Professional Licensing Agency 402 West Washington Street Room W072 Indianapolis, Indiana 46204



Mike Braun Governor of Indiana Lindsay M. Hyer Executive Director

### **Physician Assistant Collaborative Agreement Checklist**

Are the names and license numbers of the Physician Assistant and the Collaborating Physician included in the opening paragraph of the Collaborative Agreement?

Is the Collaborative Agreement specific to the Physician Assistant?

Is the Collaborative Agreement on Letterhead?

Is the Collaborative Agreement Completely Typed?

Does the Physician Assistant have Prescriptive Authority?

YES NO

If you check "NO", please include a completed Prescriptive Authority Application if the P.A. will be prescribing

### Type of Collaborative Agreement (check one)

Can the P.A. Only prescribe Non-Controlled Substances?

Can the P.A. prescribe Controlled Substances?

### These items must be listed on the first page of the agreement:

Name of Physician Assistant and Collaborating Physician

Full business address and telephone number listed under Physician Assistant and Collaborating Physician License Number of the P.A. (unless accompanying an initial application) and Collaborating Physician.

# The following sections must be included in the collaborative agreement. (please see sample agreement on our website for clarification)

Manner of Supervision (ex. % of chart review)

**Emergency Protocol** 

Prescriptive Authority

Prescribing Protocol(specify prescribing Controlled or Non-Controlled)

List of Additional Practice Addresses

P.A. and Physician original signatures and dates

Role of the Physician Assistant/Delegated Tasks (cannot include general or regional anesthesia)

## Collaborative Agreements with Controlled Substance prescribing MUST include the following:

Must clearly state that the Physician Assistant may not prescribe a Schedule I Controlled Substance in the Prescriptive Authority section

Must clearly state that the Physician Assistant will be prescribing Controlled Substances in the Prescriptive Authority section

Must have printed name of Physician Assistant and Collaborating Physician, including printed dates, below the signature line on the last page of the agreement

## Collaborative Agreements for prescribing Non-Controlled Substances MUST include the following

Must clearly state that the Physician Assistant may not prescribe any Controlled Substances in the Prescriptive Authority section

Prescribing Protocol must be included in the agreement

Must have printed name of Physician Assistant and Collaborating Physician, including printed dates, below the signature line on the last page of the agreement

The Collaborative Agreement may include additional sections pertaining to Physician Assistant requirements that are exclusive to company policies, however, the requirements outlined in this checklist must be included in the agreement as well.