

<p>_____ Family Health Team</p> <p>Responsible Person: _____, <i>CCPA</i></p> <p>Date of Origin: <i>November 11, 2014</i></p>	<p>Medical Directive Name and Number</p> <p><i>Care of Patients with Acute or Episodic Presentations #1.1</i></p>
<p>Approval Date: <i>November 21, 2014</i></p>	<p>Review/Revision Date: <i>November 2015</i></p>
<p>Approved By:</p>	<p>Review/Revision By:</p>

Description of the Order:

The Physician Assistant (PA) may carryout the history, physical exam, assessment, and therapeutic inventions of a patient presenting with an acute or episodic complaint. Such complaints consist of but are not limited to:

- *headache*
- *fever*
- *rash*
- *fatigue, weakness*
- *cough, cold, sinus pain/pressure, sore throat, ear problems*
- *shortness of breath, chest pain, palpitations*
- *abdominal pain/pressure/cramping, vomiting, change in bowel movement/habits, reflux*
- *genital/urinary symptoms*
- *musculoskeletal trauma/pain*

For the purposes of exam the PA may put an instrument, hand or finger:

- *beyond the point of the nasal passages where they normally narrow*
- *beyond the opening of urethra*
- *beyond the anal verge*
- *beyond the labia majora*

- into the oral-pharynx
- into an artificial opening in the body.

An "instrument" shall refer to an otoscope, tongue depressor, swab for C&S, nasal speculum, vaginal speculum, rectal thermometer or protoscope.

The PA must adhere to current practice guidelines and/or the highest standards based on the protocols and best practice adopted by the supervising physician. Medical services provided by the PA must be consistent with the PA's education, training and experience. Any task, procedure or clinical problem that PA determines to be outside her/his level of competence shall be discussed with the supervising physician OR such cases shall be referred to the supervising physician or the patient's family physician or an appropriate consulting specialist with the approval of the supervising physician.

Recipient patients/Specific patient conditions or circumstances that must be met to implement the directive:

- Patients of the _____ Family Health Team
- The supervising physician and/OR the patient's family physician has established a relationship with the patient prior to the encounter with the PA.

Contraindications to implementation of the order:

- Any task, procedure or clinical problem that the PA determines to be outside her/his level of competence.
- All life threatening, persistent or unusual presentations.
- Any irate, hostile, threatening or drug-seeking patients.
- In any case which may potentially have medical-legal ramifications that would be best handled by the supervising physician or that patient's family physician.
- At encounter in which the patient requests the supervising physician.

Authorized Implementers:

_____, CCPA

Role/Qualifications:

Physician Assistant/CCPA

Education Requirements:

- PA has graduated from a CMA accredited PA Education Program or an ARC-PA accredited program from the United States.
- PA is certified or working towards certification (CCPA) through the Physician Assistant Certification Counsel in Canada or has achieved the certified designation PA-C in the United States.

Competency Maintenance:

- The PA shall maintain her/his certification as CCPA and/or PA-C through the completion and registration of the required number of CPD credits annually.

Guidelines for implementation of the directive and special considerations:

The PA must obtain informed consent from all patients or decision makers prior to implementing the directive. Consent will be obtained in accordance with any policies of the _____ Family Health Team and the CPSO policy on obtaining consent. In the event that the patient or their decision maker is unable to provide consent or obtaining consent is deemed to be outside the PA's level of competence the supervising physician shall be consulted.

Documentation and Communication:

The PA will document the full history, physical exam findings, assessment, diagnostics and therapeutics ordered in a patient encounter in that patient's chart within the EMR. The PA will document any discussions regarding care with either the supervising physician and/or the patient's family physician within the EMR. Any direct verbal orders not encompassed by this directive will be recorded within the EMR and document the physician for which they implemented.

References or Relevant Guidelines:

- Bates Guide to Physical Exam
- Essentials of Clinical Examination Handbook
- The Common Symptom Guide Sixth Ed.
- CMA Infobase: Clinical Practice Guidelines (<http://www.cma.ca/cpgs/>)
- Anti-infective Guidelines for Community-acquired Infections
- Respiratory Guidelines for Family Practice
- SOGC Clinical Practice Guidelines

