



Sen. Ira I. Silverstein

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09600SB0318sam003

LRB096 08980 ASK 23477 a

1 AMENDMENT TO SENATE BILL 318

2 AMENDMENT NO. _____. Amend Senate Bill 318 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Medical Practice Act of 1987 is amended by
5 changing Section 54.5 and by adding Section 54.2 as follows:

6 (225 ILCS 60/54.2 new)

7 (Section scheduled to be repealed on December 31, 2010)

8 Sec. 54.2. Physician delegation of authority.

9 (a) Nothing in this Act shall be construed to limit the
10 delegation of tasks or duties by a physician licensed to
11 practice medicine in all its branches to a licensed practical
12 nurse, a registered professional nurse, or other licensed
13 person practicing within the scope of his or her individual
14 licensing Act.

15 (b) A physician licensed to practice medicine in all its
16 branches may delegate tasks and duties to an appropriately

1 trained licensed or unlicensed person. Any such task or duty
2 delegated to a licensed or unlicensed person must be within the
3 education, training, or experience of the delegating physician
4 and within the context of a physician-patient relationship.

5 (c) A chiropractic physician may delegate tasks and duties
6 to an appropriately trained licensed or unlicensed person. Any
7 task or duty delegated to a licensed or unlicensed person by
8 the chiropractic physician:

9 (1) must fall within the scope of practice of the
10 chiropractic physician as defined by this Act;

11 (2) must be within the education, training, or
12 experience of the delegating chiropractic physician; and

13 (3) can only be delegated within the context of a
14 physician-patient relationship.

15 (225 ILCS 60/54.5)

16 (Section scheduled to be repealed on December 31, 2010)

17 Sec. 54.5. Physician delegation of authority to physician
18 assistants and advanced practice nurses.

19 (a) Physicians licensed to practice medicine in all its
20 branches may delegate care and treatment responsibilities to a
21 physician assistant under guidelines in accordance with the
22 requirements of the Physician Assistant Practice Act of 1987. A
23 physician licensed to practice medicine in all its branches may
24 enter into supervising physician agreements with no more than 2
25 physician assistants.

1 (b) A physician licensed to practice medicine in all its
2 branches in active clinical practice may collaborate with an
3 advanced practice nurse in accordance with the requirements of
4 the Nurse Practice Act. Collaboration is for the purpose of
5 providing medical consultation, and no employment relationship
6 is required. A written collaborative agreement shall conform to
7 the requirements of Section 65-35 of the Nurse Practice Act.
8 The written collaborative agreement shall be for services the
9 collaborating physician generally provides to his or her
10 patients in the normal course of clinical medical practice. A
11 written collaborative agreement shall be adequate with respect
12 to collaboration with advanced practice nurses if all of the
13 following apply:

14 (1) The agreement is written to promote the exercise of
15 professional judgment by the advanced practice nurse
16 commensurate with his or her education and experience. The
17 agreement need not describe the exact steps that an
18 advanced practice nurse must take with respect to each
19 specific condition, disease, or symptom, but must specify
20 those procedures that require a physician's presence as the
21 procedures are being performed.

22 (2) Practice guidelines and orders are developed and
23 approved jointly by the advanced practice nurse and
24 collaborating physician, as needed, based on the practice
25 of the practitioners. Such guidelines and orders and the
26 patient services provided thereunder are periodically

1 reviewed by the collaborating physician.

2 (3) The advance practice nurse provides services the
3 collaborating physician generally provides to his or her
4 patients in the normal course of clinical practice, except
5 as set forth in subsection (b-5) of this Section. With
6 respect to labor and delivery, the collaborating physician
7 must provide delivery services in order to participate with
8 a certified nurse midwife.

9 (4) The collaborating physician and advanced practice
10 nurse meet in person at least once a month to provide
11 collaboration and consultation.

12 (5) Methods of communication are available with the
13 collaborating physician in person or through
14 telecommunications for consultation, collaboration, and
15 referral as needed to address patient care needs.

16 (6) The agreement contains provisions detailing notice
17 for termination or change of status involving a written
18 collaborative agreement, except when such notice is given
19 for just cause.

20 (b-5) An anesthesiologist or physician licensed to
21 practice medicine in all its branches may collaborate with a
22 certified registered nurse anesthetist in accordance with
23 Section 65-35 of the Nurse Practice Act for the provision of
24 anesthesia services. With respect to the provision of
25 anesthesia services, the collaborating anesthesiologist or
26 physician shall have training and experience in the delivery of

1 anesthesia services consistent with Department rules.

2 Collaboration shall be adequate if:

3 (1) an anesthesiologist or a physician participates in
4 the joint formulation and joint approval of orders or
5 guidelines and periodically reviews such orders and the
6 services provided patients under such orders; and

7 (2) for anesthesia services, the anesthesiologist or
8 physician participates through discussion of and agreement
9 with the anesthesia plan and is physically present and
10 available on the premises during the delivery of anesthesia
11 services for diagnosis, consultation, and treatment of
12 emergency medical conditions. Anesthesia services in a
13 hospital shall be conducted in accordance with Section 10.7
14 of the Hospital Licensing Act and in an ambulatory surgical
15 treatment center in accordance with Section 6.5 of the
16 Ambulatory Surgical Treatment Center Act.

17 (b-10) The anesthesiologist or operating physician must
18 agree with the anesthesia plan prior to the delivery of
19 services.

20 (c) The supervising physician shall have access to the
21 medical records of all patients attended by a physician
22 assistant. The collaborating physician shall have access to the
23 medical records of all patients attended to by an advanced
24 practice nurse.

25 (d) Nothing in this Act shall be construed to limit the
26 delegation of tasks or duties by a physician licensed to

1 practice medicine in all its branches to a licensed practical
2 nurse, a registered professional nurse, or other persons in
3 accordance with Section 54.2.

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

14 (Source: P.A. 95-639, eff. 10-5-07.)

15 Section 99. Effective date. This Act takes effect upon
16 becoming law."