State Medical Board of Ohio

30 E. Broad Street, 3rd Floor, Columbus, OH 43215-6127

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Dear

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This letter is in response to your inquiry as to the ability of medical assistants to carry out activities in the physician office setting independent of delegation by licensed professionals. Your letter indicates that you represent a multi-specialty physician group practice that wishes clarification of what activities medical assistants may carry out independent of physician or nurse delegation. This response addresses only the delegation of medical tasks by a physician licensed pursuant to Chapter 4731 of the Ohio Revised Code. Your questions regarding delegation by a nurse should be directed to the Ohio Board of Nursing.

At the December 13, 2007 meeting of the State Medical Board of Ohio, the Medical Board approved the following response by the Scope of Practice Committee:

It should first be noted that in Ohio, medical assistants are unlicensed persons. There is no standard training and education for medical assistants. While some medical assistants receive formal education and even attain national certification, other medical assistants receive only on-the-job training by the supervising physician. Because medical assistants are unlicensed, their duties are limited to those delegated by a physician in compliance with the rules found in Chapter 4731-23, Ohio Administrative Code [O.A.C.].

In Ohio, an unlicensed person, including a medical assistant, may not perform any medical activity unless there is specific authorization to do so in the Ohio Revised Code. The delegation of a medical task requires a physician to determine that the medical task is indicated for the patient, the medical task is appropriate to delegate in compliance with the criteria set forth in Rule 4731-23-03, O.A.C, and the particular unlicensed person to whom the medical task will be delegated is competent to perform the medical task.

Specifically, you request written guidance as follows:

1. Please provide guidance regarding the definition of "Task" under Rule 4731-23-01(E), Ohio Administrative Code.

Section 4731.34, Ohio Revised Code, provides that in Ohio a person is regarded as practicing medicine within the meaning of Chapter 4731 of the Ohio Revised Code who does any of the following:



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(3) In person or, regardless of the person's location, through the use of any communication, including oral, written, or electronic communication, does any of the following;

(a) Examines or diagnoses for compensation of any kind, direct or indirect;

(b) Prescribes, advises, recommends, administers, or dispenses for compensation of any kind, direct or indirect, a drug or medicine, appliance, mold or cast, application, operation, or treatment, of whatever nature, for the cure or relief of a wound, fracture or bodily injury, infirmity, or disease.

The performance of any of the activities listed in Section 4731.34(B)(3), Ohio Revised Code, by a person who is not otherwise authorized do so by the Ohio Revised Code would constitute the unlicensed practice of medicine. However, Section 4731.053, Ohio Revised Code, authorizes certain tasks within the practice of medicine to be delegated to unlicensed persons in compliance with rules adopted by the Medical Board. The rules for delegation to unlicensed individuals are set forth in Chapter 4731-23 of the O.A.C.

Because it is impossible to list every medical task, paragraph (E) of Rule 4731-23-01, O.A.C., defines the work "task" as unspecified activities including the administration of drugs. Where there is need for further definition, the plain meaning of the word may be ascertained from a dictionary. Among the definitions in the <u>New World Dictionary of the American Language</u>, 2nd College Edition, is, "a piece of work assigned to or demanded of a person." <u>Mirriam-Webster's On-line Dictionary</u> defines "task" to include, "a usually assigned piece of work often to be finished within a certain time." Therefore, a reasonable understanding of the word "task" is that it is a piece of a medical service assigned to a person, often to be finished within a certain time. When combined with the definition of the word "delegate," as provided in Paragraph (B) of Rule 4731-23-01, O.A.C., it is reasonable to interpret a task as being a part of a medical service for which the authority to perform has been transferred by a physician to an unlicensed person.

It is reasonable to conclude that the following pieces of medical services might be considered to be "tasks":

- Drawing blood for blood work
- Utilizing an in-office coumadin testing device
- Finger sticks for blood work

However, not all medical tasks are appropriately delegated. The determination of whether a medical task may be appropriately delegated requires the physician to consider on a case-by-case basis the criteria for delegation set out in Rule 4731-23-02, O.A.C.

2. Please provide guidance regarding the protocol for delegating a task to a medical assistant under Chapter 4731-23, O.A.C., and under what circumstances a standing protocol for delegation would be permitted.

Pursuant to the scheme established in Rule 4731-23-02, O.A.C., whether a medical task may appropriately be delegated to an unlicensed person only arises after a physician has first determined that the medical task is indicated for the patient. The physician must also determine whether the medical task is appropriately delegated to an unlicensed person by considering the criteria set out in paragraph (B) of the Rule, including an evaluation of the risk factors raised when the task is performed by an unlicensed person. If the medical task is one that might be appropriately delegated, the physician must then determine that the particular unlicensed person is competent to perform the task. The delegation may be communicated through a written order signed by the physician or the physician's verbal order relayed by another health professional. The physician may create in a protocol bearing the physician's signature, detailed exact, unchanging directions for the performance of the medical task delegated by the physician.

Once the physician has delegated the medical task to a specific unlicensed person, the unlicensed person may perform the medical task. For example, a physician who determines that an intramuscular injection of a specific drug is indicated for a patient may write an order for that patient to receive an intramuscular injection of a specified dosage of the drug and ask the physician assistant to convey to a particular medial assistant the physician's patient specific, drug specific, and dosage specific order. The medical assistant may then administer the drug via intramuscular injection according to a protocol providing exact, unchanging directions for administering the injection.

3. Specific guidance with respect to changing an order for a coumadin test.

You also ask whether a medical assistant may change a physician's order to have coumadin testing performed at the on-site laboratory to reflect the patient's wishes to have the testing performed at an off-site laboratory. Delegating the ability to change a medical order is not compatible with the criteria set forth in Rule 4731-23-02, O.A.C, as changing a medical order involves the exercise of judgment based on medical knowledge and/or complex observations or critical decisions. Instead, the physician might order coumadin testing, and have available for the medical assistant to hand-out to patients written information sheets listing laboratories approved by the physician.

CONCLUSION

In summary, a medical assistant, who is an unlicensed person in Ohio, may not perform any medical activity unless there is specific authorization for the person to do so in the Ohio Revised Code. The delegation of a medical task requires that a physician determine that the medical task is indicated for the patient, the medical task is appropriate to delegate in compliance with the criteria set forth in Rule 4731-23-02, O.A.C, and the specific unlicensed person to whom the medical task will be delegated is competent to perform the medical task. The delegation may be communicated through a written order signed by the physician or the physician's verbal order

relayed by another health professional and recorded in the patient record for the physician's signature at a later date. A physician may establish a protocol, which bears the physician's signature, to detail exact, unchanging directions for the performance of the medical task delegated by the physician.

Thank you for your inquiry. If you have questions concerning this response, please contact Sallie Debolt, Executive Staff Attorney at (614) 644-7021.

This letter is only a guideline and should not be interpreted as being all inclusive or exclusive. The Board will review all possible violations of the Medical Practices Act and/or rules promulgated there under on a case by case basis.

Sincerely,

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Anita M. Steinbergh, D.O. Chair Scope of Practice Committee