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\*\*\* Current through the 2007 Regular Session \*\*\*

TITLE 43. PROFESSIONS AND BUSINESSES  
CHAPTER 34. PHYSICIANS, ACUPUNCTURE, PHYSICIAN'S ASSISTANTS, CANCER AND GLAUCOMA  
TREATMENT, RESPIRATORY CARE, CLINICAL PERFUSIONISTS, AND ORTHOTICS AND PROSTHETICS  
PRACTICE  
ARTICLE 4. PHYSICIAN'S ASSISTANTS

O.C.G.A. § 43-34-101 (2007)

§ 43-34-101. Legislative purpose

(a) To alleviate the growing shortage and geographic maldistribution of health care services in this state, the General Assembly intends, by this article, to establish a new category of health care, namely, assistants to physicians, which category includes new types of health care personnel, as well as those persons licensed in presently established categories of health care.

(b) This article is intended to encourage the more effective utilization of the skills of physicians by enabling them to delegate health care tasks to such assistants where such delegation is consistent with the patient's health and welfare. Toward this end, the General Assembly intends to remove legal constraints which presently constitute unnecessary hindrances to the more effective delivery of health care services.

**HISTORY:** Ga. L. 1972, p. 676, § 2.

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## TITLE 43. PROFESSIONS AND BUSINESSES

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PRACTICE

## ARTICLE 4. PHYSICIAN'S ASSISTANTS

## O.C.G.A. § 43-34-102 (2007)

## § 43-34-102. Definitions

As used in this article, the term:

(1) "Alternate supervising physician" means a physician to whom a primary supervising physician has delegated the responsibility of supervising a physician's assistant who is licensed to that primary supervising physician and who agrees to supervise the physician's assistant for the primary supervising physician and who is on record with the board.

(2) "Board" means the Composite State Board of Medical Examiners as created by Code Section 43-34-21.

(3) "Carry out a prescription drug or device order" means to complete, on a form established and approved by the board, a written prescription drug order or a prescription device order pursuant to the authority delegated by a supervising physician.

(4) "Evaluation agency" means a public or private hospital, school, laboratory, clinic, federal or state institution or agency, or similar facility which has been approved by the board as possessing personnel and equipment and as having had practice in a health care field sufficient to be able to make an objective appraisal, in a manner prescribed by the board, of the proposed physician's assistant's qualifications to perform the tasks described in the job description.

(5) "Job description" means a document, signed by the primary supervising physician and the physician's assistant whom the primary supervising physician is supervising, which describes the professional background and specialty of the primary supervising physician; the qualifications, including related experience of the physician's assistant; and a general description of how the physician's assistant will be utilized in the practice. A job description shall not be required to contain every activity the physician deems the physician's assistant qualified to perform but shall confine the activities of the physician's assistant to those in the scope of practice of the primary supervising physician.

(6) "Physician" means a person lawfully licensed in this state to practice medicine and surgery pursuant to Article 2 of this chapter.

(7) "Physician's assistant" means a skilled person qualified by academic and practical training to provide patients' services not necessarily within the physical presence but under the personal direction or supervision of the applying physician.

(8) "Primary supervising physician" means the physician to whom the board licenses a physician's assistant pursuant to a board approved job description and who has the primary responsibility for supervising the practice of that physician's assistant.

**HISTORY:** Ga. L. 1972, p. 676, § 3; Ga. L. 1995, p. 827, § 1; Ga. L. 2002, p. 1043, § 1; Ga. L. 2004, p. 581, § 1.

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O.C.G.A. § 43-34-103 (2007)

§ 43-34-103. Application for assistant; number of assistants; new job descriptions; scope of duties; receipt of samples; employment by nonpracticing physicians; delegated authority; temporary practice agreements; assistance during public health emergencies.

(a) In order to obtain approval for the utilization of a person as a physician's assistant, whether the utilization is in a private practice or through a public or private health care institution or organization, the licensed physician who will be responsible for the performance of that assistant shall submit an application to the board. Such application shall include:

(1) Evidence submitted by the proposed physician's assistant of his or her good moral character;

(2) Evidence of his or her competency in a health care area related to the job description which, as a minimum, shall include:

(A) Evidence of satisfactory completion of a training program approved by the board. If the applicant is not a graduate of an accredited school approved by the board, he or she shall be required to receive board approved refresher training and testing;

(B) A finding by the board approved evaluation agency that the proposed physician's assistant is qualified to perform the tasks described in the job description;

(C) Any nursing task by a student enrolled in a nursing program approved by the Georgia Board of Nursing where any such task is performed under the supervision of an authorized instructor lawfully licensed in this state to perform such tasks; and

(D) Evidence that the person who is to be used as a physician's assistant has achieved a satisfactory score on an appropriate examination outlined, approved, or administered by the board. The board may issue a temporary permit to any applicant for licensure who has satisfied the provisions of subparagraphs (A) and (B) of this paragraph and who is an applicant for the next available board approved or administered examination or who has completed this examination and is awaiting the results of such examination. The temporary permit shall expire upon notification of the applicant's failure to achieve a satisfactory score on the board approved or administered examination. The board may grant an inactive licensure status to a physician's assistant who is licensed pursuant to this article but who is not practicing with the supervision of a board approved primary supervising physician;

(3) A job description meeting the requirements of paragraph (5) of Code Section 43-34-102; and

(4) A fee, established by the board; provided, however, that no fee will be required if the physician's assistant is an employee of the state or county government.

(b)(1) No primary supervising physician shall have more than four physician's assistants licensed to him or her at a time; provided, however, that no physician may supervise more than two physician's assistants at any one time except as provided in paragraph (2) of this subsection.

(2)(A) A physician may supervise as many as four physician's assistants at any one time while practicing in a group practice in which other physician members of such group practice are primary supervising physicians.

(B) A physician may supervise as many as four physician's assistants at any one time while acting as an alternate supervising physician:

(i) In an institutional setting such as a hospital or clinic;

(ii) On call for a primary supervising physician or a group practice; or

(iii) If otherwise approved by the board to act as an alternate supervising physician.

(3) A primary supervising physician shall designate in writing to the board such other physicians who may serve as an alternate supervising physician for each physician's assistant licensed to such primary supervising physician. The board shall have authority to approve or deny such designations in whole or in part; provided, however, a physician may be listed as an alternate supervising physician for any number of physician's assistants so long as he or she only supervises as many physician's assistants at any one time as allowed by paragraph (2) of this subsection.

(c) Nothing in this article shall prevent a physician from submitting a new job description when a physician's assistant, by reason of further education or experience and successfully passing additional tests as shall be outlined and administered by the board, becomes capable of performing a wider range of medical tasks.

(d) A physician's assistant shall be allowed to perform his duties only in the principal offices of the applying physicians, which shall be those public or private places or health facilities where the applying physician regularly sees patients, provided that nothing in this article shall preclude a physician's assistant from making house calls and hospital rounds, serving as an ambulance attendant, or performing any functions performed by the applying physician which the physician's assistant is qualified to perform.

(e) A physician's assistant may not be utilized to perform the duties of a pharmacist licensed under Chapter 4 of Title 26, relating to pharmacists.

(e.1)(1) In addition to the authority granted by Code Section 43-34-26.1, a physician's assistant shall be allowed to carry out a prescription drug order or orders for any device as defined in Code Section 26-4-5, any dangerous drug as defined in Code Section 16-13-71, or any Schedule III, IV, or V controlled substance as defined in Code Section 16-13-21 on a prescription drug order or prescription device order form as specified in paragraph (3) of this subsection, pursuant to the authority delegated by the supervising physician of that physician's assistant. Delegation of such authority shall be contained in the job description required by this Code section. The delegating physician shall remain responsible for the medical acts of the physician's assistant performing such delegated acts and shall adequately supervise the physician's assistant. If an existing job description for a physician's assistant does not contain such authority to carry out a prescription drug or device order as provided by this subsection, that physician's assistant may not issue any such prescription drug or device order until a new job description delegating such authority is submitted to and approved by the board. Nothing in this Code section shall be construed to authorize the written prescription drug order of a Schedule I or II controlled substance.

(2) Nothing in this subsection shall be construed to create a presumption of liability, either civil or criminal, on the part of a pharmacist who is duly licensed under Title 26 and who in good faith fills a prescription drug or device order presented by a patient pursuant to this subsection. The pharmacist shall presume that the prescription drug or device order was issued by a physician's assistant duly licensed under this chapter who has qualified under this Code section to prescribe pharmaceutical agents. The pharmacist shall also presume that the pharmaceutical agent prescribed by the physician's assistant is an approved pharmaceutical agent, unless the pharmacist has actual or constructive knowledge to the contrary.

(3) The physician's assistant shall only be authorized to exercise the rights granted under this subsection using a prescription drug or device order form which includes the name, address, and telephone number of the prescribing supervising physician, the patient's name and address, the drug or device prescribed, the number of refills, and directions to the patient with regard to the taking and dosage of the drug. Such form shall be signed by the physician's assistant using the following language:

This prescription authorized through: (the prescribing supervising physician) (M.D. or D.O.) by (the physician's assistant) PHYSICIAN'S ASSISTANT.

The name of the prescribing supervising physician shall be handwritten in the appropriate space by the physician's assistant on the prescription drug or device order form. Any form containing less information than that described in this paragraph shall not be offered to or accepted by any pharmacist who is duly licensed under Title 26.

(4) The physician's assistant shall inform the patient that the patient has the right to see the physician prior to any prescription drug or device order being carried out by the physician's assistant.

(5) Unless otherwise restricted by the board or a board approved job description, the physician's assistant shall not carry out a prescription drug or device order for more than a 30 day supply, except in cases of chronic illnesses where a 90 day supply may be ordered. The physician's assistant may authorize refills up to six months from the date of the original prescription drug or device order; provided, however, that refills may be authorized up to 12 months from the date of the original prescription drug or device order for oral contraceptives or other drugs or devices approved by the board.

(6) A supervising physician shall personally reevaluate, at least every three months, any patient receiving controlled substances or, at least every six months, any patient receiving other prescription drugs or devices.

(7) In addition to the copy of the prescription drug or device order delivered to the patient, a record of such prescription shall be maintained in the physician's office in the following manner:

(A) A copy of the prescription drug or device order shall be appended to or otherwise maintained in the patient's medical file; and

(B) The supervising physician shall countersign the prescription drug or device order copy or medical record entry for each prescription drug or device order within a reasonable time, not to exceed seven working days, unless such countersignature is required sooner by a specific regulation, policy, or requirement.

(8) A physician's assistant is not permitted to prescribe drugs or devices except as authorized in the physician's assistant's job description and in accordance with this chapter.

(9) The board shall adopt rules establishing:

(A) The content and use of prescription drug or device order forms;

(B) Procedures to evaluate an application for a job description containing the authority to carry out a prescription drug or device order;

(C) A formulary of prescription drugs or devices which may or may not be included in a job description;

(D) The maintenance and custody of records for prescription drug or device orders;

(E) A minimum of three continuing medical education hours biennially in practice specific pharmaceuticals in which the physician's assistant has prescriptive order privileges; and

(F) Any other rules the board may deem necessary or appropriate to carry out the intent and purpose of this Code section or to protect the public welfare.

(10) Nothing in this Code section is intended to repeal any rules established by the board relating to the requirements and duties of physician's assistants in remote practice sites.

(e.2) A physician's assistant shall be allowed to request, receive, and sign for professional samples and may distribute professional samples to patients, pursuant to authority delegated by the supervising physician of that physician's assistant. Delegation of such authority shall be contained in the job description required by this Code section; provided, however, the office or facility at which the physician's assistant is working must maintain a list of professional samples approved by the supervising physician for request, receipt, and distribution by the physician's assistant as well as a complete list of the specific number and dosage of each professional sample received and dispensed. In addition to the requirements of this Code section, all professional samples shall be maintained as required by applicable state and federal law and regulations. As used in this subsection, the term "professional samples" means complimentary doses of a drug, medication vouchers, or medical devices provided by the manufacturer for use in patient care.

(f) A physician employed by the Department of Human Resources or by any institution thereof or by a local health department whose duties are administrative in nature and who does not normally provide health care to patients as such employee shall not be authorized to apply for or utilize the services of any physician's assistant employed by the Department of Human Resources or by any institution thereof or by a local health department.

(g) Nothing in this article shall be construed to prohibit a physician's assistant from performing those acts the performance of which have been delegated to that physician's assistant pursuant to and in conformity with Code Section 43-34-26.1.

(h) A physician and a physician's assistant may enter into a temporary practice agreement exempt from any filing fees with the board by which agreement the physician supervises the services provided by the physician's assistant to patients at a specific facility or program operated by any organization exempt from federal taxes pursuant to Section 501(c)(3) of the federal Internal Revenue Code, provided that:

- (1) Such services are provided primarily to financially disadvantaged patients;
- (2) Such services are free or at a charge to the patient based solely on the patient's ability to pay and provided, further, that such charges do not exceed the actual cost to the facility or program;
- (3) The supervising physician and the physician's assistant voluntarily and gratuitously donate their services;
- (4) Prior to providing any patient services, a copy of the temporary practice agreement, signed by both the supervising physician and the physician's assistant, is on file at the facility or program and is sent to the board;
- (5) The temporary practice agreement is for a specified period of time, limits the services of the physician's assistant to those within the usual scope of practice of the supervising physician, and is signed by both the supervising physician and the physician's assistant prior to the physician's assistant providing patient services; and
- (6) The facility or program has notified the board of its intent to provide patient services and utilize licensed physicians and physician's assistants under the conditions set out in this subsection.

(i) (1) Notwithstanding any provision of this article to the contrary, a physician's assistant licensed pursuant to this article or licensed, certified, or otherwise authorized to practice in any other state or federal jurisdiction and whose license, certification, or authorization is in good standing who responds to a need for medical care created by conditions which characterize those of a state of emergency or public health emergency may render such care that the physician's assistant is able to provide with such supervision as is available at the immediate scene or at the local site where such need for medical care exists or at a relief site established as part of a state or local safety plan established pursuant to Chapter 3 of Title 38. Such services shall be provided by a physician's assistant in response to the request of an appropriate state or local official implementing a state or local emergency management plan or program, and in accordance with applicable guidelines established by such officials or plans. The authority granted by this Code section shall last no longer than 48 hours or such time as the board may establish under guidelines for supervision of the physician's assistant rendering medical care.

(2) For the purposes of this subsection, the term "public health emergency" has the same meaning as in paragraph (6) of Code Section 38-3-3, and the term "state of emergency" has the same meaning as in paragraph (7) of Code Section 38-3-3.

**HISTORY:** Ga. L. 1972, p. 676, § 4; Ga. L. 1982, p. 1148, § 2; Ga. L. 1984, p. 22, § 43; Ga. L. 1984, p. 611, § 1; Ga. L. 1989, p. 261, § 4; Ga. L. 1995, p. 827, § 2; Ga. L. 1997, p. 935, § 3; Ga. L. 1999, p. 81, § 43; Ga. L. 2001, p. 788, § 1; Ga. L. 2002, p. 1043, § 2; Ga. L. 2004, p. 581, § 2; Ga. L. 2005, p. 1232, § 1/SB 173; Ga. L. 2006, p. 475, § 1/HB 873; Ga. L. 2006, p. 476, § 1/HB 832.

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O.C.G.A. § 43-34-104 (2007)

§ 43-34-104. Notice of approval or disapproval; issuance of license

(a) Within a reasonable time after receipt of the documents required by Code Section 43-34-103, the board shall give to the applicant written notice of approval or disapproval of the application; and, if approval of the application is given, the board shall issue to the assistant a license authorizing the assistant to perform medical tasks under the direction and supervision of the applying physician.

(b) The board shall not approve an application unless it finds from the information forwarded with the application that the proposed physician's assistant is fully qualified to perform the tasks described in the job description and will be utilized in a manner that will not endanger the health and welfare of patients upon whom he may perform the described medical tasks.

**HISTORY:** Ga. L. 1972, p. 676, § 5; Ga. L. 1997, p. 935, § 4.

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O.C.G.A. § 43-34-105 (2007)

§ 43-34-105. Performance of tasks in accordance with job description

On receipt of notice of the board's approval, a physician's assistant, under the direction of the applying physician, may perform the tasks described in the job description, provided that nothing in this Code section shall make unlawful the performance of a medical task by the physician's assistant, whether or not such task is specified in the general job description, when it is performed under the direct supervision and in the presence of the physician utilizing him.

**HISTORY:** Ga. L. 1972, p. 676, § 6.

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O.C.G.A. § 43-34-107 (2007)

§ 43-34-107. Termination of approval and revocation of license; notice and hearing

(a) The approval of a physician's utilization of a physician's assistant may be terminated and the license revoked by the board when, after due notice and a hearing, in accordance with this Code section, it shall find that the assistant is incompetent or has committed unethical or immoral acts, including, but not limited to, holding himself or herself out or permitting another to represent him or her as a licensed physician; performing otherwise than at the direction of a physician approved by the board to utilize the assistant's services; habitually using intoxicants or drugs to such an extent that he or she is unable safely to perform as an assistant to the physician; or being convicted in any court, state or federal, of any felony or other criminal offense involving moral turpitude.

(b) Before the board shall give written notice to the physician's assistant of termination of approval granted by it to an assistant, it will give to the assistant a timely and reasonable written notice indicating the general nature of the charges, accusation, or complaint preferred against him and stating that the assistant will be given an opportunity to be heard concerning such charges or complaints; and it shall hold a public hearing within a reasonable time. Following such hearing, the board shall determine, on the basis of its regulations, whether the approval of the assistant shall be terminated.

(c) In hearings held pursuant to this Code section, the board shall apply the rules of evidence as prescribed in Chapter 13 of Title 50, the "Georgia Administrative Procedure Act."

**HISTORY:** Ga. L. 1972, p. 676, § 7; Ga. L. 1982, p. 3, § 43; Ga. L. 1997, p. 935, § 5.

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O.C.G.A. § 43-34-108 (2007)

§ 43-34-108. Powers and duties of board

In addition to the powers specifically delegated to it in this article, the board shall have the authority to perform all acts which are necessary, proper, or incidental to the efficient development of the category of health care established by this article. The board shall have the authority to promulgate rules and regulations governing the definitions of delegation by physicians to qualified persons other than physician's assistants of any acts, duties, or functions which are permitted by law or established by custom. Any power vested by law in the board, but not implemented by specific provisions for the exercise thereof, may be executed and carried out by the board in a reasonable manner, pursuant to such rules, regulations, and procedures as the board may adopt and subject to such limitations as may be provided by law.

**HISTORY:** Ga. L. 1972, p. 676, § 8.

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