## UNIVERSITY OF MARYLAND MEDICAL CENTER MIDTOWN CAMPUS

Specified Services for Physician Assistants Page 1 of 2

\*This form should accompany your Board of Physician (BOP) Approved Physician Assistant Delegation Agreement and must coincide with what has been approved by the BOP

Name:		Date:  Certification Date:				
Area of Certification:						
State Approved Delegation Agreement on file	(to be completed	by Medical Sta	aff Services)			
Specified Services	Applicant Check (√) if requested	Department Chief (Initial)				
		Recommended	Not Recommended	Conditions (provide explanation)		
Core Duties:						
Conduct history and physicals	·					
Enter admission, routine and discharge orders						
Record patient progress notes						
Interpret and evaluate patient data						
Order routine laboratory and diagnostic tests						
Administer oxygen						
Routine wound care and dressings						
Apply and modify splints and casts						
Suture simple lacerations						
Prescriptive Authority	No. 10 Personal Control of the Contr					
Controlled Dangerous Substances						
Prescriptive Drugs						
Medical Devices						
Surgical PA Duties						
Evaluation of non emergency complaints		_				
Control of external hemorrhage						
Suture of simple lacerations						
Removal of superficial foreign bodies						
Splinting of nondisplaced fractures						
Apply and modify splints and casts						

Skin closure and wound dressing

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Specified Services for Physician Assistants Page 2 of 2

	Applicant Check (√) if requested	Department Chief (Initial)			
Specified Services		Recommended	Not Recommended	Conditions (provide explanation)	
Surgical PA Duties (for established patients of practice) continued					
Wound care: inspection of drains, dressing, sutures, staples and steri-strips					
Coordinate and assist with minor surgery					
Insert Foley catheter					
Operating Room Procedures- surgical PA's only					
Set up instrument table					
Position, prep and drape patient prior to presence of surgeon					
Perform as scrub tech					
First assist on surgical cases under direction of supervising surgeon					
Close surgical wound and perform postoperative wound care					
Enter postoperative, routine or discharge orders					
Enter operative note in patient record					
Dictate operative report	:				
Apply, remove and modify splints and casts					
Advanced Duties: (from BOP list)					
Joint aspirations					
Joint injections					
Myofascial injections/ trigger point injections					
Acknowledgment of Practitioner:  I have requested only those specific privileges for which, by educ	ation, training,	current experies	nce and demons	strated performance, I am	

I have requested only those specific privileges for which, by education, training, current experience and demonstrated performance, I am qualified to perform and for which I wish to exercise at UMMC Midtown Campus. I understand that in exercising any clinical privileges granted, I am constrained by all UMMC Midtown Campus medical staff policies and rules applicable generally and all applicable to the particular situation.

Applicant's Signature	Date	
Supervising Physician	Date	