency of physician assistants by the National Board of Osteopathic Medical Examiners. The NCCPA recertification examination must be successfully completed in accordance with NCCPA regulations.
  - **C.** Be of good moral and professional character.
  - **D.** Be physically and mentally able to engage safely in essential physician assistant health care tasks.
- **E.** Not have had a physician assistant certification refused, suspended, or revoked by any state for any reason unless the Board finds that the osteopathic physician assistant has demonstrated his or her rehabilitation.
- **F.** Not have engaged in any of the conduct set forth in Section 61-10A-5 of the Osteopathic Physician Assistant Act.
- **G.** Be certified by the National Commission on Certification of Physician Assistants as regulated by these rules.

[Rule PA1-95 - 3/15/95; Recompiled 12/31/01]

## 16.18.1.9 SCOPE OF PRACTICE:

- **A.** The physician assistant may perform any duties which are:
  - (1) within the scope of practice of the supervising physician normal practice; and
- (2) delegated to him or her by the supervising physician in accordance with the provision of Rule PA8-95 of these rules [now 16.18.6.9 NMAC].
- **B.** In addition to the requirements and prohibitions stated in Sections 61-10A-4, 6, and 7, NMSA 1978, the Board may in its discretion, after investigation and evaluation, place limitations on the tasks a physician assistant may perform under the authority and direction of a supervising physician pursuant to the process of approving, disapproving, or modifying the Plan of Supervision to be submitted to the Board pursuant to Rule PA8-95 [now 16.18.6.9 NMAC].

16.18.1 NMAC

- C. Physician assistants may provide medical services delegated to him or her by the supervising physician when such services are within the physician assistant's skills, from a usual component of the physician's scope of practice, and are rendered under the direction of a Board-approved licensed supervising physician.
- **D.** The supervising physician must complete and keep on file in the practice a written Plan of Supervision for each physician assistant. This plan may include, but not be limited to: taking medical history; performing a complete physical examination; performing or assisting in routine office laboratory procedures; specific therapeutic procedures; recognizing and evaluating situations that require immediate attention of a physician and instituting treatment procedures when necessary; instructing and counseling patients; etc. [Rule PA6-95 3/15/95; Recompiled 12/31/01]

**HISTORY OF 16.18.6.2:** [RESERVED]

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