

481—780.5(148C) Physician supervision required.

780.5(1) A physician associate is required to be supervised by a physician when the physician associate is practicing in an independent practice arrangement as defined in Iowa Code section 148C.1(5) and the physician associate has not previously practiced under a supervising physician or in collaboration with the appropriate physician or other health care professional for a period of at least two years.

780.5(2) Requirements for a physician associate and supervising physician.

a. A physician associate will use the jointly approved board forms to notify the board of the identity of the physician associate's supervising physician prior to beginning practice in Iowa. The physician associate will notify the board of the identity of each of the physician associate's supervising physicians and of any change in the status of the supervisory relationships during the physician associate's required supervisory biennium.

b. A physician associate and a supervising physician will utilize the board form to show a mutual understanding of the physician associate's scope of practice, identified medical procedures and the areas of medicine performed.

c. A physician associate will maintain documentation of current supervising physicians, which will be made available to the board upon request.

d. It shall be the joint responsibility of a physician associate and a supervising physician to ensure the physician associate is adequately supervised. Upon agreeing to supervise the physician associate, the supervising physician will be advised that the physician's name will be listed with the board as a supervising physician. The physician associate and the supervising physician are each responsible for knowing and complying with the supervision provisions of these rules.

e. Patient care provided by a physician associate will be reviewed with a supervising physician determined at the practice level, ensuring each patient has received the appropriate medical care.

f. Patient care provided by a physician associate may be reviewed with a supervising physician in person, by telephone or by other means of telecommunication and determined at the practice level.

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