



PHYSICIAN ASSISTANT INSTITUTION, DEPARTMENT OR PRACTICE SETTING
(“SCHEDULE A” TO CONTRACT OF SUPERVISION)

Practice Description

BACKGROUND INFORMATION:

Physician Assistant and Supervisor Information	
Physician Assistant Name:	Primary Supervisor Name:
Physician Assistant’s anticipated Field of Practice:	Primary Supervisor’s Field of Practice:

PRACTICE INFORMATION:

Practice Setting Information	
Name of practice Setting(s) and type of practice setting:	
Provide Addresses for each Practice Setting where the Physician Assistant will practise:	
Categories of Care delivered in the Practice Setting:	
Region or municipality from where the patient population primarily derives?	Will the Physician Assistant be expected to provide episodic care, conduct home visits or see walk-in Patients? If yes, provide details:

Are there other health care professionals present in the Practice Setting?	Will the Physician Assistant be expected to practise virtual medicine/provide care by virtual means?
What is a reasonable approximation for the typical number of patients seen in the Practice Setting on a daily basis?	Provide any other relevant information about the Practice Setting:

ANTICIPATED SCOPE OF PRACTICE (SOP):

Scope of Practice Information (*the SoP of the Physician Assistant cannot exceed that of the Physician Supervisor)	
Provide a general description of the Physician Assistant's anticipated professional practice and a copy of the Physician Assistant Job Description (See Appendix A at the end of this document, for sample description):	
Level of Competence	
Review the Levels of Competence outline in Appendix B at the end of this document). <i>Note:</i> Level V is generally not authorized in non-institutional practice settings. This may be requested, though would only be approved in exceptional circumstances. Please indicate the expected level of competence the Physician Assistant will be expected to practice at based on what has been identified within this Practice Description. A change to the Level of Competence in future would require an updated Practice Description to be submitted to the Registrar for approval.	
Level of Competence expected for this Practice Description:	<input type="checkbox"/> Level I <input type="checkbox"/> Level II <input type="checkbox"/> Level III <input type="checkbox"/> Level IV <input type="checkbox"/> Level V

Physician Assistant Expected Responsibilities		
List of Responsibilities	Yes	No
Conducting patient interviews?		
Taking medical histories?		
Performing physician examinations?		
Ordering diagnostic/laboratory tests?		

Interpreting test results?		
Diagnosing and treating illness?		
Developing management plans?		
Performing procedures?		
Counselling on preventative health care?		
Arranging consultations and referrals?		
Prescribing and/or managing prescriptions?		

Provide a list of specific procedures the Physician Assistant will be expected to perform (leave blank if no procedures are anticipated):

Additional duties of the Physician Assistant		
Scope of practice expectations	Yes	No
Will the Physician Assistant be expected to work collaboratively with other healthcare providers in their professional practice?		
Will the Physician Assistant be permitted to prescribe and/or order medications in their professional practice?		
Will the Physician Assistant be permitted to prescribe and/or order Saskatchewan schedule of medications to inpatients in their professional practice?		

If participating in prescribing or managing prescriptions, provide general details including anticipated limitations:

Provide a detailed description of any other aspect of the Physician Assistant's anticipated scope of professional practice and the type of work they will be doing that was not already included above:

Complete list of proposed Alternate supervisors and their field of practice:

EDUCATION AND TRAINING:

Provide any expectations for self-education through readings:

Provide any expectations for additional training appropriate to the practice setting:

Provide any expectations regarding continuing professional development for the Physician Assistant:

Note: Maintaining Continuing Professional Development is a requirement of Bylaw 2.13.1 and of ongoing licensure.

CONFIRMATION OF PRACTICE DESCRIPTION AND SUPERVISION CONTRACT

Name and signature of Physician Assistant:

_____ Email Address: _____

(First Name and Last Name)

Signature: _____ Date Signed: _____

Name and signature of Primary Supervisor:

_____ Email Address: _____

(First Name and Last Name)

Signature: _____ Date Signed: _____

Not required but where desired and/or applicable:

Name and signature of the Institution, Department or Practice Manager:

_____ Email Address: _____

(First Name and Last Name)

Signature: _____ Date Signed: _____

Please ensure you have completed all relevant fields. Failure to do so may result in a delay in processing your request. The completed form can be e-mailed to cpsreg@cps.sk.ca

APPENDIX A

Sample wording for Anticipated Scope of Practice Question:

“Physician Assistant will practise under supervision in the dermatologic area of cosmetic medicine, including addressing indications and providing treatment related to skin laxity, wrinkles, liver spots, scars, unwanted hair, skin discoloration, acne, moles, etc. This will include injections of fillers and Botox.”

“Physician Assistant will practise under supervision in the field of family medicine, including assisting providing acute and chronic primary care to patients as appropriate in the clinical circumstance. In addition to diagnosing and treating illness, Physician Assistant may also participate in routine examinations, immunization and screening tests, counseling on maintaining healthy lifestyle. Physician Assistant may also participate in the management of chronic illness and coordinating of care with other health care professionals as is typical in family practice.”

APPENDIX B

Level I:

At Level I, Physician Assistant will assist and perform their duties only while the responsible supervising physician is present and directly supervising Physician Assistant.

History and Examination: The history and physical examination should contain all the relevant components identified in this Practice Description. Documentation should be legible and orderly. This must be reviewed with and approved by the responsible supervising physician for each patient at the time of the visit.

Investigations: Physician Assistant must develop a plan of investigation related to the differential diagnosis. This will be reviewed with and approved by the responsible supervising Physician before implementation.

Management: Physician Assistant must develop a plan of management related to the differential diagnosis. This will be reviewed with and approved by the responsible supervising physician before implementation. All pharmaceutical prescriptions or orders must be reviewed with and approved by the responsible supervising physician before implementation.

Clinical Procedures: Physician Assistant will assist the responsible supervising physician with procedures.

Level II:

Physician Assistant will perform their duties while under the active, on-site supervision of the responsible supervising physician.

History and Examination: Same as Level I, except the responsible supervising physician need not review the history and examination at the relevant visit but must review them on the same day as the relevant visit.

Investigation: Same as Level I, except Physician Assistant may proceed to implement the investigative plan prior to obtaining prior approval from the responsible supervising physician. The responsible supervising physician must review and endorse the plan on the same day as the relevant visit.

Management: Same as for Level I, except Physician Assistant may implement the management plan and proceed with pharmaceutical prescriptions, as permitted under this Practice Description, and orders without obtaining prior approval from the responsible supervising physician. The responsible supervising physician must review and endorse the plan and pharmaceutical prescriptions and orders on the same day as the relevant visit.

Clinical Procedures: Same as Level I.

Level III:

Physician Assistant will be able to perform their duties in an efficient, safe, and competent manner with a greater degree of decreased supervision. There will be less need for direct and/or on-site supervision.

History and Examination: Same as Level II.

Investigation: Same as Level II.

Management: Same as Level II.

Clinical Procedures: Physician Assistant may perform procedure(s) under the direct in-person supervision of the responsible supervising physician.

Level IV:

The Physician Assistant will be able to perform their duties with minimal supervision. Supervision need be no greater than what is required under the Contract of Supervision.

History and Examination: Same as Level II, except review of the history and examination by the responsible supervising physician must take place within 24 hours.

Investigation: Same as Level II, except review of the investigations and investigation plan by the responsible supervising physician must take place within 24 hours.

Management: Same as Level II, except review of the management plan by the responsible supervising physician must take place within 24 hours.

Clinical Procedures: Physician Assistant may perform procedure(s) without the responsible supervising physician being physically present.

Level V:

[OPTIONAL – to be completed if Level IV is not the highest level achievable]

As with Level IV, Physician Assistant will be able to perform their duties with minimal supervision. Supervision need be no greater than what is required under the Contract of Supervision.