

MINUTES  
OF THE MEETING OF THE BOARD OF MEDICAL EXAMINERS  
OF THE STATE OF NORTH CAROLINA

October 12 - 16, 1983  
Radisson Plaza Hotel  
Raleigh, North Carolina

Call to Order

The Board of medical Examiners of the State of North Carolina convened at 8:00 p.m., Thursday, October 12, 1983, at the Radisson Plaza Hotel in Raleigh, North Carolina, for the purpose of interviewing candidates for license by endorsement of credentials and conducting other business.

Board members present at this meeting included: Louis T. Kermon, M.D., President; Frank Noble Sullivan, M.D., Secretary; Charles H. Duckett, M.D.; Thomas E. Fitz, M.D.; Jack A. Koontz, M.D.; A. T. Pagter, Jr., M.D.; Rose Pully, M.D.; and Martha Kirkland Walston.

Staff members present at this meeting included: Bryant D. Paris, Jr., Executive Secretary; Betty Joe Barick, Assistant Executive Secretary; Lee A. Denney and Don Pittman, Investigators; and Sibyl Lamoreaux, Secretary.

Reinstatement of Licenses Suspended for Failure to Register

The Board adopted a motion that the licenses of the following physicians be reinstated as these physicians have now registered.

Edward Castello Loughlin, Jr.  
Phillip Charles Galle  
Arthur Rogers Summerlin, III  
Hewlette Collier Connell  
Howard Linward Russell  
Ned Brooks Armstrong

Physician Assistant Subcommittee Report

The Chairman of the Physician Assistant Subcommittee reported on recommendations made by this Subcommittee. The Board adopted a motion that the following recommendations be approved.

Physician Assistant Applications Approved by the Board

Barden, Lucy Pinson, PA - Mary Alexander, M.D., Greensboro  
Beech, Joyce Wagner, PA - Ronald L. Garber, M.D., Greensboro  
Boaz, Thomas DeLeon, PA - Rose Farias, M.D., Fair Bluff  
Brimm, Daniel Ashley, PA - Cyril A. Allen, M.D.  
Dalton, Christine B., PA - Donald O. Castell, M.D.  
Eades, Lauren Elizabeth, PA - Richard P. Polisson, M.D., Durham  
Furlong, Thomas Alan, PA - James M. Lee, M.D., Greensboro  
Gaskell, Perry Craig, Jr., PA - James N. Davis, M.D., Durham  
Herman, Margaret Charity, PA - Paul A. Fleming, M.D., Raleigh  
Hoffman, Margaret A., PA - John A. Henderson, M.D., Asheville  
Hollingsworth, Karen H., PA - William C. Meyers, M.D., Durham  
Johnson, Adrena Elaine, PA - Mary Emma Louise Vernon, M.D., Durham  
King, Mary Estelle, PA - Robert L. Bloomfield, M.D., Winston-Salem,  
Leggett, Jerry Curtis, PA - Christine Chiosi, M.D., Collettsville  
McLeod, Donald Clyde, PA - John Caleb Pease, M.D., Whiteville  
Minton, Dean Lincoln, PA - Maureen Aaron Elliott, M.D., Winston-Salem  
Osman, Robert E. PA - Khin Mae Hla, M.D., Durham  
Rich, Forrest Ross, PA - William E. Garrett, Jr., M.D., Durham  
Sanderson, Shirley Gray, PA - Daniel Gottovi, M.D., Wilmington  
Sethi, Hemlata, PA - E. Ted Chandler, M.D., Winston-Salem  
Stark, Gregg Alan, PA - Donald O. Castell, M.D., Winston-Salem  
Vaillancourt, Anne Therese, PA - John T. Garbutt, Jr., M.D., Durham  
Willia, Linda Lee, PA - Patricia J. Zekan, M.D., Winston-Salem  
Witaszek, Jeremy Michael, PA - E. Stanley Willett, M.D., Asheville  
Zimmerman, Diane Ruth, PA - Paul E. Klotman, M.D., Durham



Physician Assistant Applications Approved with Stipulations

Chabon, Stephen Jeffrey, PA - James A. Maultsby, M.D., Greensboro  
 Stenberg, Edwin S., III, PA - Gregory G. Holthusen, M.D., Winston-Salem

Physician Assistant Applications Approved by the Board if and when Certain Credentials are Submitted or Certain Conditions are Met

Arce, Joseph Michael, PA - Inad B. Atassi, M.D., Fayetteville  
 Coley, Irene, PA - Michael Rosner, M.D., Chapel Hill  
 Donnelly, William James, III, PA - John W. Gainey, Jr., M.D., Morehead City  
 McKinney, Brenda W., PA - Adrian M. Griffin, M.D., Mt. Airy  
 Proffitt, Valerie Staples, PA - Kathryn Sweeney, M.D., Durham  
 Quattro, Cynthia L., PA - Hugh Fitzpatrick, M.D., High Point  
 Williams, Ann Godfrey, PA - James W. Rackley, M.D., Winston-Salem  
 Kauffman, Gary D., PA - F. E. Blalock, M.D., Andrews

Physician Assistant Applications which were not Approved by the Board at this Time

Moore, Carol Ann, PA - David E. Garces, M.D., Whiteville  
 Jon Langston, PA - Bernard L. Langston, M.D., Supply

Physician Assistant Applications for Approval of Extension of Duties Approved by the Board

Coniglio, David Martin, PA - David F. Paulson, M.D., Durham  
 Lloyd, Douglas David, PA - John F. Munroe, M.D., Whiteville  
 Wolinsky, Sidney, PA - Morton Meltzer, M.D., Fayetteville  
 Foster, Ernest R., PA - Morton Meltzer, M.D., Fayetteville  
 Henderson, David B., PA - Charles T. Adkins, M.D., Fayetteville  
 Eads, Donald, PA - Charles T. Adkins, M.D., Fayetteville  
 Hollingsworth, Robert, PA - Otto F. Rogers, M.D., Fayetteville  
 Rapalje, James J., PA - Mark Steinman, M.D., Fayetteville

Physician Assistant Applications for Approval of Changes in Primary Supervising Physicians Approved by the Board

Dufour, Claude, PA - David Garces, M.D., Whiteville  
 Evans, Shannon D., PA - Hemen I. Joshi, M.D., Whiteville

Physician Assistant Applications for Administrative Approval of Changes in Primary Supervising Physicians Approved by the Board

H. D. Peterson, M.D.	Marian Elaine Cranford, PA
Philip Jerome Karam, M.D.	John J. Triplett, Jr., PA
Lorraine Sharon, M.D.	Daniel E. Mattingly, PA
Mahesh A. Varia, M.D.	Carol B. Kirschenbaum, PA
Mahesh A. Varia, M.D.	Charles E. Kober, PA
John Miles Harrelson, M.D.	Max Anderson Isbell, PA
Allan M. Johnstone, M.D.	Alice Susan Horne, PA
John Stanford Noell, M.D.	Frank John Oktavec, Jr., PA
Hugh Duane Peterson, M.D.	Sandra Reimers Herzog, PA
Mary Fennell Lyles, M.D.	Martha Ann Kilby, PA
E. Ted Chandler, M.D.	Gale Lynn Harkness, PA

Physician Assistant Applications Requiring Additional Follow-up

Bradshaw, Johnnie Mack, PA Applicant - Daniel R. Brandon, M.D.  
 Stowe, Jasper Carl, III, PA Applicant - David I. Gross, M.D., Gastonia

Revised Physician Assistant Application

The Board adopted a motion that the physician assistant application form be revised as attached to these Minutes.



October, 1984, Board Meeting

The Board adopted a motion that, if reservations can be arranged, the October, 1984, meeting be held at the Grove Park Inn, Asheville, North Carolina. The Board adopted a further motion that, if these reservations cannot be confirmed, the Board meet at the Marriott in Raleigh. The Board also adopted a motion that the October, 1984, meeting be held during the same time period as the October, 1983, meeting.

Emergency Medical ServicesEmergency Medical Services Applications Approved by the BoardEMT-I Applications Approved by the Board

Durham: 1, Wake: 8, Craven: 12, Orange: 4, Cumberland: 2, Iredell: 28, Forsyth: 3, Pitt: 13, Cabarrus: 1, Mecklenburg: 1, Buncombe: 5

EMT-P Applications Approved by the Board

Orange: 1, Henderson: 1, Alamance: 1, Iredell: 5, Catawba: 5, Forsyth: 1, Surry: 15

MICN Applications Approved by the Board

Yadkin: 1, Onslow: 3, Orange: 1, Davie: 1, Iredell: 1, Davidson: 1

Bee Sting Certification ApplicationsBee Sting Certification Applications approved by the Board

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Bee Sting Certification Applications Not Approved by the Board at this Time

Kermit Talley, Jr.

Nine Applications Lacking Applicants' Social Security Numbers

Bee Sting Certification Form Wording Revision

The Board adopted a motion that the wording on this form be changed from "under my supervision" to "by me."



Nurse Practitioner Joint Subcommittee Report

The Chairman of the Joint Subcommittee reported on this meeting.

Nurse Practitioner Program Approved by the Board

Charleston, South Carolina, County Health Department Pediatric Nurse Practitioner Program.

Nurse Practitioner Applications Approved by the Board

A. Jarrahi, M.D., Winston-Salem, NC - K. F. Cornatzer, NP  
 J. S. Blair, M.D., Wallace, NC - E. J. DeVane, NP  
 D. Nathaniel, M.D., Goldsboro, NC - L. A. Franklin, NP  
 J. B. Holt, M.D., Pittsboro, NC - J. K. Goins, NP  
 L. S. Kilby, M.D., N. Wilkesboro, NC - N. N. Hayes, NP  
 M. H. Bertling, M.D., Greensboro, NC - S. T. Jamison, NP  
 S. D. Condie, M.D., Shelby, NC - C. R. Langston, NP  
 T. J. Mearns, M.D., Hickory, NC - P. H. McDowell, NP  
 F. W. Henderson, M.D., Chapel Hill, NC - K. B. Philbrick, NP  
 R. C. Turner, M.D., Greenville, NC - N. J. Randall, NP  
 E. Easley, M.D., Durham, NC - R. Rudner, NP  
 J. T. Dees, M.D., Burgaw, NC - S. E. Warrick, NP

Nurse Practitioner Requests for Extensions of Duties Approved by the Board

Charles F. Murray, M.D., Asheville, NC - Margaret Carroll, NP;  
 Catherine B. Johnson, NP; Beverly L. Smith, NP; Kay Taylor, NP; Cynthia Van Deusen, NP; Kathleen C. Griffin, NP

Nurse Practitioner Applications Approved by the Board if and when Certain Credentials are Submitted or Certain Conditions are Met

R. L. Spencer, M.D., Winston-Salem, NC - J. L. Gilley, NP  
 D. T. Moore, M.D., Durham, NC - P. S. Holden, NP  
 E. Easley, M.D., Durham, NC - C. M. Latta, NP  
 L. M. Cutchin, Tarboro, NC - S. J. Stroud, NP  
 S. L. McCormack, M.D., Tryon, NC - B. S. Trumble, NP  
 W. S. Berkey, M.D., Skyland, NC - D. L. Underwood, NP

Certified Nurse Midwife Application not Considered at this Meeting

R. C. Crawford, M.D., High Point, NC - G. D. Watkins, CNM

Request for Approval of Extension of Duties Approved by the Board if and when Certain Credentials are Submitted or Certain Conditions are Met

Charles F. Murray, Jr., M.D., Asheville, NC - Denise Gohmann Vish, NP

Nurse Practitioner Applications for Changes in Primary Supervising Physicians Approved by the Board

Melinda C. Paul, M.D.	Angela Carter Martin, NP
Kenneth Lee, M.D.	Patricia Miller Bradshaw, NP
Carol Klein, M.D.	Glenda Oldham Hargraves, NP
Alan Spanos, M.D.	Nancy Mary Tanguay, NP

MICN Training Programs

The Board adopted a motion that the Joint Subcommittee be notified statutory and regulatory requirements mandate the Office of Emergency Services to approve MICN programs and, that, if the Joint Subcommittee wishes, it may act in a consultant capacity to EMS in the consideration of MICN programs.



#### Officers for the Joint Subcommittee

The Board adopted a motion that, as the Board of Medical Examiners has the statutory responsibility to approve the medical acts performed in the state of North Carolina, the Chairman of the Joint Subcommittee will be appointed by the President of the Board of Medical Examiners.

#### New Nurse Practitioner Application Form

The Chairman of the Joint Subcommittee reported to the Board of Medical Examiners that the Joint Subcommittee tabled discussion of a new nurse practitioner application form.

#### Physician and Nurse Representatives Recommended as Representatives to the Certified Nurse Midwifery Subcommittee

The Executive Secretary reported to the Board of Medical Examiners that Robert Brame, M.D., and Huitt Everett Mattox, M.D., are the physician nominees for the new committee. He stated that he furnished Miss Kuba of the Board of Nursing the names of the physician nominees shortly after the August, 1983, meeting of the Board of Medical Examiners. Mr. Paris indicated that a few days prior to the October, 1983, meeting of the Board he received from Miss Kuba the names of Linda Glenn, R.N., and Elizabeth Dickson, R.N., the nurse nominees to the new committee. The Executive Secretary then reported to the Board that, when he contacted the physician nominees to request their attendance at the October, 1983, meeting, the physicians informed him that they were unable to make arrangements to attend this meeting on such short notice.

#### Joel Gregg Puleo, M.D., Durham, North Carolina

The Board adopted a motion that no decision be made on Dr. Puleo's licensure application at this time.

#### Reza Nilforooshan, M.D., Cleveland, Ohio

The Board adopted a motion that Dr. Nilforooshan's licensure application remains incomplete as his application for permanent resident status in the United States does not constitute immigrant status which would result in his receiving an alien registration receipt card.

#### Question in the Licensure Application Form Regarding the Use of Alcohol

The Board reviewed a suggested revision in the application form concerning the excessive use of, or dependence upon, alcohol. The Board adopted a motion that the Executive Secretary's suggestions regarding omission of the word "alcohol" from Question 15 on the application form and the addition of Question 14 A to the application form inquiring: "Have you ever used to excess or been dependent upon alcohol"? be approved and implemented.

#### Report on Hearing to Revise Wording in the Regulation Regarding Biennial Registration Fee for Physicians

The Board reviewed a report of a hearing held on August 31, 1983, at 4:00 p.m., at the North Carolina Medical Society Auditorium, Raleigh, North Carolina, in accordance with requirements of the North Carolina Administrative Procedures Act, to receive oral or written statements from the public relevant to the Board of Medical Examiners' proposal to amend regulation 21 NCAC 32F .0003 regarding biennial registration fee for physicians as follows:

##### .0003 FEE

Each physician shall pay a registration fee of twenty-five dollars (\$25.00) to the Board.

The Board adopted a motion made by Dr. Pagter that this regulation change be approved by the Board of Medical Examiners and filed in accordance with the Administrative Procedures Act.

#### Proposed Budget for the North Carolina Board of Medical Examiners

The Board reviewed a proposed budget for 1983-1984 and adopted a motion that this proposed budget be approved with whatever modifications may be required as a result of Board action.



Interviews for License by Endorsement of Credentials

The following physicians applied for license by endorsement of credentials, appeared for personal interviews before the Board, a subcommittee of the Board, an individual Board member, or the Executive Secretary, and obtained licensure October 15, 1983.

David Abernathy	Richard Gibson	Mahendra Patel
Carol Adams	John Gilmore	Natu Patel
Kenneth Alonso	Clarence Gowen, Jr.	Hubert Patterson, III
Dean Assimos	Gregory Grant	Peter Perault
James Bain	Charles Greenberg	John Petitt
Charles Bale	William Griffin	Joseph Petrozza
Mitchel Bauman	Kathy Gross	Katherine Pierce
Eldon Beard	Roberta Hall	Leo Prevost
Robert Bechtold	Daniel Harro	Bernard Ram
Robert Becker, Jr.	Lawrence Hopkins	Norman Ramirez
David Becton	David Howell	David Raper
Stephen Beese	Jeffrey Hunt	Tadur Reddy
Raja Bhat	James Jewell	Alton Ridgway
Lawrence Biris	Tink Johnson, III	Marc Rivo
Lewis Bissell	David Kavjian	George Rozakis
Lewis Bolin, Jr.	John Kea	Roger Russell
James Browne	George Kernodle, Jr.	Jeffrey Rymuza
Hilton Bruch	Kenneth Klein	Barbara Samuels
John Canon	Rubin Klein	Sally Sanders
June Chang	Steven Kovach	Bruce Schirmer
Christine Chiosi	Christopher Kus	Jugalkishor Shah
Mary Christenbury	Lars Larsen	Glyndon Shaver, Jr.
Cynthia Chua	James Lee	Anthony Sintetos
Donald Cook, Jr.	Kenneth Lee	Peter Smith
Bruce Corsello	Kenneth S. Lee	John Sorge
William Crawford, Jr.	James Lewis	Roger Taylor
John Crouch	James Lisak	Basil Theodotou
Thomas Davies	Larry Litscher	Jonathan Till
James Davis, Jr.	Susan Lodewijks	Ming-Sound Tsao
Arthur Deutsch	David Massey	Scott Tucker
Ronald Dietrick	Daniel Matthews	Murray Urquhart
Peter Dixon	John May	Robert Vaughan
William Dodson	Keith Meador	Joes Vogt
Robert Dough, Jr.	Jeffrey Menashe	Monica Walker
James Dunnington, Jr.	Richard Moon	Paul Walker
Michael Farrell	Herman Morgan, Jr.	Robert Walkup, Jr.
Kirk Faust	Abdul Muhammad	Roger Warren
David Fay	Thomas Mundorf	Acquenetta Wheeler
Norene Fleming	John Murphy, Jr.	Nettie White
Wilton Gay, Jr.	Frances Norris	Stephen Wilkinson
Cosmos George	Jerome Nymberg, III	Mary Witges
Pazhayidathe George	Keith Olbrantz	Jerry Withrow
		Joseph Yankes, Jr.

Temporary Licenses

George Klein	Brian Sudderth exp. 9/27/88	William Williams, III exp. 2/1/85
Jerry Dean Peters	Janifer C. Roberts	Frederick H. Shipkey, Jr.
Steyen Crawshaw - extended through 12/31/84		Ronald Williams - extended

Letters of Intent

Eric L. Hansen	Donald E. Potts	John Allen Dyer
Donald MacPherson	Paul H. White	
Alan B. Munro		

Applicants for License by Examination

The Board licensed the following physicians who submitted the required credentials and successfully passed the North Carolina Examination for Licensure (FLEX).

Reese Hunter Clark	Samy Iskandar	Betsy Phillips
Ian Crocker	Vincent Kopp	Sandra Sasser
Kenneth Freeman	Katherine Lenski	Peter Taves
Manning Goldsmith, III	Ritva Linnoila	Victor Villagra
Thomas Graham	Samir Nazam	Lynn Wesson



Fees for FLEX Examination and License by Endorsement

The Board reviewed a memorandum from the Executive Secretary regarding increasing the FLEX fee to a maximum of \$300.00. Dr. Kermon recommended that the incoming President, with whatever consultants may be required, take this legislative question under advisement and develop a package of fee increases to be presented to the legislature. Dr. Kermon also recommended that these proposed increases include both FLEX and license by endorsement fees so that the latter fee may be increased to the level in effect in other states, such as South Carolina.

Status of Hearings and Pending Charges

The Board reviewed information regarding this matter. The Board of Medical Examiners adopted a motion that Dr. Dalton be added to the list of physicians for whom a hearing officer has been suggested and that he be notified when a date, place, and hearing officer have been selected. Dr. Koontz volunteered to serve as hearing officer on hearings for which a hearing officer has been suggested.

Roger Neal Goodlin, M.D., Fayetteville, North Carolina

The Board of Medical Examiners of the State of North Carolina held a hearing concerning additional charges preferred against Roger Neal Goodlin, M.D., at 1:15 p.m., Friday, October 14, 1983, at the Radisson Plaza Hotel, Raleigh, North Carolina, at which hearing Dr. Goodlin did not appear but was represented by counsel. The Board unanimously adopted a motion that it finds these charges to be true and orders that the license to practice medicine in the state of North Carolina issued to Dr. Goodlin be revoked.

Edwin Sims Mize, Jr., M.D., Black Mountain, North Carolina

The Board of Medical Examiners of the State of North Carolina held a hearing concerning charges preferred against Edwin Sims Mize, Jr., M.D., on Friday, October 14, 1983, at 4:00 p.m., at the Radisson Plaza Hotel, Raleigh, North Carolina, at which hearing Dr. Mize appeared and was represented by counsel. The Board unanimously adopted a motion that it finds the charges to be true and orders that the license to practice medicine issued to Edwin Sims Mize, Jr., M.D., be revoked.

William Nye Corpening, M.D., Granite Falls, North Carolina

The Board adopted a motion that Dr. Corpening be issued a temporary license for a period of six months.

Report on Hearings Held on October 13, 1983

Dr. Koontz reported to the Board that the hearings scheduled for this date were held and further stated he acted as Hearing Officer. Dr. Koontz also informed the Board that findings of fact and orders must be sent to the respondents prior to presenting this information to the Board of Medical Examiners. Dr. Pagter volunteered to serve as Hearing Officer for future hearings as might be necessary.

Jeffrey R. MacDonald, M.D.

The Board reviewed a report that Dr. MacDonald surrendered his license to practice medicine in the state of North Carolina on October 12, 1983. The Board adopted a motion that this report be accepted as information.



Thomas Janney Roberts, M.D., Leesburg, Virginia

The Board adopted a motion that the proper procedures be instituted to prefer charges against Dr. Roberts, that he be so notified in writing, and that he be further notified he will be given a hearing on the charges preferred against him. The Board adopted a further motion that the possibility be discussed with the Board's attorney of including this hearing with the other hearings to be held before a hearing officer.

Lawrence Nelson Farrell, M.D., Fort Collins, Colorado

The Board adopted a motion that the charges preferred against him by the Board of Medical Examiners be withdrawn.

Richard D. Hamer, M.D., Charlotte, North Carolina

The Board adopted a motion that Dr. Hamer's temporary license be extended for one year.

Robert Leslie, M.D., Application for Licensure Reinstatement

The Board adopted a motion that Dr. Leslie's request for reinstatement of his North Carolina medical license not be approved at this time.

Melvin Walter Webb, M.D., Burnsville, North Carolina

The Board adopted a motion that Dr. Webb's license to practice medicine in the state of North Carolina be revoked.

Flex Examination

There was a motion made to hold this examination once a year in June and that a hearing be held to change the regulations. The Board adopted a motion that this motion be tabled.

Elton Kessel, M.D., Chapel Hill, North Carolina

The Board reviewed a request from this physician that he be issued an unrestricted medical license. The Board adopted a motion that Dr. Kessel be granted approval to practice medicine in Chapel Hill, North Carolina, rather than just at the University of North Carolina, but that this practice be limited to preventive medicine and public health.

Temporary Licenses

The Board adopted a motion that a letter be sent out with each temporary license issued to house staff physicians stating that the license is temporary until such time as the physician furnishes the Board with a permanent North Carolina practice site and further stating that no house staff physician without a definite North Carolina practice site will be issued a full North Carolina medical license.

Donald Lew Bedney, M.D., Fletcher, North Carolina

The Board adopted a motion that Dr. Bedney's temporary license not be extended.

Specialty Board Licensure Requirements

The Executive Secretary reported to the Board that he has received only one response to inquiries he sent to all specialty boards. The OB/Gyn Specialty Board responded that it will not accept temporary licensure as meeting its requirements to take the OB/Gyn Specialty Board examination.



North Carolina Medical Society Executive Council Meeting Report

Dr. Sullivan reported to Board members on this meeting.

1. The Executive Council agreed to support legislation to enact all revision of fees.
2. The Executive Council agreed to support legislation to require one year postgraduate training prior to taking the FLEX examination in North Carolina.
3. The Executive Council supported funding in the amount of \$3,000 for printing medical-legal codes in book form to be presented to each physician who receives a license in North Carolina and requested the Board of Medical Examiners to distribute these books and urge newly-licensed physicians to familiarize themselves with this information.
4. The Executive Council announced that George E. Moore who is currently on the staff of North Carolina State University will be the new Executive Director of the North Carolina Medical Society and indicated that there will be a transition period of six months prior to the new Executive Director's replacing Mr. Hilliard.

August, 1984, Board Meeting

The Board adopted a motion that, if reservations can be confirmed at the Radisson in Raleigh, the Board meet there in August, 1984; and, if reservations cannot be confirmed at the Radisson, the Board meet at the Sheraton Highwoods in Raleigh.

Southern Bell Request for an Opinion Regarding Physician Assistants' Advertising

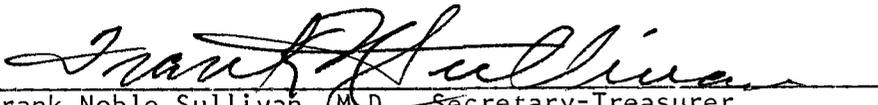
The Board adopted a motion that physician assistants should not advertise independently.

Federation Transition Task Force

The Executive Secretary reported to the Board that FLEX will have two components: (1) High Impact Disease Processes and Problems designed to test an individual's ability to practice in a supervised setting and (2) Patient Management Problems which would better measure the individual's ability to practice in an unsupervised setting. Mr. Paris also reported that FLEX will still consist of a three day examination and the new examination should be finalized and in use in June, 1985.

Adjournment

As there was no further business to be considered by the Board of Medical Examiners at this time, the President declared the meeting adjourned at 12:45 p.m., Sunday, October 16, 1983.

  
 Frank Noble Sullivan, M.D., Secretary-Treasurer  
 BOARD OF MEDICAL EXAMINERS OF THE STATE OF NORTH CAROLINA



## REQUIRED APPLICATION FORMS AND ATTACHMENTS

- I. APPLICATION FOR APPROVAL AS PHYSICIAN ASSISTANT
  - A. Completed application form. (All forms must be typewritten.)
  - B. Photocopy of certificate of completion of approved PA program. (Not applicable, if previously approved in N.C. and certificate already on file at Board's office.)
  - C. Three original letters of recommendation or character reference letters, addressed to the N.C. Board of Medical Examiners, preferably from last three employers as PA. (If previously approved, only one letter is required, a job evaluation in letter form, from most recent primary supervising physician.)
  - D. Fee of \$50.00 made payable to N.C. Board of Medical Examiners.
- II. ADDITIONAL PRACTICE SITES - If applying for approval of additional practice sites under the supervision of currently approved primary supervising physician, submit:
  - A. Letter of request signed by PA and primary supervising physician.
  - B. FORM 3 regarding address and supervision at new site.
  - C. Signatures of back-up supervising physicians, if new back-up supervision is being added.
  - D. NO FEE REQUIRED.
- III. CHANGE OF PRIMARY SUPERVISING PHYSICIAN ONLY - If applying for approval of a change of primary supervising physician, when that is the ONLY change being made in PA employment, submit the following information PRIOR TO the change occurring: (Contact the Board's office for correct forms.)
  - A. Information form regarding PA and supervising physicians.
  - B. Statement of Certification of Understanding and Compliance signed by primary supervising physician and PA.
  - C. One current letter of recommendation, if letters on file in Board's office are older than two (2) years. (Letters must be addressed to the N.C. Board of Medical Examiners and bear original signatures.)
  - D. Fee of \$50.00 made payable to N.C. Board of Medical Examiners.
- IV. ADDITIONAL SETTING UNDER ADDITIONAL PRIMARY SUPERVISING PHYSICIAN - If applying for approval of an additional practice setting under the supervision of an additional primary supervising physician (other than the primary physician already approved), submit:
  - A. Completed application form. (All forms must be typewritten.)
  - B. Letter from EACH primary supervising physician acknowledging to the Board that he is familiar with the PA's proposed practice arrangements with each physician.
  - C. Fee of \$50.00 made payable to N.C. Board of Medical Examiners.
- V. ADDITIONAL BACK-UP SUPERVISING PHYSICIANS FOR APPROVED PRACTICE SITE - If adding new back-up supervising physicians, contact the Board's office for correct form for the new back-up physician to sign. Signatures of back-up physicians should be on file in the Board's office before supervision of the PA occurs. (No fee required.)
- VI. ANNUAL REGISTRATION - DUE JULY 1 - Notices will be mailed around June 1 to PA at address of practice site. If ANY changes have occurred in practice situation, notify Board's office.

# APPLICATION FOR APPROVAL OF PHYSICIAN ASSISTANT

Submit all material to: N.C. Board of Medical Examiners  
Suite 214, 222 N. Person Street  
Raleigh, North Carolina 27601  
(919) 833-5321

## MEETING DATES AND DEADLINES

Completed application forms WITH ALL REQUIRED ATTACHMENTS must be received in the office of the Board of Medical Examiners 15 DAYS PRIOR to the meetings:

December 2, 1983 (deadline Nov. 17)	May 3, 1984 (deadline April 18)
January 19, 1984 (deadline Jan. 4)	June 8, 1984 (deadline May 24)
March 15, 1984 (deadline Feb. 29)	August 9, 1984 (deadline July 25)

## **Instructions for Completing Application Forms**

1. All applications must be typewritten.
2. All addresses given must include PHYSICAL LOCATIONS (street, city, zip code) as well as mailing address, if different.
3. FORM 1 is to be completed by the PA applicant.
4. FORM 2 is to be completed by the PRIMARY supervising physician.
5. ALL physicians listed on FORM 2 (primary and back-up) must sign FORM 4. If there are no back-up supervising physicians, FORM 4 and FORM 5 must be signed by the primary supervising physician and the PA applicant.

## MATERIAL TO RETAIN ON FILE AT PA PRACTICE SITE

Material to keep on file in PA practice site in addition to standing orders and medical reference materials:

1. General information regarding submitting applications (this page)
2. Regulations regarding physician assistants (Subchapter 32D)
3. Approved Formulary
4. Photocopy of submitted application
5. Copy of correspondence sent and received regarding approval process
6. Statement of Approval
7. Information regarding dispensing of drugs (May be obtained from N.C. Board of Pharmacy, P.O.Box H, Carrboro, NC 27510, (919) 942-4454)

A PA APPLICANT MAY FUNCTION BEFORE APPROVAL BY THE BOARD OF MEDICAL EXAMINERS IN THE SAME MANNER HE FUNCTIONED AS A STUDENT, BUT ACCORDING TO LAW MAY NOT BE IDENTIFIED AS A PHYSICIAN ASSISTANT. (See G.S. 90-18.1)

## SUBCHAPTER 32D — APPROVAL OF ASSISTANT TO PHYSICIAN

**.0001 DEFINITIONS** — The term "board" as used herein refers to the Board of Medical Examiners of the State of North Carolina

The term "secretary" as used herein refers to the Executive Secretary of the Board of Medical Examiners of the State of North Carolina

The term "assistant to a physician" as herein used refers to auxiliary, paramedical personnel who are functioning in a dependent relationship with a physician licensed by the board and who are performing tasks or combinations of tasks traditionally performed by the physician himself. Examples of such tasks would include history taking, physical examination, and treatment, such as the application of a cast. The regulations are not intended to cover or in any way prejudice the activities of assistants not engaged in direct patient contact or the performance of assistants with tasks well-defined by statute or recognized custom of medical practice.

The term "applicant" as herein used refers to the assistant upon whose behalf an application is submitted

The term "supervision" is defined by the North Carolina Board of Medical Examiners as incorporating physician backup to assistants to physicians performing medical acts in the following ways

- (1) Continuous availability of direct communications by radio, telephone or telecommunications,
- (2) The backup physician shall be available on a regularly scheduled basis for
  - (a) referrals,
  - (b) review of their practice between conferences incorporating
    - (i) consultation,
    - (ii) chart review and co-signing records to document accountability
      - (A) daily chart review except for situations that might be given individual consideration,
      - (B) prescribing within that practice setting, standing orders and drug protocol for interval between conferences to be part of this regular review and documentation,
    - (iii) continuing education,
- (3) A predetermined plan for emergency services

**.0002 APPLICATION FOR APPROVAL** — Application for approval of an assistant must be made upon forms supplied by the board and must be submitted by the physician with whom the assistant will work and who will assume responsibility for the assistant's performance

Application forms submitted to the board must be completed in every detail. Every supporting document required by the application form must be submitted with each application

If for any reason an assistant discontinues working at the direction of or under the supervision of the physician who submitted the application under which the assistant is approved, such assistant shall so inform the board and his approval shall terminate until such time as a new application is submitted by the same or another physician and it is approved by the board

When the proposed medical functions of an assistant to a physician shall include the prescribing of drugs, the supervising (backup) physician and the assistant shall review the formulary approved by the board, and shall acknowledge in the application to the board that they are familiar with the formulary and that such formulary will be a part of and incorporated in the approved standing orders. Changes in the formulary are to be approved by the board. In regard to changes, the approved formulary may include any over-the-counter or non-prescription drug

Prescriptions, except controlled substances, may upon specific orders of the supervising physician given before the prescription is issued be written and issued by such assistant for the use by patients of drugs which are not included in the formulary. Such prescriptions shall be signed by the assistant with a notation thereon that the same was issued upon the specific order of the supervising physician. For example: Mary Smith, P.A., on order of John Poe, M.D. However, no prescription shall be written or issued by such assistant for any drugs which are specified as controlled substances under the Federal Controlled Substances Act

Assistants to physicians who are approved to prescribe drugs as herein provided shall be assigned a number which shall appear on all prescriptions issued by such assistant. The names and numbers of such assistants shall be recorded and transmitted to the North Carolina Board of Pharmacy

**.0003 REQUIREMENTS FOR APPROVAL** — Before being approved by the board to perform as an assistant to a physician, an applicant shall

- (1) be of good moral character and have satisfied the requirements of 21 NCAC 32D 0004 hereof,
- (2) give evidence that he has successfully completed a training program recognized by the board under 21 NCAC 32D 0005 hereof,

Initial approval may be denied for any of the reasons set forth in 21 NCAC 32D 0006, Paragraph (1), hereof, as grounds for termination of approval, as well as for failure to satisfy the board of the qualifications cited in Paragraph (1) of this Rule

In hearings held pursuant to this Rule, the board shall admit and hear evidence in the same manner and form as prescribed by law for civil actions

**.0004 MORAL CHARACTER** — Every applicant shall be of good moral character, and the applicant shall have the burden of proving that he is possessed of good moral character

All information furnished to the board by an applicant and all answers and questions upon forms furnished by the board shall be deemed material and such forms and information shall be and become a permanent record of the board

All investigations in reference to the moral character of an applicant may be informal, but shall be thorough, with the object of ascertaining the truth. Neither the hearsay rule nor any other technical rule of evidence need be observed

Every applicant may be required to appear before the board to be examined about any matter pertaining to his moral character

**.0005 REQUIREMENTS FOR RECOGNITION OF TRAINING PROGRAMS** — Application for recognition of a training program by the board shall be made by letter and supporting documents from the director of the program and must demonstrate to the satisfaction of the board that such program fulfills the requirements set forth in the second through the eighth paragraph of this Rule. (All physician assistant programs approved by the American Medical Association Council on Medical Education are recognized by the board)

The training program must be sponsored by a college or university with appropriate arrangements for the clinical training of its students, such as a hospital maintaining a teaching program. There must be evidence that the program has education as its primary orientation and objective

The program must be under the supervision of a qualified director, who has at his disposal the resources of competent personnel adequately trained in the administration and operation of educational programs

Adequate space, light and modern equipment must be provided for all necessary teaching functions. A library, containing up-to-date textbooks, scientific periodicals, and reference material pertaining to clinical medicine, its underlying scientific disciplines, and its specialties, shall be readily accessible to students and faculty

The curriculum must provide adequate instruction in the basic sciences underlying the medical practice to provide the trainee with an understanding of the nature of disease processes and symptoms, abnormal tests, drug actions, etc. This must be combined with instruction, observation and participation in history taking, physical examination, therapeutic procedures, etc. This should be in sufficient depth to enable the graduate to integrate and organize historical and physical findings. The didactic instruction shall follow a planned and progressive outline and shall include an appropriate mixture of classroom lectures, textbook assignments, discussions, demonstrations, and similar activities. Instruction shall include prac-

tical instruction and clinical experience under qualified supervision sufficient to provide understanding of a skill in performing those clinical functions which the assistant may be asked to perform. There must be sufficient evaluative procedures to assure adequate evidence of competence. Although the student may concentrate his effort and his interest in a particular specialty of medicine, the program must insure that he possesses a broad general understanding of medical practice and therapeutic techniques.

Although some variation may be possible for the individual student, dependent on aptitude, previous education, and experience, the curriculum shall be designed to require two or more academic years for completion.

The program must have a faculty competent to teach the didactic and clinical material which comprises the curriculum. The faculty shall include at least one instructor who is a graduate of medicine, licensed to practice in the location of the school, and whose training and experience enable him to properly supervise progress and teaching in clinical subjects. He shall be in attendance for sufficient time to insure proper exposure of the student to clinical teaching and practice. The program may utilize instructors other than physicians, but sufficient exposure to clinical medicine must be provided to insure understanding of the patient, his problem, and the diagnostic and therapeutic responses to this problem.

The program must, through appropriate entrance requirements, insure that candidates accepted for training possess: (1) ability to use written and spoken language in effective communication with physicians, patients, and others, (2) qualification skills to insure proper calculation and interpretation of tests, (3) behavioral characteristics of honesty and dependability, and (4) high ethical and moral standards in order to safeguard the interest of patients and others.

To retain its recognition by the board, a recognized program shall

- (a) make available to the board yearly summaries of case loads and educational activities done by clinical affiliates, including volume of outpatient visits, number of inpatients, and the operating budget,
- (b) maintain a satisfactory record of the entrance qualifications and evaluations of all work done by each student, which shall be available to the board, and
- (c) notify the board in writing of any major changes in the curriculum or a change in the directorship of the program.

Recognition of a program may be withdrawn when, in the opinion of the board, the program fails to maintain the educational standards described above. When a program has not been in operation for a period of two consecutive years, recognition will automatically be withdrawn. Withdrawal of recognition from a program will in no way affect the status of an assistant who graduated from such program while it was recognized and who has been approved by the board.

**.0006 TERMINATION OF APPROVAL.** — The approval of an assistant shall be terminated by the board when, after due notice and hearing in accordance with the provisions of this Rule, it shall find

- (1) that the assistant has held himself out or permitted another to represent him as a licensed physician,
- (2) that the assistant has in fact performed otherwise than at the direction of or under the supervision of a physician licensed by the board,
- (3) that the applicant has been required to perform, or has performed, a medical task or tasks, function or functions for which the applicant is not approved or for which the applicant is not qualified by training to perform including prescribing or dispensing of drugs not included in the approved formulary,
- (4) that the assistant is an habitual user of intoxicants or drugs to such extent that he is unable to perform as an assistant to the physician,
- (5) that the assistant has been convicted in any court, state or federal, of any felony or other criminal offense involving moral turpitude,
- (6) that the assistant has been adjudicated a mental incompetent or whose mental condition renders him unable to safely perform as an assistant to a physician, or
- (7) that the assistant has failed to comply with any of the provisions of 21 NCAC 32D .0007 hereof.

Before the board shall terminate approval granted by it to an assistant, it will give to the assistant and to the physician to whom he is approved a written notice indicating the general nature of the charges, accusation, or complaint preferred against him and state that the assistant will be given an opportunity to be heard concerning such charges or complaints at a time and place stated in such notice, or to be thereafter fixed by the board, and shall hold a public hearing within a reasonable time. Following such hearing, the board shall determine on these regulations whether the approval of the assistant shall be terminated.

In hearings held pursuant to this Rule, the board shall admit and hear evidence in the same manner and form as prescribed by law for civil actions.

**.0007 METHOD OF PERFORMANCE** — An assistant must clearly identify himself as an assistant to a physician, a physician assistant, or by some other appropriate designation, in order to insure that he is not mistaken for a licensed physician. This may be accomplished, for example, by the wearing of an appropriate name tag.

The assistant must generally function in reasonable proximity to the physician. If he is to perform duties away from the responsible physician, such physician must clearly specify to the board those circumstances which would justify this action and the written policies established to protect the patient.

The assistant must be prepared to demonstrate upon request to a member of the board or to other persons designated by the board, his ability to perform those tasks assigned to him by his responsible physician.

**.0008 FEES** — Fee of fifty dollars (\$50.00) must be paid at the time of the application for approval. Fee for annual registration, due July 1, is ten dollars (\$10.00).

**.0009 FORMS** — The following forms may be secured from the office of the Board of Medical Examiners regarding approval for assistants to physicians:

- (1) Rules and Regulations for an Assistant to a Physician,
- (2) Application for Approval as an Assistant to a Physician,
- (3) Formulary,
- (4) Statement of Approval, upon being approved,
- (5) Notice of Registration,
- (6) Certificate of Registration, upon registering.

# APPROVED FORMULARY

FOR THE WRITING OF PRESCRIPTIONS BY PERSONS APPROVED  
TO PRESCRIBE DRUGS UNDER THE PROVISIONS G S 90-18.1 & 90-18.2

No controlled substances (Schedule 2, 2N, 3, 3N, 4, 5) defined by the Federal Controlled Substances Act may be prescribed

No parenteral preparations (except Insulin) may be prescribed

Any pure form or combination of the following generic classes of drugs may be prescribed, unless the drug or class of drug is listed as excluded from the formulary. No drugs or classes of drugs that are excluded may be prescribed.

## ANTIHISTAMINES

## ANTIINFECTIVE AGENTS

Drugs excluded under this generic category

### Amebicides

- Carbarsome
- Diiodohydroxyquin
- Emetine
- Glycobiarsol

### Chloramphenicol

### Oxacillin

### Minocycline

### Pediatric Tetracycline

### Clindamycin

### Plasmodicides

- Amodiaquine
- Chloroquine
- Hydroxychloroquine
- Primaquine
- Pyrimethamine

## ANTINEOPLASTIC AGENTS

All agents are excluded under this generic category

## AUTONOMIC DRUGS

## BLOOD FORMATION AND COAGULATION

Drugs excluded under this generic category

### Anticoagulants

## CARDIOVASCULAR DRUGS

## CENTRAL NERVOUS SYSTEM DRUGS

Drugs excluded under this generic category

### Psychotherapeutic agents

### Antidepressants

### Tranquilizers

### Benactyzine

### Lithium

### Respiratory Stimulants

### Cerebral stimulants

### Sedatives and hypnotics

## OTHER CRITERIA:

According to N. C. General Statute 90-18.1 and 90-18.2, written standing orders must be used.

A prescription may not indicate a refill.

Every prescription must be entered on the patient's chart. A second prescription for the same medication may be authorized by telephone and must be entered on the patient's chart and countersigned by the physician within 72 hours.

Amount of drug can be no more than 100 dosage units or a one month supply

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(Reprinted 10/15/83)

## DIAGNOSTIC AGENTS

## ELECTROLYTIC, CALORIC AND WATER BALANCE

## ENZYMES

## EXPECTORANTS AND COUGH PREPARATIONS

## EYE, EAR, NOSE AND THROAT PREPARATIONS

Drugs excluded under this generic category

Any preparation containing an excluded drug

## GASTROINTESTINAL DRUGS

## HORMONES AND SYNTHETIC SUBSTITUTES

Drugs excluded under this generic category

Parathyroid hormones and synthetics

Pituitary hormones and synthetics

## OXYTOXICS

All agents are excluded under this generic category

## RADIOACTIVE AGENTS

All agents are excluded under this generic category

## SKIN AND MUCOUS MEMBRANE PREPARATIONS

Drugs excluded under this generic category

Any preparation containing an excluded drug

## SPASMOLYTIC AGENTS

## VITAMINS

# N.C. GENERAL STATUTES REGARDING PHYSICIAN ASSISTANTS AND NURSE PRACTITIONERS

**§ 90-18 Practicing without license; practicing defined, penalties** — No person shall practice medicine or surgery, or any of the branches thereof, nor in any case prescribe for the cure of diseases unless he shall have been first licensed and registered so to do in the manner provided in this Article, and if any person shall practice medicine or surgery without being duly licensed and registered, as provided in this Article, he shall not be allowed to maintain any action to collect any fee for such services. The person so practicing without license shall be guilty of a misdemeanor, and upon conviction thereof shall be fined not less than fifty dollars (\$50 00) nor more than one hundred dollars (\$100 00), or imprisoned at the discretion of the court for each and every offense.

Any person shall be regarded as practicing medicine or surgery within the meaning of this Article who shall diagnose or attempt to diagnose, treat or attempt to treat, operate or attempt to operate on, or prescribe for or administer to, or profess to treat any human ailment, physical or mental, or any physical injury to or deformity of another person. Provided, that the following cases shall not come within the definition above recited:

(13) Any act, task or function performed by an assistant to a person licensed as a physician by the Board of Medical Examiners when

- a Such assistant is approved by and annually registered with the assistant to a physician, except that no more than two assistants may be currently registered for any physician, and
- b Such act, task or function is performed at the direction or under the supervision of such physician, in accordance with rules and regulations promulgated by the Board, and
- c The services of the assistant are limited to assisting the physician in the particular field or fields for which the assistant has been trained, approved and registered,

Provided that this subdivision shall not limit or prevent any physician from delegating to a qualified person any acts, tasks or functions which are otherwise permitted by law or established by custom.

(14) The practice of nursing by a registered nurse engaged in the practice of nursing and the performance of acts otherwise constituting medical practice by a registered nurse when performed in accordance with rules and regulations developed by a joint subcommittee of the Board of Medical Examiners and the Board of Nursing and adopted by both boards.

**§ 90-18.1. Limitations on physician assistants.** — (a) Any person who is approved under the provisions of G S 90-18 (13) to perform medical acts, tasks or functions as an assistant to a physician may use the title "physician assistant." Any other person who uses the title in any form or holds out to be a physician assistant or to be so approved, shall be deemed to be in violation of this Article.

(b) Physician assistants are authorized to write prescriptions for drugs under the following conditions:

- (1) The Board of Medical Examiners has adopted regulations governing the approval of individual physician assistants to write prescriptions with such limitations as the Board may determine to be in the best interest of patient health and safety,
- (2) The physician assistant has current approval from the Board,
- (3) The Board of Medical Examiners has assigned an identification number to the physician assistant which is shown on the written prescription, and
- (4) The supervising physician has provided to the physician assistant written instructions about indications and contraindications for prescribing drugs and a written policy for periodic review by the physician of the drugs prescribed.

(c) Physician assistants are authorized to compound and dispense drugs under the following conditions:

- (1) The function is performed under the supervision of a licensed pharmacist, and
- (2) Rules and regulations of the North Carolina Board of Pharmacy governing this function are complied with.

(d) Physician assistants are authorized to order medications, tests and treatments in hospitals, clinics, nursing homes and other health facilities under the following conditions:

- (1) The Board of Medical Examiners has adopted regulations governing the approval of individual physician assistants to order medications, tests and treatments with such limitations as the Board may determine to be in the best interest of patient health and safety,
- (2) The physician assistant has current approval from the Board,
- (3) The supervising physician has provided to the physician assistant written instructions about ordering medications, tests and treatments, and when appropriate, specific oral or written instructions for an individual patient, with provision for review by the physician of the order within a reasonable time, as determined by the Board, after the medication, test or treatment is ordered, and
- (4) The hospital or other health facility has adopted a written policy, approved by the medical staff after consultation with the nursing administration, about ordering medications, tests and treatments, including procedures for verification of the physician assistants' orders by nurses and other facility employees and such other procedures as are in the interest of patient health and safety.

(e) Any prescription written by a physician assistant or order given by a physician assistant for medications, tests or treatments shall be deemed to have been authorized by the physician approved by the Board as the supervisor of the physician assistant and such supervising physician shall be responsible for authorizing such prescription or order.

(f) Any registered nurse or licensed practical nurse who receives an order from a physician assistant for medications, tests or treatments is authorized to perform that order in the same manner as if it were received from a licensed physician.

**§ 90-18.2. Limitations on nurse practitioners.** — (a) Any nurse approved under the provisions of G S 90-18 (14) to perform medical acts, tasks or functions may use the title "nurse practitioner." Any other person who uses the title in any form or holds out to be a nurse practitioner or to be so approved, shall be deemed to be in violation of this Article.

(b) Nurse practitioners are authorized to write prescriptions for drugs under the following conditions:

- (1) The Board of Medical Examiners and Board of Nursing have adopted regulations developed by a joint subcommittee governing the approval of individual nurse practitioners to write prescriptions with such limitations as the boards may determine to be in the best interest of patient health and safety,
- (2) The nurse practitioner has current approval from the boards,
- (3) The Board of Medical Examiners has assigned an identification number to the nurse practitioner which is shown on the written prescription, and
- (4) The supervising physician has provided to the nurse practitioner written instructions about indications and contraindications for prescribing drugs and a written policy for periodic review by the physician of the drugs prescribed.

(c) Nurse practitioners are authorized to compound and dispense drugs under the following conditions:

- (1) The function is performed under the supervision of a licensed pharmacist, and
- (2) Rules and regulations of the North Carolina Board of Pharmacy governing this function are complied with.

(d) Nurse practitioners are authorized to order medications, tests and treatments in hospitals, clinics, nursing homes and other health facilities under the following conditions:

- (1) The Board of Medical Examiners and Board of Nursing have adopted regulations developed by a joint subcommittee governing the approval of individual nurse practitioners to order medications, tests and treatments with such limitations as the boards may determine to be in the best interest of patient health and safety,
- (2) The nurse practitioner has current approval from the boards,
- (3) The supervising physician has provided to the nurse practitioner written instructions about ordering medications, tests and treatments, and when appropriate, specific oral or written instructions for an individual patient, with provision for review by the physician of the order within a reasonable time, as determined by the Board, after the medication, test or treatment is ordered, and
- (4) The hospital or health facility has adopted a written policy, approved by the medical staff after consultation with the nursing administration, about ordering medications, tests and treatments, including procedures for verification of the nurse practitioners' orders by nurses and other facility employees and such other procedures as are in the interest of patient health and safety.

(e) Any prescription written by a nurse practitioner or order given by a nurse practitioner for medications, tests or treatments shall be deemed to have been authorized by the physician approved by the boards as the supervisor of the nurse practitioner and such supervising physician shall be responsible for authorizing such prescription or order.

(f) Any registered nurse or licensed practical nurse who receives an order from a nurse practitioner for medications, tests or treatments is authorized to perform that order in the same manner as if it were received from a licensed physician.

Name of PA applicant: \_\_\_\_\_

Practice address: \_\_\_\_\_  
(street) (city) (zip code)

Residence address: \_\_\_\_\_  
(street) (city) (zip code)

Birthplace: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Education: (Give location, attendance dates, number of years at each school, degrees, diplomas, or certificates earned.)

High School \_\_\_\_\_

College \_\_\_\_\_

PA Program \_\_\_\_\_  
(Attach photocopy of certificate of completion of PA program.)

Previous Occupations: (Include name and address of employer, dates of employment and brief job description. Use reverse side of this form, if necessary.)

Also required are letters of recommendation and \$50 fee. (See direction page for details.)

Circle the answer to the following questions. If you answer "yes" to any of the questions, attach a detailed explanation.

- |     |    |  |
|-----|----|--|
| YES | NO | 1. Have you ever been charged with violation of a federal, state, or local law other than minor traffic violations?          |
| YES | NO | 2. Have you ever had any difficulty with a medical licensing board?  |
| YES | NO | 3. Have you ever personally used or consumed any controlled substance other than those prescribed by a physician or dentist? |
| YES | NO | 4. Have you ever used alcohol to excess that has affected your ability to perform medical acts as a physician assistant?     |
| YES | NO | 5. Have you ever had or been requested to have a psychiatric evaluation or therapy?  |
| YES | NO | 6. Have you ever or are you now being sued regarding malpractice?  |
| YES | NO | 7. Are you aware of any investigation conducted of you by any governmental agency?   |

I hereby certify that I have read carefully and do understand the regulations for an assistant to a physician and the formulary adopted by the North Carolina Board of Medical Examiners and agree to comply with same.

\_\_\_\_\_  
Date

\_\_\_\_\_  
PA Applicant

I. PRIMARY SUPERVISING PHYSICIAN (To be completed by physician who assumes full administrative and supervisory responsibility)

A. Full name \_\_\_\_\_

B. Physician's specialty \_\_\_\_\_ NC Medical License # \_\_\_\_\_

C. Name of physician's practice \_\_\_\_\_

D. Address of physician's practice (street, city, zip code) \_\_\_\_\_

E. Type of practice (family practice, surgery, etc.) \_\_\_\_\_

F. Telephone (office) \_\_\_\_\_ (home) \_\_\_\_\_

G. Does primary physician named above have primary responsibility for the supervision of other physician assistants and/or nurse practitioners?  yes  no  
If yes, list names below.

H. Do other physician assistants and/or nurse practitioners under the primary supervision of other physicians work in this practice site?  yes  no  
If yes, list names below.

II. BACK-UP SUPERVISING PHYSICIANS (To be completed with information regarding all physicians who will serve as back-up for the primary physician's supervision of the PA. If more than three, provide information on separate sheet; if none, complete FORM 5.)

A. Full Name \_\_\_\_\_

Office Address \_\_\_\_\_

Telephone (office) \_\_\_\_\_ (home) \_\_\_\_\_

Specialty \_\_\_\_\_ NC Medical License # \_\_\_\_\_

B. Full Name \_\_\_\_\_

Office Address \_\_\_\_\_

Telephone (office) \_\_\_\_\_ (home) \_\_\_\_\_

Specialty \_\_\_\_\_ NC Medical License # \_\_\_\_\_

C. Full Name \_\_\_\_\_

Office Address \_\_\_\_\_

Telephone (office) \_\_\_\_\_ (home) \_\_\_\_\_

Specialty \_\_\_\_\_ NC Medical License # \_\_\_\_\_

I. PRACTICE LOCATIONS

List ALL locations where PA will function, including name of practice, physical location (street, city, zip) and mailing address, if different.

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II. SUPERVISION

A. "If the PA is to perform duties away from the responsible physician, the physician must clearly specify to the Board those circumstances which would justify this action and the written policies established to protect the patient." (See regulation .0007, paragraph 2.)

1. Will the PA perform medical acts when the responsible physician is not on site? \_\_\_\_\_yes \_\_\_\_\_no

If yes, describe situations in which this might occur and the back-up supervisory arrangements. \_\_\_\_\_

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2. Indicate standing orders on file in PA practice site covering most commonly encountered problems. (See G.S. 90-18.1) Check appropriate blank below:

\_\_\_\_\_ a. Published volume (give name) \_\_\_\_\_

\_\_\_\_\_ b. Individually designed standing orders

B. Chart review and countersigning by the supervising physician is required within 24 HOURS of PA/patient contact, unless request for specific consideration is received, giving full explanation of circumstances. (See regulation .0001(2)(b)(ii)(A).

CERTIFICATION OF UNDERSTANDING AND COMPLIANCE

FORM 4

Each of the undersigned has read this application and certifies that the information herein is correct to the best of his/her knowledge.

Each of the undersigned further certifies that he/she has read carefully and understands the statutes and regulations regarding physician assistants and the Approved Formulary adopted by the Board of Medical Examiners. Such statutes, regulations and formulary will be fully complied with by the undersigned.

EACH UNDERSIGNED PHYSICIAN ACCEPTS RESPONSIBILITY FOR THE APPLICANT'S CONDUCT AS A PHYSICIAN ASSISTANT UNDER HIS/HER SUPERVISION AND UNDERSTANDS THAT CONDUCT WHICH VIOLATES THE LAWS AND REGULATIONS GOVERNING PHYSICIAN ASSISTANTS MAY SUBJECT THE SUPERVISING PHYSICIAN TO SANCTIONS INCLUDING SUSPENSION OR REVOCATION OF THE PHYSICIAN'S LICENSE TO PRACTICE MEDICINE IN NORTH CAROLINA.

\_\_\_\_\_, M.D.  
Date Primary Supervising Physician

\_\_\_\_\_, M.D.  
Date Back-up Supervising Physician

\_\_\_\_\_, M.D.  
Date Back-up Supervising Physician

\_\_\_\_\_, M.D.  
Date Back-up Supervising Physician

\_\_\_\_\_  
Date PA Applicant

(All physicians listed on FORM 2 must sign this form. Use additional page if necessary. If there will be no back-up supervising physicians, the primary supervising physician and the PA applicant must sign this form and FORM 5.)

Since there will be no additional or back-up supervising physicians in this practice, the physician assistant will not perform medical acts unless the primary supervising physician is available for supervision as outlined in the application.

\_\_\_\_\_  
Date

\_\_\_\_\_, M.D.  
Primary Supervising Physician

\_\_\_\_\_  
Date

\_\_\_\_\_  
PA Applicant

(DO NOT SIGN THIS FORM, FORM 5, IF BACK-UP SUPERVISING PHYSICIANS ARE LISTED ON FORM 2 AND HAVE SIGNED FORM 4.)