

1 AN ACT concerning physician assistants.

2 Be it enacted by the People of the State of Illinois,
3 represented in the General Assembly:

4 Section 5. The Medical Practice Act of 1987 is amended
5 by changing Section 54.5 as follows:

6 (225 ILCS 60/54.5)

7 (Section scheduled to be repealed on January 1, 2007)

8 Sec. 54.5. Physician delegation of authority.

9 (a) Physicians licensed to practice medicine in all its
10 branches may delegate care and treatment responsibilities to
11 a physician assistant under guidelines in accordance with the
12 requirements of the Physician Assistant Practice Act of
13 1987. A physician licensed to practice medicine in all its
14 branches may enter into supervising physician agreements with
15 ~~no-more-than-2~~ physician assistants.

16 (b) A physician licensed to practice medicine in all its
17 branches in active clinical practice may collaborate with an
18 advanced practice nurse in accordance with the requirements
19 of Title 15 of the Nursing and Advanced Practice Nursing Act.
20 Collaboration is for the purpose of providing medical
21 direction, and no employment relationship is required. A
22 written collaborative agreement shall conform to the
23 requirements of Sections 15-15 and 15-20 of the Nursing and
24 Advanced Practice Nursing Act. The written collaborative
25 agreement shall be for services the collaborating physician
26 generally provides to his or her patients in the normal
27 course of clinical medical practice. Physician medical
28 direction shall be adequate with respect to collaboration
29 with certified nurse practitioners, certified nurse midwives,
30 and clinical nurse specialists if a collaborating physician:

31 (1) participates in the joint formulation and joint

1 approval of orders or guidelines with the advanced
2 practice nurse and periodically reviews such orders and
3 the services provided patients under such orders in
4 accordance with accepted standards of medical practice
5 and advanced practice nursing practice;

6 (2) is on site at least once a month to provide
7 medical direction and consultation; and

8 (3) is available through telecommunications for
9 consultation on medical problems, complications, or
10 emergencies or patient referral.

11 (b-5) An anesthesiologist or physician licensed to
12 practice medicine in all its branches may collaborate with a
13 certified registered nurse anesthetist in accordance with
14 Section 15-25 of the Nursing and Advanced Practice Nursing
15 Act. Medical direction for a certified registered nurse
16 anesthetist shall be adequate if:

17 (1) an anesthesiologist or a physician participates
18 in the joint formulation and joint approval of orders or
19 guidelines and periodically reviews such orders and the
20 services provided patients under such orders; and

21 (2) for anesthesia services, the anesthesiologist
22 or physician participates through discussion of and
23 agreement with the anesthesia plan and is physically
24 present and available on the premises during the delivery
25 of anesthesia services for diagnosis, consultation, and
26 treatment of emergency medical conditions. Anesthesia
27 services in a hospital shall be conducted in accordance
28 with Section 10.7 of the Hospital Licensing Act and in an
29 ambulatory surgical treatment center in accordance with
30 Section 6.5 of the Ambulatory Surgical Treatment Center
31 Act.

32 (b-10) The anesthesiologist or operating physician must
33 agree with the anesthesia plan prior to the delivery of
34 services.

1 (c) The supervising physician shall have access to the
 2 medical records of all patients attended by a physician
 3 assistant. The collaborating physician shall have access to
 4 the medical records of all patients attended to by an
 5 advanced practice nurse.

6 (d) Nothing in this Act shall be construed to limit the
 7 delegation of tasks or duties by a physician licensed to
 8 practice medicine in all its branches to a licensed practical
 9 nurse, a registered professional nurse, or other personnel.

10 (e) A physician shall not be liable for the acts or
 11 omissions of a physician assistant or advanced practice nurse
 12 solely on the basis of having signed a supervision agreement
 13 or guidelines or a collaborative agreement, an order, a
 14 standing medical order, a standing delegation order, or other
 15 order or guideline authorizing a physician assistant or
 16 advanced practice nurse to perform acts, unless the physician
 17 has reason to believe the physician assistant or advanced
 18 practice nurse lacked the competency to perform the act or
 19 acts or commits willful and wanton misconduct.

20 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

21 Section 10. The Physician Assistant Practice Act of 1987
 22 is amended by changing Section 7 as follows:

23 (225 ILCS 95/7) (from Ch. 111, par. 4607)

24 (Section scheduled to be repealed on January 1, 2008)

25 Sec. 7. Supervision requirements. ~~No--more--than--2~~
 26 Physician assistants shall be supervised by the supervising
 27 physician, although a physician assistant shall be able to
 28 hold more than one professional position. Each supervising
 29 physician shall file a notice of supervision of such
 30 physician assistant according to the rules of the Department.
 31 ~~However,--the--alternate--supervising--physician--may--supervise~~
 32 ~~more---than--2--physician--assistants--when--the--supervising~~

1 ~~physician-is-unable-to-provide--such--supervision--consistent~~
2 ~~with--the--definition--of--alternate--physician-in-Section-4.~~
3 Physician assistants shall be supervised only by physicians
4 as defined in this Act who are engaged in clinical practice,
5 or in clinical practice in public health or other community
6 health facilities. Nothing in this Act shall be construed to
7 limit the delegation of tasks or duties by a physician to a
8 nurse or other appropriately trained personnel. Nothing in
9 this Act shall be construed to prohibit the employment of
10 physician assistants by a hospital, nursing home or other
11 health care facility where such physician assistants function
12 under the supervision of a supervising physician. Physician
13 assistants may be employed by the Department of Corrections
14 or the Department of Human Services (as successor to the
15 Department of Mental Health and Developmental Disabilities)
16 for service in facilities maintained by such Departments and
17 affiliated training facilities in programs conducted under
18 the authority of the Director of Corrections or the Secretary
19 of Human Services. Each physician assistant employed by the
20 Department of Corrections or the Department of Human Services
21 (as successor to the Department of Mental Health and
22 Developmental Disabilities) shall be under the supervision of
23 a physician engaged in clinical practice and direct patient
24 care. Duties of each physician assistant employed by such
25 Departments are limited to those within the scope of practice
26 of the supervising physician who is fully responsible for all
27 physician assistant activities.

28 (Source: P.A. 89-507, eff. 7-1-97; 90-116, eff. 7-14-97.)

29 Section 99. Effective date. This Act takes effect upon
30 becoming law.