

RCW 18.71A.030 Limitations on practice—Scope of practice.
(Effective until January 1, 2025.) (1) A physician assistant may practice medicine in this state to the extent permitted by the practice agreement. A physician assistant shall be subject to discipline under chapter 18.130 RCW.

(2) Physician assistants may provide services that they are competent to perform based on their education, training, and experience and that are consistent with their practice agreement. The supervising physician and the physician assistant shall determine which procedures may be performed and the supervision under which the procedure is performed. Physician assistants may practice in any area of medicine or surgery as long as the practice is not beyond the supervising physician's own scope of expertise and clinical practice and the practice agreement.

(3) A physician assistant delivering general anesthesia or intrathecal anesthesia pursuant to a practice agreement with a physician shall show evidence of adequate education and training in the delivery of the type of anesthesia being delivered on his or her practice agreement. [2020 c 80 s 5; 2016 c 155 s 23; 2013 c 203 s 6; 1994 sp.s. c 9 s 320; 1993 c 28 s 6; 1990 c 196 s 3; 1971 ex.s. c 30 s 3.]

Effective date—2020 c 80 ss 1-10 and 60: See note following RCW 18.71A.010.

Intent—2020 c 80: See note following RCW 18.71A.010.

Rules—2013 c 203: "The medical quality assurance commission [medical commission] and board of osteopathic medicine and surgery, working in collaboration with a statewide organization representing the interests of physician assistants, shall adopt new rules modernizing the current rules regulating physician assistants and report to the legislature by December 31, 2014." [2013 c 203 s 8.]

Severability—Headings and captions not law—Effective date—1994 sp.s. c 9: See RCW 18.79.900 through 18.79.902.

RCW 18.71A.030 Limitations on practice—Scope of practice.
(Effective January 1, 2025.) (1) A physician assistant may practice medicine in this state to the extent permitted by the collaboration agreement. A physician assistant shall be subject to discipline under chapter 18.130 RCW.

(2) (a) A physician assistant who has completed fewer than 4,000 hours of postgraduate clinical practice must work under the supervision of a participating physician, as described in the collaboration agreement and determined at the practice site. A physician assistant with 4,000 or more hours of postgraduate clinical practice may work in collaboration with a participating physician, if the physician assistant has completed 2,000 or more supervised hours in the physician assistant's chosen specialty.

(b) If a physician assistant chooses to change specialties after the completion of 4,000 hours of postgraduate clinical practice, the first 2,000 hours of postgraduate clinical practice in the new specialty must be completed under the supervision of a participating

physician, as described in the collaboration agreement and determined at the practice site.

(c) Supervision shall not be construed to necessarily require the personal presence of the participating physician or physicians at the place where services are rendered.

(3) (a) Physician assistants may provide services that they are competent to perform based on their education, training, and experience and that are consistent with their collaboration agreement. The participating physician or physicians, or the physician assistant's employer, and the physician assistant shall determine which procedures may be performed and the degree of autonomy under which the procedure is performed.

(b) Physician assistants may practice in any area of medicine or surgery as long as the practice is not beyond the scope of expertise and clinical practice of the participating physician or physicians or the group of physicians within the department or specialty areas in which the physician assistant practices.

(c) A physician assistant who has at least 10 years or 20,000 hours of postgraduate clinical experience in a specialty may continue to provide those specialty services if the physician assistant is employed in a practice setting where those services are outside the specialty of the physician assistant's participating physician or physicians, as outlined in the collaboration agreement, if the practice is located in a rural area as identified by the department under RCW 70.180.011 or in an underserved area as designated by the health resources and services administration as a medically underserved area or having a medically underserved population. The physician assistant must complete continuing education related to that specialty while performing services outside the specialty of the physician assistant's participating physician or physicians.

(4) A physician assistant working with an anesthesiologist who is acting as a participating physician as defined in RCW 18.71A.010 to deliver general anesthesia or intrathecal anesthesia pursuant to a collaboration agreement shall show evidence of adequate education and training in the delivery of the type of anesthesia being delivered on the physician assistant's collaboration agreement as stipulated by the commission. [2024 c 62 s 5; 2020 c 80 s 5; 2016 c 155 s 23; 2013 c 203 s 6; 1994 sp.s. c 9 s 320; 1993 c 28 s 6; 1990 c 196 s 3; 1971 ex.s. c 30 s 3.]

Effective date—2024 c 62 ss 1-8, 10-18, 20-26, 28, and 30-32:
See note following RCW 18.71A.010.

Intent—2024 c 62: See note following RCW 18.71A.020.

Effective date—2020 c 80 ss 1-10 and 60: See note following RCW 18.71A.010.

Intent—2020 c 80: See note following RCW 18.71A.010.

Rules—2013 c 203: "The medical quality assurance commission [medical commission] and board of osteopathic medicine and surgery, working in collaboration with a statewide organization representing the interests of physician assistants, shall adopt new rules modernizing the current rules regulating physician assistants and report to the legislature by December 31, 2014." [2013 c 203 s 8.]

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sp.s. c 9: See RCW 18.79.900 through 18.79.902.