Thank you for your inquiry concerning what tasks are delegable legally to medical assistants according to Virginia law.

Section 54.1-2901(6) of the Virginia statutes reads, in part, as follows:

A. The provisions of this chapter shall not prevent or prohibit:
   ……
   6. Any practitioner licensed or certified by the Board from delegating to personnel supervised by him, such activities or functions as are nondiscretionary and do not require the exercise of professional judgment for their performance and which are usually or customarily delegated to such persons by practitioners of the healing arts, if such activities or functions are authorized by and performed for such practitioners of the healing arts and responsibility for such activities or functions is assumed by such practitioners of the healing arts;

Also, please note the following excerpt from the Virginia law:

§54.1-3408. Professional use by practitioners.

U. Pursuant to a specific order for a patient and under his direct and immediate supervision, a prescriber may authorize the administration of controlled substances by personnel who have been properly trained to assist a doctor of medicine or osteopathic medicine, provided the method does not include intravenous, intrathecal, or epidural administration and the prescriber remains responsible for such administration.

It is my legal opinion that this language authorizes physicians to delegate a reasonable scope of clinical and administrative tasks (including performing venipuncture; administering intramuscular, intradermal, and subcutaneous injections—including immunizations/vaccinations; measuring vital signs) to knowledgeable and competent unlicensed professionals such as medical assistants working under their direct/onsite supervision in outpatient settings.

To my knowledge, there is nothing in Virginia law which forbids the delegating physician to delegate tasks to medical assistants through licensed professionals such as physician assistants, nurse practitioners, or registered nurses).

I define triage as a communication process with a patient (or patient representative) during which a health care professional is required to exercise independent clinical judgment and/or to make clinical assessments or evaluations. It is my legal opinion that it is not permissible for medical assistants to be delegated triage (as I define the term). I define non-triage communication as a process during which a non-provider health care professional follows provider-approved protocols or decision trees in verbatim receiving and verbatim conveying of information. In non-triage
communication, the health professional does not exercise independent clinical judgment. It is my legal opinion that it is permissible for knowledgeable and competent unlicensed professionals such as medical assistants to be delegated non-triage communication.

Tasks that constitute the practice of medicine, or which state law permits only certain health care professionals to perform, however, may not be delegated to unlicensed professionals such as medical assistants.

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