Section 1285.335 Physician Delegation of Authority

a) Physicians licensed to practice medicine in all its branches may delegate care and treatment responsibilities to a physician assistant under guidelines in accordance with the requirements of the Physician Assistant Practice Act of 1987 [225 ILCS 95]. A physician licensed to practice medicine in all its branches may enter into supervising physician agreements with no more than 2 physician assistants.

b) A physician licensed to practice medicine in all its branches in active clinical practice may collaborate with an advanced practice nurse in accordance with the requirements of Title 15 of the Nursing and Advanced Practice Nursing Act [225 ILCS 65]. Collaboration is for the purpose of providing medical direction, and no employment relationship is required. A written collaborative agreement shall conform to the requirements of Sections 15-15 and 15-20 of the Nursing and Advanced Practice Nursing Act. The written collaborative agreement shall be for services the collaborating physician generally provides to his or her patients in the normal course of clinical medical practice. Physician medical direction shall be adequate with respect to collaboration with certified nurse practitioners, certified nurse midwives, and clinical nurse specialists if a collaborating physician:

1) participates in the joint formulation and joint approval of orders or guidelines with the advanced practice nurse and periodically reviews such orders and the services provided patients under such orders in accordance with accepted standards of medical practice and advanced practice nursing practice;

2) is on site at least once a month to provide medical direction and consultation; and

3) is available through telecommunications for consultation on medical problems, complications, or emergencies or patient referral.
An anesthesiologist or physician licensed to practice medicine in all its branches may collaborate with a certified registered nurse anesthetist in accordance with Section 15-25 of the Nursing and Advanced Practice Nursing Act. Medical direction for a certified registered nurse anesthetist shall be adequate if:

1) an anesthesiologist or a physician participates in the joint formulation and joint approval of orders or guidelines and periodically reviews such orders and the services provided patients under such orders; and

2) for anesthesia services, the anesthesiologist or physician participates through discussion of and agreement with the anesthesia plan and is physically present and available on the premises during the delivery of anesthesia services for diagnosis, consultation, and treatment of emergency medical conditions. Anesthesia services in a hospital shall be conducted in accordance with Section 10.7 of the Hospital Licensing Act [210 ILCS 85] and in an ambulatory surgical treatment center in accordance with Section 6.5 of the Ambulatory Surgical Treatment Center Act [210 ILCS 5].

d) The anesthesiologist or operating physician must agree with the anesthesia plan prior to the delivery of services.

e) The supervising physician shall have access to the medical records of all patients attended by a physician assistant. The collaborating physician shall have access to the medical records of all patients attended to by an advanced practice nurse.

f) Nothing in this Section shall be construed to limit the delegation of tasks or duties by a physician licensed to practice medicine in all its branches to a licensed practical nurse, a registered professional nurse, or other personnel including, but not limited to, certified nurse assistants or medical assistants. (Section 54.5 of the Act)

(Source: Amended at 29 Ill. Reg. 18823, effective November 4, 2005)