

**PHYSICIAN ASSISTANT POLICY COMMITTEE MINUTES**  
**June 13, 2006**

The meeting was called to order at approximately 2:12 p.m. on Tuesday, June 13, 2006.

Committee members present: John Jonesco, D.O.; Michael Bowen, P.A.-C.; Debra Parker, Pharm. D. David Ballinger, PA-C; Lance Talmage, M.D. and Kevin Mitchell R. Ph.

Staff members present: Diann Thompson, Richard Whitehouse, Michael Miller, Sallie Debolt, and Cathy Hacker.

***I. Review of the May 9, 2006 Minutes.***

Dr. Talmage moved to approve the May 9, 2006 minutes of the Physician Assistant Policy Committee. Mr. Bowen seconded the motion. All members voted aye. The motion carried.

***II. Review of supplemental utilization plans***

The committee began the meeting by discussing the supplemental utilization plan application from **Wheelersburg Medical Associates** that is requesting that their PA(s) be approved to perform: non invasive cardiovascular studies.

The committee noted that this procedure has been approved on several occasions with the same or similar training education and supervision.

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

***III. Discussion of draft applications***

The committee then discussed the draft applications for the restoration of a physician assistant certificate to practice.

The committee noted that the title of the application was not consistent throughout on all of the forms. The committee recommended changing all forms that contained the title of the application to read: Restoration of a Physician Assistant Certificate to Practice.

Mr. Bowen moved to approve this application with the above amendment. Dr. Jonesco seconded the motion. All members voted aye. The motion carried.

#### ***IV. Discussion of new legislation and pending rules***

Ms. Thompson told the committee members that 4730.39 requires that this committee must draft rules within six months and that she was thankful to finally have the new members present so that this procedure can begin.

Ms. Thompson indicated that one of the first things that this committee needs to do is to define education that is clinically relevant to the practice of physician assistants. The educational requirements set forth in section 4730.46(B)(1)(b) state that the physician assistant shall hold a degree other than a master's or higher degree that was obtained from a school or program accredited by the ARCPA or a predecessor or successor organization recognized by the board and shall hold a master's or higher degree in a course of study with clinical relevance to the practice of physician assistants that was obtained from a program accredited by a regional or specialized and professional accrediting agency recognized by the council for higher education accreditation. Ms. Thompson stated that she has looked at the PANCE content and the ARCPA to see if she could obtain information on clinically relevant courses.

It was further stated that the committee could review the language for the M.D., Ph.D. that is utilized for physician licensure which states the doctoral degree must be in a field of biological sciences tested in the step 1 content. These fields include, but are not necessarily limited to, anatomy, biochemistry physiology, microbiology, pharmacology, genetics, neuro-science and molecular biology. Fields, not accepted include, but are not necessarily limited to, business, economics, ethics, history and other fields not directly related to biological science. It was also noted that 4731-1-08, in the Cosmetic Therapy rules addresses the continuing education requirements for cosmetic therapists. Paragraph (Q)(4) states that notwithstanding any other provision of this rule, courses, seminars, speaker sessions or home study coursework relating to office management, marketing, billing, or other similar topics are deemed not relevant to the clinical practice of cosmetic therapy.

Dr. Talmage asked if we are required to proactively approve these courses or review them on a case by case basis. Ms. Thompson stated that we can give them guidance however, she felt that the Board should consider them on a case by case basis. She stated that she should be allowed to sign off on them unless they are questionable and those could be sent to the Secretary and Supervising Member for review.

Dr. Jonesco stated that we should keep the requirements simple for example: business degrees would not qualify, however, medical, science and pharmacology degrees would be acceptable. He further noted that this would not be an all inclusive list, but would be a guideline.

Ms. Parker stated that she felt colleges of business, engineering, economy, history, ethics, and marketing could all be included in the list of those not clinically relevant.

Ms. Thompson stated that the next thing the committee needs to define is what constitutes ten years of service as required in 4730.46(B)(2)(b). How many clinical

hours, months, is it a calendar year, is it full time or part time and what would constitute part time if we decide that is acceptable. The committee suggested that we could consider that a minimum of nine month in a calendar year would be sufficient. And that within the nine months the PA would have to have worked a minimum of 20 hours per week. The question came up of how to verify these hours due to the fact that in ten years a lot of things can happen and that we may have a problem finding someone to verify these hours. It was suggested that someone could check with the nursing board to see how they handle this type of verification.

The next thing the committee discussed was how to define a “clinical contact hour”. The questions were:

1. do we accept credit hours regardless of whether the course is taken in a classroom or an online course?
2. does one category one CME credit suffice as a contact hour?
3. is a college credit hour the same as a classroom hour?

Mr. Mitchell suggested that someone could contact the accreditation council on pharmacy education to ask for guidance.

Mr. Ballinger stated that he may be able to obtain some information for the committee on this topic.

Ms. Thompson directed the committees attention to 4730.46(C)(b) which states that a minimum of twenty contact hours of clinical training in pharmacology must be obtained in the 3 years immediately proceeding an application for a provisional certificate to prescribe. She stated that she was not certain how this could be obtained. Mr. Mitchell offered that the PA’s could do this with a pharmacist. Ms. Thompson asked if pharmacists were going to be willing to take on that responsibility.

Lastly, the committee was instructed that they needed to specify in rule any additional training they felt would be necessary for the PA’s to be able to prescribe.

The Physician Assistant Policy Committee meeting was adjourned at approximately 3:50 p.m. on Tuesday June 13, 2006.

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 June 13, 2006.

---

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.

