

1 AMENDMENT TO HOUSE BILL 3047

2 AMENDMENT NO. _____. Amend House Bill 3047 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Medical Practice Act of 1987 is amended
5 by changing Section 54.5 as follows:

6 (225 ILCS 60/54.5)
7 (Section scheduled to be repealed on January 1, 2007)
8 Sec. 54.5. Physician delegation of authority.

9 (a) A physician Physicians licensed to practice medicine
10 in all its branches may delegate care and treatment
11 responsibilities to a physician assistant under guidelines in
12 accordance with the requirements of the Physician Assistant
13 Practice Act of 1987. A physician licensed to practice
14 medicine in all its branches may enter into supervising
15 physician agreements with no more than 2 physician
16 assistants.

17 (b) A physician licensed to practice medicine in all its
18 branches in active clinical practice may collaborate with an
19 advanced practice nurse in accordance with the requirements
20 of Title 15 of the Nursing and Advanced Practice Nursing Act.
21 Collaboration is for the purpose of providing medical
22 direction, and no employment relationship is required. A

1 written collaborative agreement shall conform to the
2 requirements of Sections 15-15 and 15-20 of the Nursing and
3 Advanced Practice Nursing Act. The written collaborative
4 agreement shall be for services the collaborating physician
5 generally provides to his or her patients in the normal
6 course of clinical medical practice. Physician medical
7 direction shall be adequate with respect to collaboration
8 with certified nurse practitioners, certified nurse midwives,
9 and clinical nurse specialists if a collaborating physician:

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

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

18 (3) is available through telecommunications for
19 consultation on medical problems, complications, or
20 emergencies or patient referral.

21 (b-5) An anesthesiologist or physician licensed to
22 practice medicine in all its branches may collaborate with a
23 certified registered nurse anesthetist in accordance with
24 Section 15-25 of the Nursing and Advanced Practice Nursing
25 Act. Medical direction for a certified registered nurse
26 anesthetist shall be adequate if:

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

31 (2) for anesthesia services, the anesthesiologist
32 or physician participates through discussion of and
33 agreement with the anesthesia plan and is physically
34 present and available on the premises during the delivery

1 of anesthesia services for diagnosis, consultation, and
2 treatment of emergency medical conditions. Anesthesia
3 services in a hospital shall be conducted in accordance
4 with Section 10.7 of the Hospital Licensing Act and in an
5 ambulatory surgical treatment center in accordance with
6 Section 6.5 of the Ambulatory Surgical Treatment Center
7 Act.

8 (b-10) The anesthesiologist or operating physician must
9 agree with the anesthesia plan prior to the delivery of
10 services.

11 (c) The supervising physician shall have access to the
12 medical records of all patients attended by a physician
13 assistant. The collaborating physician shall have access to
14 the medical records of all patients attended to by an
15 advanced practice nurse.

16 (d) Nothing in this Act shall be construed to limit the
17 delegation of tasks or duties by a physician licensed to
18 practice medicine in all its branches to a licensed practical
19 nurse, a registered professional nurse, or other personnel.

20 (e) A physician shall not be liable for the acts or
21 omissions of a physician assistant or advanced practice nurse
22 solely on the basis of having signed a supervision agreement
23 or guidelines or a collaborative agreement, an order, a
24 standing medical order, a standing delegation order, or other
25 order or guideline authorizing a physician assistant or
26 advanced practice nurse to perform acts, unless the physician
27 has reason to believe the physician assistant or advanced
28 practice nurse lacked the competency to perform the act or
29 acts or commits willful and wanton misconduct.

30 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)".