

North Carolina Medical Board  
Allied Health Committee – Agenda  
January 19, 2011  
Conference Room 'D'- 10:00 a.m.

Peggy Robinson PA-C, Chairperson, William Walker, MD, Pamela Blizzard

Present:

Absent:

Open Session Physician Assistants

1. Old business. PAs with Five or More Primary Supervising Physicians.

Issue: Follow-up update from the November, 2010 Board Action regarding the status of PAs with five or more primary supervising physicians and audits on these PAs.

Staff Recommendation: For information.

Open Session NC Emergency Medical Services

1. EMS – Patient Transportation and other Rules. Information received from Dr. Kanof 12/10/10.

Issue: EMS – Patient Transportation and other Rules adopted by the Commission on 11/19/10. Rules 10A NCAC 13P.0221 Patient Transportation between Hospitals, Section .0700 – Enforcement, 10A NCAC 13P.0701, 10A NCAC 13P.0702, 10A NCAC 13P.1501 Section 1500 Denial, Suspension, Amendment, or revocation, 10A NCAC 13P.1502 EMS Systems, 10A NCAC 13P.1503 Licensed EMS Providers, 10A NCAC 13P.1504 Specialty Care Transport Programs, 10A NCAC 13P.1505 Trauma Centers, 10A NCAC 13P.1506 EMS Educational Institutions, 10A NCAC 13P.1507 EMS Vehicle Permits, 10A NCAC 13P.1508 EMS Personnel Credentials, 10A NCAC 13P.1509 Summary Suspension.

Staff Recommendation: For information.

2. EMS - Rules for Recovery and Rehabilitation of Chemically Dependent EMS Personnel and the Role of the NC EMS Disciplinary Committee. Information received from Dr. Kanof 12/30/10.

Issue: Utilizing the Rules for the Recovery and Rehabilitation of Chemically Dependent EMS Personnel and the Role of the NC EMS Disciplinary Committee. Rules 10A NCAC 13P.1402 Provisions for Participation in the Chemical Addiction or Abuse Treatment Program, 10A NCAC 13P.1403 Conditions for Restricted Practice with Limited Privileges.

Staff Recommendation: For information.

North Carolina Medical Board  
Allied Health Committee  
**Anesthesiologist Assistants, Nurse Practitioners, Clinical Pharmacists Practitioners,  
Perfusionists and Polysomnography Technicians**  
January 2011

Peggy Robinson, PA-C, Chair; William Walker, MD; Pamela Blizzard

1. Open Session Anesthesiologist Assistants
  - a. AA Certification
    - i. Discuss certifying exam and exam for continued demonstration of qualifications for AAs.  
  
Staff Recommendation: For discussion
2. Open Session Nurse Practitioners
  - a. No items for discussion
3. Open Session Clinical Pharmacist Practitioners
  - a. No Items for discussion
4. Open Session Perfusionists
  - a. Open session portion of the minutes of the November PAC meeting.
    - i. Summary: The open session minutes of the November PAC meeting have been sent to the Committee members for review.  
  
Staff Recommendation: Accept as information
  - b. Requests for reappointment to the PAC
    - i. Mr. Shearer's and Dr. Hines's terms expired on October 31, 2010. They have requested reappointment to the PAC.  
  
Staff Recommendation: Reappoint Ian Shearer, LP and Michael Hines, MD to the PAC.
  - c. CME Rule
    - i. Summary: During the May PAC meeting, Mr. Jimison explained the Board's CME rule for PAs and suggested that the PAC may want to follow the same reporting procedure. The Committee approved the proposed rule.  
  
Staff Recommendation: Approve CME rule for perfusionists.  
PAC Recommendation: Approve the proposed CME rule
  - d. Changes to Education Certification form
    - i. The Medical School Certification form has been changed on the MD/DO application. In order to be consistent with the other applications, the Education Certification form in the perfusionist application will need to be revised. The changes were reviewed by the Committee. They also discussed the best way to make the perfusionist community aware of the change. Mr. Hodges is the

president of the NC Perfusionist Society. He will have the NCPS send the information out.

Staff Recommendation: Accept as information

PAC Recommendation: Approve changes to the form

e. ABCP Recertification Process

- i. Dr. Hines has drafted a letter to be sent to the American Board of Cardiovascular Perfusion addressing the requirements for certification renewal. He points out that perfusionist can currently maintain annual certification with the ABCP exclusively with ECMO shifts and other non-CPB cases. He suggests that the ABCP work to revise their requirements to allow no more than 10 ECMO “shifts” (25%) toward the minimum annual number of 40 perfusion cases, and also set a limit on the use of the other non-CPB categories. Dr. Hines would like for the ABCP to consider setting a minimum number of CPB (described as “Primary Bypass” by the ABCP) of at least 20 cases per year (50%), perhaps even averaged over two years (e.g. 15 year 1, 25 year 2).

The general consensus of the members present was that adding caseload requirements for certification may cause small community programs to have to shut down. The Committee viewed this as an awareness issue regarding competency and performance for individual employers to address.

Mr. Jimison will contact Dr. Hines to find out if the letter was sent to the ABCP. If the letter has been sent, the Committee would like to know what the response was.

Staff Recommendation: Accept as information

PAC Recommendation: Defer this issue until Dr. Hines has been contacted. Mr. Jimison will share information from Dr. Hines with PAC members. Discuss at March PAC meeting.

f. PAC Vacancy

- i. Board staff has been in contact with Hugh Tilson at the NC Hospital Association. A replacement for Mr. Gannotta has not been named yet. David Henderson will be asked to contact NCHA. An update will be given at the March meeting.

Staff Recommendation: For information

PAC Recommendation: Accept as information

g. Late fee rule

- i. The PAC members reviewed the rules to determine whether there are rules they may want to see, or believes may need to be, changed. Subsequent to that meeting, the staff encountered an issue with the wording of the rule imposing a late fee for perfusionists who fail to renew his or her perfusion license on time.

Staff Recommendation: Adopt the proposed rule change  
PAC Recommendation: Adopt the proposed rule change

5. Open Session Polysomnography
  - a. No items for discussion