

**PHYSICIAN ASSISTANT PRACTICE AGREEMENT  
(Title 16, CCR, Section 1399.540)**

This Practice Agreement has been developed through collaboration among physicians and physician assistants in Torrance Emergency Physicians, Inc., an emergency department provider staffing company and hereinafter referred to as the “Practice”, for the purpose of defining the medical services which each and every physician assistant (“PA”) who executes this Practice Agreement is authorized to perform and to meet the statutory requirement set forth in California Business and Professions Code (“BPC”) §3500 et seq. and Section 1399.500 et seq of the California Code of Regulations.

<b>Physician Assistant Name:</b>	
<b>Name of Physician Assistant training program:</b>	
<b>Date of successful completion from above training program, which includes successful completion of pharmacology course:</b>	
<b>Date of successful completion of Schedule II-V controlled substances education course commensurate with California Code of Regulations Sections 1399.530, 1399.610 and 1399.612:</b>	
<b>Date PA took the licensing examination for physician assistants recognized by the State of California (e.g., Physician Assistant National Certifying Examination or a specialty examination given by the State of California):</b>	
<b>PA License# granted by the State of California:</b>	
<b>Expiration Date of Physician Assistant Licensure:</b>	
<b>PA Signature as to Truth and Accuracy of this information:</b>	

**1. Medical Services Authorized:** PA is authorized to perform medical services which are consistent with this Practice Agreement and as specified in the Practice Prerogative Application Card (appended hereto), and are performed under the supervision of a supervising physician (consistent with Section 3 of this Practice Agreement) and for which the PA’s education, training and experience have prepared the PA to render such services.

PA attests that PA is competent to perform medical services that are consistent with this Practice Agreement and as specified in the Practice Prerogative Application Card (appended hereto) and PA's competence will be routinely evaluated consistent with Section 4 of this Practice Agreement.

Subject to the foregoing, the PA is further authorized to: (a) perform the medical functions set forth in BPC §3502.3; (b) provide care and sign forms under the workers' compensation program pursuant to Labor Code §3209.10; and (c) perform any other services or activities authorized under California law.

PA understands that PA is not authorized to perform and will not perform certain services enumerated in BPC §3502(d).

**2. Ordering and Furnishing of Drugs and Devices:** In compliance with State and Federal prescribing laws, the PA may furnish or order a drug or device subject to all of the following:

- In accordance with this Practice Agreement and consistent with the Practice Prerogative Application Card (appended hereto) and consistent with PA's education, training and experience or for which clinical competency has been established and maintained.
- Under the supervision of a supervising physician (consistent with Section 3 of this Practice Agreement).
- PA is authorized to furnish a Schedule II-V controlled substance only as reasonably indicated by the patient's condition and consistent with PA's education, training, experience and competency in prescribing Schedule II-V controlled substances. In furnishing Schedule II controlled substances, PA will ensure that such drugs will not be furnished without PA specifying the illness, injury or condition reasonably indicating such furnishing and consulting with a supervising physician if PA believes such consultation is necessary.
- Furnish or order Schedule II through Schedule V controlled substances consistent with the Practice Prerogative Application Card (appended hereto).
- Furnish or order Schedule II or III controlled substances in accordance with this Practice Agreement and the Practice Prerogative Application Card (appended hereto) or pursuant to a patient specific order approved by the supervising physician.
- PA has satisfactorily completed a course in pharmacology covering the drugs and devices to be furnished or ordered pursuant to this Practice Agreement or has completed a program for instruction consistent with BPC §3502.1(e)(1).
- With regards to Schedule II controlled substances, PA attests that PA has an active DEA license in good standing and has satisfactorily completed a course that covers Schedule II controlled substances consistent with BPC §3502.1(e)(3).

- PA acknowledges that PA will not order any Schedule II through V controlled substances without advance physician approval unless PA has satisfactorily completed courses that meet the requirements of BPC §3502.1(e).

Additionally, the PA may dispense drugs and devices as provided for in BPC §4170 and request, sign, and receive drug samples as provided for in BPC §4061.

**3. Physician Supervision:** Consistent with BPC §3501(e), a supervising physician referred to in this Practice Agreement means a physician licensed by the Medical Board of California or by the Osteopathic Medical Board of California who supervises one or more physician assistants, who possesses a current valid license to practice medicine, and who is not currently on disciplinary probation prohibiting the employment or supervision of a physician assistant. A supervising physician may provide supervision of PA pursuant to this Practice Agreement.

Consistent with BPC §3502.1(f), supervision means that a licensed physician oversees the activities of, and accepts responsibility for, the medical services rendered by a physician assistant. Supervision shall not be construed to require the physical presence of the physician but does require supervision consistent with the Practice Agreement and the physician being available by telephone or other electronic communication method at the time PA examines a patient.

PA understands and agrees that PA may only provide those medical services which PA is competent to perform, for which the PA is being supervised and which are consistent with the PA's education, training, and experience. PA shall consult with, and/or refer a patient to, a supervising physician or other healthcare professional when providing medical services to a patient which exceeds the PA's competency, education, training, or experience or in situations when a patient desires to see a physician.

**4. Physician Assistant Competency and Qualification Evaluation:** The Practice, through its Quality Assurance Committee, will review approximately 10 medical charts per quarter which detail the care provided by PA. The charts reviewed will be selected with the intention of achieving a cross section of care provided while it is understood that a true cross section may not be possible due to the manner of care provided and the time involved in the chart selection process. PA's competency and qualifications will be routinely reviewed in this manner so as to ensure care is being provided that is consistent with this Practice Agreement, BPC §3500 et seq and Section 1399.500 et seq of the California Code of Regulations.

**5. Practice Site:** All medical services consistent with this Practice Agreement and as specified in the Practice Prerogative Application Card (appended hereto) may be performed for care of patients in the Torrance Memorial Medical Center Emergency Department located at 3330 Lomita Blvd., Torrance, CA 90505.

**6. Review of Practice Agreement:** This Practice Agreement shall be reviewed on a regular basis and updated by the Practice when warranted by a change in conditions or circumstances.

**7. Physician Assistant Declaration:** PA's signature below signifies that PA has read the entirety of this Practice Agreement and fully understands the meaning and intent of each and every provision in this Practice Agreement. PA has had an opportunity to discuss this Practice Agreement with persons of PA's choosing and PA attests that PA has satisfied himself/herself that PA understands the meaning and intent of this Practice Agreement. PA freely and competently agrees to comply with the terms of this Practice Agreement, including the requirements specified in referred to statutory provisions and in the Practice Prerogative Application Card (appended hereto) discussed in this Practice Agreement

---

Physician Assistant Signature

---

Physician Assistant Name

---

Date