

S T A T E O F N E W Y O R K

7357--A

I N S E N A T E

March 31, 2010

Introduced by Sen. YOUNG -- read twice and ordered printed, and when printed to be committed to the Committee on Health -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the public health law, the education law, the vehicle and traffic law, the social services law, the workers' compensation law, the mental hygiene law and the general business law, in relation to clarifying the scope of practice of registered physician assistants

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. Subdivision 1 of section 3700 of the public health law, as
2 amended by chapter 210 of the laws of 1975, is amended to read as
3 follows:
4 1. Physician's assistant. The term "physician's assistant" means [a
5 person] A DEPENDENT PRACTITIONER WORKING UNDER THE SUPERVISION OF A
6 LICENSED PHYSICIAN RESPONSIBLE FOR THE ACTIONS OF THE PHYSICIAN ASSIST-
7 ANT AND who is registered as a [physician's] PHYSICIAN assistant pursu-
8 ant to section sixty-five hundred thirty-one of the education law.
9 S 2. The public health law is amended by adding a new section 3705 to
10 read as follows:
11 S 3705. PERFORMANCE OF MEDICAL SERVICES. 1. A PHYSICIAN'S ASSISTANT
12 MAY PERFORM MEDICAL SERVICES, BUT ONLY WHEN UNDER THE SUPERVISION OF A
13 PHYSICIAN AND ONLY WHEN SUCH ACTS ASSIGNED TO HIM OR HER ARE WITHIN THE
14 SCOPE OF PRACTICE OF SUCH SUPERVISING PHYSICIAN. THE SUPERVISING PHYSI-
15 CIAN MAY DELEGATE TO THE PHYSICIAN'S ASSISTANT ANY MEDICAL PROCEDURES OR
16 TASKS FOR WHICH THE PHYSICIAN'S ASSISTANT IS APPROPRIATELY TRAINED AND
17 QUALIFIED TO PERFORM AND THAT ARE PERFORMED WITHIN THE NORMAL SCOPE OF
18 THE PHYSICIAN'S PRACTICE.
19 2. NOTHING IN THIS ARTICLE OR IN ARTICLE ONE HUNDRED THIRTY-ONE-B OF
20 THE EDUCATION LAW SHALL BE CONSTRUED TO AUTHORIZE PHYSICIAN'S ASSISTANTS
21 TO PERFORM THOSE SPECIFIC FUNCTIONS AND DUTIES SPECIFICALLY DELEGATED BY
22 LAW TO THOSE PERSONS LICENSED AS ALLIED HEALTH PROFESSIONALS UNDER THIS
23 CHAPTER OR THE EDUCATION LAW. SPECIFICALLY, PHYSICIAN'S ASSISTANTS SHALL
24 NOT PERFORM THE PRACTICE OF RADIOLOGIC TECHNOLOGY OR THE PRACTICE OF

EXPLANATION--Matter in *ITALICS* (underscored) is new; matter in brackets [] is old law to be omitted.

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1 OPTOMETRY AS THOSE PRACTICES ARE DEFINED UNDER THIS CHAPTER AND THE
2 EDUCATION LAW.

3 S 3. Subdivisions 1 and 2 of section 2305 of the public health law, as
4 amended by chapter 878 of the laws of 1980, are amended to read as
5 follows:

6 1. No person, other than a licensed physician OR A PHYSICIAN ASSISTANT
7 UNDER THE SUPERVISION OF A LICENSED PHYSICIAN, or, in a hospital, a
8 staff physician, shall diagnose, treat or prescribe for a person who is
9 infected with a sexually transmissible disease, or who has been exposed
10 to infection with a sexually transmissible disease, or dispense or sell
11 a drug, medicine or remedy for the treatment of such person except on
12 prescription of a duly licensed physician OR A PHYSICIAN ASSISTANT UNDER
13 THE SUPERVISION OF A LICENSED PHYSICIAN.

14 2. A licensed physician OR A PHYSICIAN ASSISTANT UNDER THE SUPERVISION
15 OF A LICENSED PHYSICIAN, or in a hospital, a staff physician, may diag-
16 nose, treat or prescribe for a person under the age of twenty-one years
17 without the consent or knowledge of the parents or guardian of said
18 person, where such person is infected with a sexually transmissible
19 disease, or has been exposed to infection with a sexually transmissible
20 disease.

21 S 4. Subdivisions 1 and 2 of section 2308 of the public health law are
22 amended to read as follows:

23 1. Every physician OR PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF
24 SUCH PHYSICIAN attending pregnant women in the state shall in the case
25 of every woman so attended take or cause to be taken a sample of blood
26 of such woman at the time of first examination, and submit such sample
27 to an approved laboratory for a standard serological test for syphilis.

28 2. Every other person permitted by law to attend upon pregnant women
29 in the state but not permitted by law to take blood tests, shall cause a
30 sample of the blood of such pregnant woman to be taken promptly by a
31 duly licensed physician OR A PHYSICIAN ASSISTANT UNDER THE SUPERVISION
32 OF SUCH PHYSICIAN and submitted to an approved laboratory for a standard
33 serological test for syphilis.

34 S 5. Section 2498 of the public health law, as added by chapter 237 of
35 the laws of 1990, is amended to read as follows:

36 S 2498. Provision of summary by physician. The summary shall be
37 provided by a physician, OR A PHYSICIAN ASSISTANT UNDER THE SUPERVISION
38 OF SUCH PHYSICIAN, to each person under such physician's OR PHYSICIAN
39 ASSISTANT'S care, when a hysterectomy is under consideration for that
40 person.

41 S 6. Subdivision 10 of section 2500-e of the public health law, as
42 added by chapter 4 of the laws of 1990, is amended to read as follows:

43 10. If any licensed physician, PHYSICIAN ASSISTANT UNDER THE SUPER-
44 VISION OF A LICENSED PHYSICIAN or nurse practitioner certifies that a
45 follow-up dose of hepatitis B vaccine may be detrimental to a child's
46 health, the requirements of this section shall be inapplicable until
47 such immunization is found no longer to be detrimental to such child's
48 health.

49 S 7. Section 2502 of the public health law, as amended by chapter 884
50 of the laws of 1972, is amended to read as follows:

51 S 2502. Report of certain conditions. Any nurse-midwife, nurse or
52 other person having the care of an infant within the age of two weeks
53 who neglects or omits to report immediately to the health officer or to
54 a legally qualified practitioner of medicine of the city, town or place
55 where such child is being cared for, the fact that one or both eyes of
56 such infant are [inflamed] INFLAMED or reddened whenever such shall be

1 the case, or who applies any remedy therefor without the advice, or
2 except by the direction of such officer or physician OR A PHYSICIAN
3 ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN is guilty of a misdemea-
4 nor.

5 S 8. Section 2503 of the public health law, as amended by chapter 485
6 of the laws of 1978, is amended to read as follows:

7 S 2503. Drug information to be furnished expectant mothers. The physi-
8 cian, A PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN or
9 nurse-midwife to be in attendance at the birth of a child shall inform
10 the expectant mother, in advance of the birth, of the drugs that such
11 physician, PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN or
12 nurse-midwife expects to employ during pregnancy and of the obstetrical
13 and other drugs that such physician, PHYSICIAN ASSISTANT UNDER THE
14 SUPERVISION OF A PHYSICIAN or nurse-midwife expects to employ at birth
15 and of the possible effects of such drugs on the child and mother.

16 S 9. Subdivision 4 of section 2504 of the public health law, as added
17 by chapter 769 of the laws of 1972 and as renumbered by chapter 976 of
18 the laws of 1984, is amended to read as follows:

19 4. Medical, dental, health and hospital services may be rendered to
20 persons of any age without the consent of a parent or legal guardian
21 when, in the physician's OR PHYSICIAN ASSISTANT'S UNDER THE SUPERVISION
22 OF SUCH PHYSICIAN judgment an emergency exists and the person is in
23 immediate need of medical attention and an attempt to secure consent
24 would result in delay of treatment which would increase the risk to the
25 person's life or health.

26 S 10. Subdivision 1 of section 2570 of the public health law, as
27 amended by chapter 495 of the laws of 1955, is amended to read as
28 follows:

29 1. Every institution in this state, operated for the express purpose
30 of receiving or caring for dependent, neglected or destitute children or
31 juvenile delinquents, except hospitals, shall have attached thereto a
32 regular physician OR PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A
33 REGULAR PHYSICIAN of its selection duly licensed under the laws of the
34 state and in good professional standing, whose name and address shall be
35 kept posted conspicuously within such institution.

36 S 11. Subdivision 1 of section 2573 of the public health law, as added
37 by chapter 495 of the laws of 1955, is amended to read as follows:

38 1. The administrative officer or person in charge and the regular
39 physician OR PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A REGULAR
40 PHYSICIAN of every institution caring for children referred to in this
41 article shall make such reports concerning the physical condition and
42 health of the children and the environmental sanitation of the institu-
43 tion as may be required by the state health commissioner, local health
44 officer or health commissioner having jurisdiction.

45 S 12. Subdivision 14 of section 3001 of the public health law, as
46 amended by chapter 804 of the laws of 1992, is amended to read as
47 follows:

48 14. "Qualified medical and health personnel" means physicians, PHYSI-
49 CIAN ASSISTANTS, registered professional nurses and advanced emergency
50 medical technicians competent in the management of patients requiring
51 advanced life support care.

52 S 13. Subdivisions 4 and 5 of section 3602 of the public health law,
53 as amended by chapter 600 of the laws of 2002, are amended to read as
54 follows:

55 4. "Home health aide services" means simple health care tasks,
56 personal hygiene services, housekeeping tasks essential to the patient's

1 health and other related supportive services. Such services shall be
2 prescribed by a physician OR A PHYSICIAN ASSISTANT UNDER THE SUPERVISION
3 OF A PHYSICIAN in accordance with a plan of treatment for the patient
4 and shall be under the supervision of a registered professional nurse
5 from a certified home health agency or, when appropriate, from a provid-
6 er of a long term home health care program and of the appropriate
7 professional therapist from such agency or provider when the aide
8 carries out simple procedures as an extension of physical, speech or
9 occupational therapy. Such services may also be prescribed or ordered by
10 a nurse practitioner to the extent authorized by law and consistent with
11 the written practice agreement pursuant to subdivision three of section
12 six thousand nine hundred two of the education law and not prohibited by
13 federal law or regulation.

14 5. "Personal care services" means services to assist with personal
15 hygiene, dressing, feeding and household tasks essential to the
16 patient's health. Such services shall be prescribed by a physician OR A
17 PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN in accordance
18 with a plan of home care supervised by a registered professional nurse.
19 Such services may also be prescribed or ordered by a nurse practitioner
20 to the extent authorized by law and consistent with the written practice
21 agreement pursuant to subdivision three of section six thousand nine
22 hundred two of the education law and not prohibited by federal law or
23 regulations.

24 S 14. Subdivision 4 of section 4141 of the public health law, para-
25 graph (d) as added by chapter 413 of the laws of 2005, is amended to
26 read as follows:

27 4. (a) The medical certificate shall be made, dated, and signed by the
28 physician OR A PHYSICIAN ASSISTANT ACTING UNDER THE SUPERVISION OF A
29 PHYSICIAN, if any, last in attendance on the deceased.

30 (b) Indefinite terms, denoting only symptoms of disease or conditions
31 resulting from disease, shall not be held sufficient.

32 (c) Any certificate stating the cause of death in terms which the
33 commissioner [shall have declared] DECLARES indefinite[,] shall be
34 returned to the physician, A PHYSICIAN ASSISTANT ACTING UNDER THE SUPER-
35 VISION OF A PHYSICIAN, or person making the medical certificate[,] for
36 correction and more definite statement. A CERTIFICATE CERTIFIED TO AND
37 SIGNED BY A PHYSICIAN ASSISTANT IN ACCORDANCE WITH THIS SECTION SHALL
38 HAVE THE SAME FORCE AND EFFECT IN LAW AS A CERTIFICATE SIGNED BY A
39 PHYSICIAN.

40 (d) Where a death is caused by an opioid overdose, such information
41 shall be indicated, including any related information as the commission-
42 er may require.

43 S 15. Section 4141-a of the public health law, as added by chapter 402
44 of the laws of 1968, is amended to read as follows:

45 S 4141-a. Death certificate; duties of hospital administrator. When a
46 death occurs in a hospital, except in those cases where certificates are
47 issued by coroners or medical examiners, the person in charge of such
48 hospital or his OR HER designated representative shall promptly present
49 the certificate to the physician OR A PHYSICIAN ASSISTANT ACTING UNDER
50 THE SUPERVISION OF A PHYSICIAN in attendance, or a physician OR A PHYSI-
51 CIAN ASSISTANT ACTING UNDER THE SUPERVISION OF A PHYSICIAN acting in his
52 OR HER behalf, who shall promptly certify to the facts of death, provide
53 the medical information required by the certificate, sign the medical
54 certificate of death, and thereupon return such certificate to such
55 person, so that the seventy-two hour registration time limit prescribed
56 in section four thousand one hundred forty of this [chapter] TITLE can

1 be met. A CERTIFICATE CERTIFIED TO AND SIGNED BY A PHYSICIAN ASSISTANT
2 IN ACCORDANCE WITH THIS SECTION SHALL HAVE THE SAME FORCE AND EFFECT IN
3 LAW AS A CERTIFICATE SIGNED BY A PHYSICIAN.

4 S 16. Subdivision (b) of section 4142 of the public health law, as
5 amended by chapter 402 of the laws of 1968, is amended to read as
6 follows:

7 (b) present the certificate promptly to the attending physician OR
8 PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN, who shall
9 forthwith certify to the facts of death, provide the medical information
10 required by the certificate and sign the medical certificate of death,
11 or to the coroner or medical examiner in those cases where so required
12 by this article or, when a death occurs in a hospital, except in those
13 cases where certificates are issued by coroners or medical examiners, to
14 the person in charge of such hospital or his OR HER designated represen-
15 tative, who shall obtain the medical certificate of death as prescribed
16 in section four thousand one hundred forty-one-a of this [chapter]
17 TITLE;

18 S 17. Paragraph (b) of subdivision 2 of section 4144 of the public
19 health law, as amended by chapter 188 of the laws of 1997, is amended to
20 read as follows:

21 (b) [Verbal] SPOKEN permission to remove a body of a deceased person
22 from the county in which death occurred or the body was found to a non-
23 adjacent county within the state of New York, as provided in subdivision
24 one [hereof] OF THIS SECTION, shall be issued by the said registrar of
25 vital statistics, upon request by telephone of a licensed funeral direc-
26 tor or undertaker who holds a certificate of death signed by the attend-
27 ing physician OR PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSI-
28 CIAN, showing THAT the death resulted from natural causes[,] and was not
29 a result of accidental, suicidal, homicidal or other external causes.

30 S 18. The section heading and subdivisions 2, 3 and 4 of section 4161
31 of the public health law, the section heading and subdivision 4 as
32 amended by chapter 402 of the laws of 1968, subdivision 2 as amended by
33 chapter 884 of the laws of 1972, and subdivision 3 as amended by chapter
34 388 of the laws of 1968, are amended to read as follows:

35 Fetal death certificates; form and content; physicians, PHYSICIAN
36 ASSISTANTS, midwives, and hospital administrators.

37 2. In each case where a physician OR PHYSICIAN ASSISTANT UNDER THE
38 SUPERVISION OF A PHYSICIAN was in attendance at[,] or after[,] a fetal
39 death, it [shall be] IS the duty of such physician OR PHYSICIAN ASSIST-
40 ANT UNDER THE SUPERVISION OF A PHYSICIAN to certify to the birth and to
41 the cause of death on the fetal death certificate. Where a nurse-mid-
42 wife was in attendance at a fetal death it [shall be] IS the duty of
43 such nurse-midwife to certify to the birth but, HE OR she shall not
44 certify to the cause of death on the fetal death certificate.

45 3. Fetal deaths occurring without the attendance of a physician OR
46 PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN as [defined]
47 PROVIDED in subdivision two of this section shall be treated as deaths
48 without medical attendance, as provided in this article.

49 4. When a fetal death occurs in a hospital, except in those cases
50 where certificates are issued by coroners or medical examiners, the
51 person in charge of such hospital or his OR HER designated represen-
52 tative shall promptly present the certificate to the physician OR PHYSI-
53 CIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN in attendance, or a
54 physician OR PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A PHYSICIAN
55 acting in his OR HER behalf, who shall promptly certify to the facts of
56 birth and of fetal death, provide the medical information required by

1 the certificate, sign the medical certificate of birth and death, and
2 thereupon return such certificate to such person, so that the seventy-
3 two hour registration time limit prescribed in section four thousand one
4 hundred sixty of this [chapter] TITLE can be met.

5 S 19. The section heading and subdivision 1 of section 4171 of the
6 public health law, subdivision 1 as amended by chapter 884 of the laws
7 of 1972, is amended to read as follows:

8 Records; duties of physicians, PHYSICIAN ASSISTANTS, and others to
9 furnish information. 1. Physicians, PHYSICIAN ASSISTANTS UNDER THE
10 SUPERVISION OF A PHYSICIAN, nurse-midwives, funeral directors, undertak-
11 ers and informants, and all other persons having knowledge of the facts,
12 are hereby required to supply, upon a form provided by the commissioner
13 or upon the original certificate, such information as they may possess
14 regarding any birth or death upon demand of the commissioner, in person,
15 by mail, or through the registrar.

16 S 20. Subdivisions 1, 3 and 5 of section 4175 of the public health
17 law, as amended by chapter 884 of the laws of 1972, are amended to read
18 as follows:

19 1. If, at any time after the birth, or within one year of the death,
20 of any person within the state, a certified copy of the official record
21 of said birth or death, with the information required to be registered
22 by this article, [be] IS necessary for legal, judicial, or other proper
23 purposes, and, after search by the commissioner or his OR HER represen-
24 tatives, it [should appear] APPEARS that no such certificate of birth or
25 death was made and filed as provided by this article, then the commis-
26 sioner shall immediately require the physician, PHYSICIAN ASSISTANT
27 UNDER THE SUPERVISION OF A PHYSICIAN, or nurse-midwife[,] who, being in
28 attendance upon a birth, failed or neglected to file a certificate ther-
29 eof, or the funeral director, undertaker, or other person who, having
30 charge of the interment or removal of the body of a deceased person,
31 failed or neglected to file the certificate of death, if he or she [be]
32 IS living, to obtain and file at once with the local registrar such
33 certificate in as complete form as the lapse of time will permit.

34 3. If the physician, PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A
35 PHYSICIAN, nurse-midwife, funeral director, or undertaker responsible
36 for the report[,] is deceased or cannot be located, then the person
37 making application for the certified copy of the record may file such
38 certificate of birth or death together with such statements subscribed
39 and affirmed by the persons making them as true under the penalties of
40 perjury and other evidence as the commissioner may require.

41 5. The delinquent physician, PHYSICIAN ASSISTANT UNDER THE SUPERVISION
42 OF A PHYSICIAN, nurse-midwife, funeral director, undertaker, or other
43 person may, in the discretion of the commissioner, be prosecuted as
44 required by this article, without bar from the statute of limitations,
45 if he or she [shall neglect or fail] NEGLECTS OR FAILS to file promptly
46 the certificate required by this section.

47 S 21. Subdivision 1 of section 6540 of the education law, as amended
48 by chapter 179 of the laws of 1992, is amended to read as follows:

49 1. Physician assistant. The term "physician assistant" means [a
50 person] A DEPENDENT PRACTITIONER WORKING UNDER THE SUPERVISION OF A
51 LICENSED PHYSICIAN RESPONSIBLE FOR THE ACTIONS OF THE PHYSICIAN ASSIST-
52 ANT AND who is registered as a physician assistant pursuant to this
53 article.

54 S 22. Subdivisions 1 and 8 of section 6542 of the education law, as
55 amended by chapter 179 of the laws of 1992, are amended to read as
56 follows:

1 1. Notwithstanding any other provision of law, a physician assistant
2 may perform medical services, but only when under the supervision of a
3 physician and only when such acts and duties as are assigned to him OR
4 HER are within the scope of practice of such supervising physician. THE
5 SUPERVISING PHYSICIAN MAY DELEGATE TO THE PHYSICIAN ASSISTANT ANY
6 MEDICAL PROCEDURES OR TASKS FOR WHICH THE PHYSICIAN ASSISTANT IS APPRO-
7 PRIATELY TRAINED AND QUALIFIED TO PERFORM AND THAT ARE PERFORMED WITHIN
8 THE NORMAL SCOPE OF THE PHYSICIAN'S PRACTICE.

9 8. Nothing in this article, or in article thirty-seven of the public
10 health law, shall be construed to authorize physician assistants or
11 specialist assistants to perform those specific functions and duties
12 specifically delegated by law to those persons licensed as allied health
13 professionals under the public health law or [the education law] THIS
14 TITLE. SPECIFICALLY, PHYSICIAN ASSISTANTS SHALL NOT PERFORM THE PRAC-
15 TICE OF RADIOLOGIC TECHNOLOGY OR THE PRACTICE OF OPTOMETRY AS THOSE
16 PRACTICES ARE DEFINED UNDER THE PUBLIC HEALTH LAW AND THIS TITLE.

17 S 23. The education law is amended by adding a new section 6545-a to
18 read as follows:

19 S 6545-A. STATUTORY CONSTRUCTION. A PHYSICIAN ASSISTANT MAY PERFORM
20 ANY FUNCTION, WITH APPROPRIATE PHYSICIAN SUPERVISION, IN ANY HEALTH CARE
21 SETTING, THAT A STATUTE AUTHORIZES OR DIRECTS A PHYSICIAN TO PERFORM AND
22 THAT IS WITHIN THE NORMAL PRACTICE OF THAT PHYSICIAN, EXCEPT THOSE FUNC-
23 TIONS AUTHORIZED OR DIRECTED BY AND IN ARTICLE THIRTY-THREE OF THE
24 PUBLIC HEALTH LAW, UNLESS THE STATUTE AUTHORIZING OR DIRECTING THE
25 PHYSICIAN TO PERFORM SUCH FUNCTION OR FUNCTIONS EXPRESSLY STATES OTHER-
26 WISE.

27 S 24. Subdivision c of section 6731 of the education law, as amended
28 by chapter 389 of the laws of 2007, is amended to read as follows:

29 c. Such treatment shall be rendered pursuant to a referral which may
30 be directive as to treatment by a licensed physician, A PHYSICIAN
31 ASSISTANT UNDER THE SUPERVISION OF A LICENSED PHYSICIAN, dentist, podia-
32 trist, nurse practitioner or licensed midwife, each acting within his or
33 her lawful scope of practice, and in accordance with their diagnosis,
34 except as provided in subdivision d of this section.

35 S 25. Subdivision c of section 6741 of the education law, as added by
36 chapter 618 of the laws of 1980, is amended to read as follows:

37 c. Nothing in this article is intended to affect the overall medical
38 direction by a licensed physician OR A PHYSICIAN ASSISTANT UNDER THE
39 SUPERVISION OF A LICENSED PHYSICIAN, of a physical therapist assistant.

40 S 26. Subdivision 3 of section 6807 of the education law, as added by
41 chapter 573 of the laws of 1999, is amended to read as follows:

42 3. A pharmacist may dispense drugs and devices to a registered profes-
43 sional nurse, and a registered professional nurse may possess and admin-
44 ister, drugs and devices, pursuant to a non-patient specific regimen
45 prescribed or ordered by a licensed physician, A PHYSICIAN ASSISTANT
46 UNDER THE SUPERVISION OF A LICENSED PHYSICIAN or certified nurse practi-
47 tioner, pursuant to regulations promulgated by the commissioner and the
48 public health law.

49 S 27. Subdivision 5 of section 6909 of the education law, as added by
50 chapter 573 of the laws of 1999, is amended to read as follows:

51 5. A registered professional nurse may execute a non-patient specific
52 regimen prescribed or ordered by a licensed physician, A PHYSICIAN
53 ASSISTANT UNDER THE SUPERVISION OF A LICENSED PHYSICIAN or certified
54 nurse practitioner, pursuant to regulations promulgated by the commis-
55 sioner.

1 S 28. Section 6957 of the education law, as amended by chapter 328 of
2 the laws of 1992, is amended to read as follows:

3 S 6957. Exempt persons. Nothing in this article shall be construed to
4 affect, prevent or in any manner expand or limit any duty or responsi-
5 bility of a licensed physician OR A PHYSICIAN ASSISTANT UNDER THE SUPER-
6 VISION OF A LICENSED PHYSICIAN, from practicing midwifery or affect or
7 prevent a medical student, PHYSICIAN ASSISTANT STUDENT or midwifery
8 student in clinical practice under the supervision of a licensed physi-
9 cian or board certified obstetrician/gynecologist or licensed midwife
10 practicing [pursuant to the provisions of section twenty-five hundred
11 sixty of the public health law] in pursuance of an educational program
12 registered by the department from engaging in such practice.

13 S 29. Section 7901 of the education law, as amended by chapter 146 of
14 the laws of 1993, is amended to read as follows:

15 S 7901. Definition. The practice of the profession of occupational
16 therapy is defined as the functional evaluation of the client and the
17 planning and utilization of a program of purposeful activities to devel-
18 op or maintain adaptive skills, designed to achieve maximal physical and
19 mental functioning of the patient in his or her daily life tasks. Such
20 treatment program shall be rendered on the prescription or referral of a
21 physician, A PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A LICENSED
22 PHYSICIAN or nurse practitioner. However, nothing contained in this
23 article shall be construed to permit any licensee hereunder to practice
24 medicine or psychology, including psychotherapy.

25 S 30. Subparagraph 1 of paragraph (a) of subdivision 4 of section 1194
26 of the vehicle and traffic law, as amended by chapter 406 of the laws of
27 1988, is amended to read as follows:

28 (1) At the request of a police officer, the following persons may
29 withdraw blood for the purpose of determining the alcoholic or drug
30 content therein: (i) a physician, a registered professional nurse or a
31 registered [physician's] PHYSICIAN assistant; or (ii) under the super-
32 vision and at the direction of a physician OR A PHYSICIAN ASSISTANT
33 UNDER THE SUPERVISION OF A LICENSED PHYSICIAN: a medical laboratory
34 technician or medical technologist as classified by civil service; a
35 phlebotomist; an advanced emergency medical technician as certified by
36 the department of health; or a medical laboratory technician or medical
37 technologist employed by a clinical laboratory approved under title five
38 of article five of the public health law. This limitation shall not
39 apply to the taking of a urine, saliva or breath specimen.

40 S 31. Subdivision 7 of section 461-c of the social services law, as
41 added by chapter 601 of the laws of 1981, is amended to read as follows:

42 7. (a) At the time of the admission to an adult care facility, other
43 than a shelter for adults, a resident shall submit to the facility a
44 written report from a physician OR A PHYSICIAN ASSISTANT UNDER THE
45 SUPERVISION OF A LICENSED PHYSICIAN, which report shall state:

46 (i) that the physician OR PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF
47 A LICENSED PHYSICIAN has physically examined the resident within one
48 month and the date of such examination;

49 (ii) that the resident is not in need of acute or long term medical or
50 nursing care which would require placement in a hospital or residential
51 health care facility; and

52 (iii) that the resident is not otherwise medically or mentally
53 unsuited for care in the facility.

54 (b) For the purpose of creating an accessible and available record and
55 assuring that a resident is properly placed in such a facility, the
56 physician's OR PHYSICIAN ASSISTANT'S report shall also contain the resi-

1 dent's significant medical history and current conditions, the
2 prescribed medication regimen, and recommendations for diet, the assist-
3 ance needed in the activities of daily living and where appropriate,
4 recommendations for exercise, recreation and frequency of medical exam-
5 inations.

6 (c) Such resident shall thereafter be examined by a physician OR A
7 PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF A LICENSED PHYSICIAN at
8 least annually and shall submit an annual written report from his OR HER
9 physician OR PHYSICIAN ASSISTANT in conformity with the provisions of
10 this subdivision.

11 S 32. Paragraphs (a), (b) and (c) of subdivision 1 of section 13-b of
12 the workers' compensation law, as amended by chapter 473 of the laws of
13 2000, are amended to read as follows:

14 (a) Any physician licensed to practice medicine in the state of New
15 York OR A PHYSICIAN ASSISTANT UNDER THE DIRECT SUPERVISION OF SUCH A
16 LICENSED PHYSICIAN may render emergency medical care under this chapter
17 without authorization by the chair under this section; and

18 (b) A licensed physician who is a member of a constituted medical
19 staff of any hospital OR A PHYSICIAN ASSISTANT UNDER THE DIRECT SUPER-
20 VISION OF SUCH A LICENSED PHYSICIAN, may render medical care under this
21 chapter while an injured employee remains a patient in such hospital;
22 and

23 (c) CONSISTENT WITH ARTICLE THIRTY-SEVEN OF THE PUBLIC HEALTH LAW AND
24 ARTICLE ONE HUNDRED THIRTY-ONE-B OF THE EDUCATION LAW, MEDICAL CARE MAY
25 BE RENDERED BY A PHYSICIAN ASSISTANT UNDER THE DIRECT SUPERVISION OF A
26 LICENSED AUTHORIZED PHYSICIAN. Under the active and personal supervision
27 of an authorized physician medical care may be rendered by a registered
28 nurse or other person trained in laboratory or diagnostic techniques
29 within the scope of such person's specialized training and qualifica-
30 tions. This supervision shall be evidenced by signed records of
31 instructions for treatment and signed records of the patient's condition
32 and progress. Reports of such treatment and supervision shall be made by
33 such physician to the chair on such forms and at such times as the chair
34 may require.

35 S 33. Paragraph (d) of subdivision 3 of section 13-c of the workers'
36 compensation law, as added by chapter 828 of the laws of 1975, subpara-
37 graph (ii) as amended and subparagraph (iii) as added by chapter 803 of
38 the laws of 1983, and subparagraph (iv) as added and subparagraph (v) as
39 renumbered by chapter 649 of the laws of 1985, is amended to read as
40 follows:

41 (d) (i) A physician rendering medical care at a medical center author-
42 ized, OR A PHYSICIAN ASSISTANT UNDER THE DIRECT SUPERVISION OF SUCH A
43 PHYSICIAN, hereunder must be authorized to render such care pursuant to
44 this chapter and he OR SHE shall limit his OR HER professional activ-
45 ities hereunder to such medical care as his OR HER experience and train-
46 ing qualify him OR HER to render.

47 (ii) When para-medical, laboratory or X-ray services or other medical
48 care is required it shall be rendered, under the active and personal
49 supervision of an authorized physician, by a registered nurse or other
50 person trained in laboratory or diagnostic techniques within the scope
51 of such person's specialized training and qualifications. This super-
52 vision shall be evidenced by signed records of instructions for treat-
53 ment and signed records of the patient's condition and progress. Reports
54 of such treatment and supervision shall be made by such physician to the
55 chairman on such forms and at such times as the chairman may require.

1 (iii) When physical therapy care is required it shall be rendered by a
2 duly licensed physical therapist upon the referral which may be direc-
3 tive as to treatment of an authorized physician, PHYSICIAN ASSISTANT
4 UNDER THE DIRECT SUPERVISION OF SUCH PHYSICIAN or podiatrist within the
5 scope of such physical therapist's specialized training and qualifica-
6 tions as defined in article one hundred thirty-six of the education law.
7 Reports of such treatment and records of instruction for treatment, if
8 any, shall be maintained by the physical therapist and referring profes-
9 sional and submitted to the chairman on such forms and at such times as
10 the chairman may require.

11 (iv) When occupational therapy care is required it shall be rendered
12 by a duly licensed and registered occupational therapist upon the
13 prescription or referral of an authorized physician OR PHYSICIAN ASSIST-
14 ANT UNDER THE DIRECT SUPERVISION OF SUCH PHYSICIAN within the scope of
15 such occupational therapist's specialized training and qualifications as
16 defined in article one hundred fifty-six of the education law. Reports
17 of such treatment and records of instruction for treatment, if any,
18 shall be maintained by the occupational therapist and referring profes-
19 sional and submitted to the chairman on such forms and at such times as
20 the chairman may require.

21 (v) The physician rendering the medical care hereunder shall be in
22 charge of the care unless, in his OR HER judgment, it is necessary to
23 refer the case to a specially trained and qualified physician, which
24 physician shall then assume complete responsibility for and supervision
25 of any further medical care rendered.

26 S 34. Subdivisions (d), (e) and (f) of section 33.04 of the mental
27 hygiene law, subdivisions (d) and (f) as added by chapter 779 of the
28 laws of 1977, such section as renumbered and subdivision (e) as amended
29 by chapter 334 of the laws of 1980, are amended to read as follows:

30 (d) Restraint shall be effected only by written order of a physician
31 OR A PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF SUCH PHYSICIAN after a
32 personal examination of the patient except in an emergency situation, as
33 provided by subdivision (e) of this section. The order shall set forth
34 the facts justifying the restraint and shall specify the nature of the
35 restraint and any conditions for maintaining the restraint. The order
36 shall also set forth the time of expiration of the authorization, with
37 such order to apply for a period of no more than four hours, provided,
38 however, that any such order imposing restraint after nine o'clock p.m.
39 may extend until nine o'clock a.m. of the next day. A full record of
40 restraint, including all signed orders of physicians, shall be kept in
41 the patient's file and shall be subject to inspection by authorized
42 persons.

43 (e) If an emergency situation exists in which the patient is engaging
44 in activity that presents an immediate danger to himself, HERSELF or
45 others and a physician OR A PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF
46 SUCH PHYSICIAN is not immediately available, restraint may be effected
47 only to the extent necessary to prevent the patient from injuring
48 himself or others at the direction of the senior member of the staff who
49 is present. The senior staff member shall cause a physician OR A PHYSI-
50 CIAN ASSISTANT UNDER THE SUPERVISION OF SUCH PHYSICIAN to be immediately
51 summoned and shall record the time of the call and the person contacted.
52 Pending the arrival of a physician OR A PHYSICIAN ASSISTANT UNDER THE
53 SUPERVISION OF SUCH PHYSICIAN, the patient shall be kept under constant
54 supervision. If a physician OR A PHYSICIAN ASSISTANT UNDER THE SUPER-
55 VISION OF SUCH PHYSICIAN does not arrive within thirty minutes of being
56 summoned, the senior staff member shall record any such delay in the

1 patient's clinical record and also place into the patient's clinical
2 record a written description of the facts justifying the emergency
3 restraint which shall specify the nature of the restraint and any condi-
4 tions for maintaining the restraint until the arrival of a physician OR
5 A PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF SUCH PHYSICIAN, the
6 reasons why less restrictive forms of restraint were not used, and a
7 description of the steps taken to assure that the patient's needs,
8 comfort and safety were properly cared for. Such physician OR A PHYSI-
9 CIAN ASSISTANT UNDER THE SUPERVISION OF SUCH PHYSICIAN shall place in
10 the clinical record an explanation for any such delay.

11 (f) During the time that a patient is in restraint, he OR SHE shall be
12 monitored to see that his OR HER physical needs, comfort, and safety are
13 properly cared for. An assessment of the patient's condition shall be
14 made at least once every thirty minutes or at more frequent intervals as
15 directed by a physician OR A PHYSICIAN ASSISTANT UNDER THE SUPERVISION
16 OF SUCH PHYSICIAN. The assessment shall be recorded and placed in the
17 patient's file. A patient in restraint shall be released from restraint
18 at least every two hours, except when asleep. If at any time a patient
19 upon being released from restraint makes no overt gestures that would
20 threaten serious harm or injury to himself, HERSELF or others, restraint
21 shall not be reimposed and a physician shall be immediately notified.
22 Restraint shall not be reimposed in such situation unless in the physi-
23 cian's OR A PHYSICIAN ASSISTANT'S UNDER THE SUPERVISION OF SUCH PHYSI-
24 CIAN professional judgment release would be harmful to the patient or
25 others.

26 S 35. Paragraph e of subdivision 1 of section 406 of the general busi-
27 ness law, as amended by chapter 600 of the laws of 2002, is amended to
28 read as follows:

29 e. Each application shall be accompanied by a certificate of a duly
30 licensed physician, A PHYSICIAN ASSISTANT UNDER THE SUPERVISION OF SUCH
31 A PHYSICIAN or nurse practitioner to the extent authorized by law and
32 consistent with the written practice agreement pursuant to subdivision
33 three of section six thousand nine hundred two of the education law on a
34 form prescribed by the secretary, showing freedom from any infectious or
35 communicable disease which certificate shall have been issued within
36 thirty days prior to the date of the filing of the application.

37 S 36. This act shall take effect immediately.