



Donald A. Balasa, JD, MBA
Executive Director, Legal Counsel

Frequent questions about medical assistants' scope of practice

As the utilization of medical assistants—especially CMAs (AAMA)—within the American health care delivery system continues to increase and diversify, different types of questions regarding permissible scope of practice are being directed to the American Association of Medical Assistants. Here are examples of this “new wave” of scope of practice questions and the answers.

? *Are medical assistants permitted to accept verbal orders from the delegating physician?*

Medical assistants are permitted to receive and execute orders from the overseeing, delegating, or supervising physician(s) as long as such orders do not require the medical assistant to exercise independent professional judgment in the execution of the orders, or to make clinical assessments or evaluations.

? *Are physicians allowed to delegate patient education to medical assistants?*

Physicians are allowed to delegate patient education to competent and knowledgeable medical assistants as long as the content of such education has been approved by the delegating physician, and the patient education process does not require the

medical assistant to make any interpretive judgments or answer any questions from the patient or patient representative that require a diagnosis, assessment, or evaluation. Medical assistants should not go beyond the patient education information that has been approved by the physician.

? *Are medical assistants permitted to call in prescription refills or new prescriptions?*

In most states medical assistants are permitted to transmit (by telephonic, electronic, or other means) verbatim the physician's orders for new prescriptions or refills. Such transmission must be verbatim, and must not require the medical assistant to make interpretive judgments about the prescription before transmission.

? *Is it legal for medical assistants to sign prescriptions on behalf of the physician?*

It is *not* legal for medical assistants to sign, authorize, or approve prescription orders on behalf of the physician. Medical assistants may draft scripts and forward them to the overseeing physician for the physician's review, approval, and signature. They must not transmit prescriptions until the physician has reviewed, approved, and executed the prescription order.

? *Are medical assistants permitted to triage patients?*

In order to answer this question correctly, it is essential that terms be precisely defined and thoroughly understood. In interacting with patients or their representatives—by telephone or in person—medical assistants are allowed to convey verbatim physician-approved information and directions without exercising independent professional judgment or making clinical assessments or evaluations. This communication process is frequently called *screening*. Communication that *does* require the health professional to exercise independent judgment or to make clinical assessments or evaluations is frequently called *triage*. The general legal principle is that physicians are allowed to delegate screening, but not triage, to competent and knowledgeable medical assistants working under their direct supervision in outpatient settings.

It is likely that medical assisting scope of practice questions will increase in complexity and urgency. Feel free to direct such questions to Executive Director Balasa at dbalasa@aama-ntl.org. ◀