

# SENATE BILL NO. 428

June 17, 2025, Introduced by Senator SANTANA and referred to Committee on Health Policy.

A bill to amend 1978 PA 368, entitled  
"Public health code,"  
by amending sections 7303a, 17001, 17011, 17501, and 17511 (MCL  
333.7303a, 333.17001, 333.17011, 333.17501, and 333.17511), section  
7303a as amended by 2019 PA 43, section 17001 as amended by 2018 PA  
624, sections 17011 and 17511 as amended by 2006 PA 398, and  
section 17501 as amended by 2018 PA 524, and by adding sections  
16325a, 17034, 17034a, 17034b, 17534, 17534a, and 17534b.

**THE PEOPLE OF THE STATE OF MICHIGAN ENACT:**

1           Sec. 7303a. (1) A prescriber who holds a controlled substances  
2 license may administer or dispense a controlled substance listed in  
3 schedules 2 to 5 without a separate controlled substances license  
4 for those activities.

5           (2) Except as otherwise provided in rules promulgated under  
6 section 16204e and for a patient who is under the care of a  
7 hospice, ~~beginning March 31, 2019 or, if rules are promulgated~~  
8 ~~under section 16204e before March 31, 2019, on the date on which~~  
9 ~~rules are promulgated under section 16204e,~~ a licensed prescriber  
10 shall not prescribe a controlled substance listed in schedules 2 to  
11 5 unless the prescriber is in a bona fide prescriber-patient  
12 relationship with the patient for whom the controlled substance is  
13 being prescribed. Except as otherwise provided in this subsection,  
14 if a licensed prescriber prescribes a controlled substance under  
15 this subsection, the prescriber shall provide follow-up care to the  
16 patient to monitor the efficacy of the use of the controlled  
17 substance as a treatment of the patient's medical condition. If the  
18 licensed prescriber is unable to provide follow-up care, ~~he or she~~  
19 **the licensed prescriber** shall refer the patient to the patient's  
20 primary care provider for follow-up care or, if the patient does  
21 not have a primary care provider, ~~he or she~~ **the licensed prescriber**  
22 shall refer the patient to another licensed prescriber who is  
23 geographically accessible to the patient for follow-up care.

24           (3) Before prescribing or dispensing a controlled substance to  
25 a patient, a licensed prescriber shall ask the patient about other  
26 controlled substances the patient may be using. The prescriber  
27 shall record the patient's response in the patient's medical or  
28 clinical record.

29           (4) ~~Beginning June 1, 2018, before~~ **Before** prescribing or

1 dispensing to a patient a controlled substance in a quantity that  
2 exceeds a 3-day supply, a licensed prescriber shall obtain and  
3 review a report concerning that patient from the electronic system  
4 for monitoring schedule 2, 3, 4, and 5 controlled substances  
5 established under section 7333a. This subsection does not apply  
6 under any of the following circumstances:

7 (a) If the dispensing occurs in a hospital or freestanding  
8 surgical outpatient facility licensed under article 17 and the  
9 controlled substance is administered to the patient in that  
10 hospital or facility.

11 (b) If the patient is an animal as that term is defined in  
12 section 18802, the dispensing occurs in a veterinary hospital or  
13 clinic and the controlled substance is administered to the patient  
14 in that hospital or clinic.

15 (c) If the controlled substance is prescribed by a licensed  
16 prescriber who is a veterinarian and the controlled substance will  
17 be dispensed by a pharmacist.

18 (d) If the patient is under the care of a hospice and the  
19 report described in this subsection was obtained and reviewed at  
20 the time the patient was admitted to the hospice.

21 (5) ~~Beginning June 1, 2018, before~~ **Before** prescribing or  
22 dispensing a controlled substance to a patient, a licensed  
23 prescriber shall register with the electronic system for monitoring  
24 schedule 2, 3, 4, and 5 controlled substances established under  
25 section 7333a.

26 (6) A licensed prescriber who dispenses controlled substances  
27 shall maintain all of the following records separately from other  
28 prescription records:

29 (a) All invoices and other acquisition records for each

controlled substance acquired by the prescriber for not less than 5 years after the date the prescriber acquires the controlled substance.

(b) A log of all controlled substances dispensed by the prescriber for not less than 5 years after the date the controlled substance is dispensed.

(c) Records of all other dispositions of controlled substances under the licensee's control for not less than 5 years after the date of the disposition.

(7) The requirement under section 7303 for a license is waived in the following circumstances:

(a) When a controlled substance listed in schedules 2 to 5 is administered on the order of a licensed prescriber by an individual who is licensed under article 15 as a practical nurse, ~~or a~~ registered professional nurse, **or a certified anesthesiologist assistant.**

(b) When methadone or a methadone congener is dispensed on the order of a licensed prescriber in a methadone treatment program licensed under article 6 or when a controlled substance listed in schedules 2 to 5 is dispensed on the order of a licensed prescriber in a hospice rendering emergency care services in a patient's home as described in section 17746 by a registered professional nurse licensed under article 15.

**Sec. 16325a. Fees for an individual licensed or seeking licensure to engage in practice as a certified anesthesiologist assistant under part 170 or part 175 are as follows:**

(a) Application processing fee.....	\$ 75.00
(b) License fee, per year.....	60.00
(c) Educational limited license.....	25.00

1           Sec. 17001. (1) As used in this part:

2           (a) "Academic institution" means either of the following:

3           (i) A medical school approved by the board.

4           (ii) A hospital licensed under article 17 that meets all of the  
5 following requirements:

6           (A) Was the sole sponsor or a co-sponsor, if each other co-  
7 sponsor is either a medical school approved by the board or a  
8 hospital owned by the federal government and directly operated by  
9 the United States Department of Veterans Affairs, of not less than  
10 4 postgraduate education residency programs approved by the board  
11 under section 17031(1) for not less than the 3 years immediately  
12 preceding the date of an application for a limited license under  
13 section 16182(2)(c) or an application for a full license under  
14 section 17031(2), if at least 1 of the residency programs is in the  
15 specialty area of medical practice, or in a specialty area that  
16 includes the subspecialty of medical practice, in which the  
17 applicant for a limited license proposes to practice or in which  
18 the applicant for a full license has practiced for the hospital.

19           (B) Has spent not less than \$2,000,000.00 for medical  
20 education during each of the 3 years immediately preceding the date  
21 of an application for a limited license under section 16182(2)(c)  
22 or an application for a full license under section 17031(2). As  
23 used in this sub-subparagraph, "medical education" means the  
24 education of physicians and candidates for degrees or licenses to  
25 become physicians, including, but not limited to, physician staff,  
26 residents, interns, and medical students.

27           **(b) "Anesthesiologist" means a physician who has successfully**  
28 **completed a training program in anesthesiology accredited by the**  
29 **Accreditation Council for Graduate Medical Education, the American**

1 Osteopathic Association, or an equivalent organization as  
2 determined by the board.

3 (c) "Certified anesthesiologist assistant" means an individual  
4 who is licensed under this article to engage in practice as a  
5 certified anesthesiologist assistant.

6 (d) ~~(b)~~ "Electrodiagnostic studies" means the testing of  
7 neuromuscular functions utilizing nerve conduction tests and needle  
8 electromyography. It does not include the use of surface  
9 electromyography.

10 (e) ~~(c)~~ "Genetic counselor" means an individual who is  
11 licensed under this ~~part~~ **article** to engage in the practice of  
12 genetic counseling.

13 (f) ~~(d)~~ "Medical care services" means those services within  
14 the scope of practice of physicians who are licensed or authorized  
15 by the board, except those services that the board prohibits or  
16 otherwise restricts within a practice agreement or determines shall  
17 not be delegated by a physician because a delegation would endanger  
18 the health and safety of patients as provided for in section  
19 17048(1).

20 (g) ~~(e)~~ "Participating physician" means a physician, a  
21 physician designated by a group of physicians under section 17049  
22 to represent that group, or a physician designated by a health  
23 facility or agency under section 20174 to represent that health  
24 facility or agency.

25 (h) ~~(f)~~ "Physician" means an individual who is licensed or  
26 authorized under this article to engage in the practice of  
27 medicine.

28 (i) ~~(g)~~ "Podiatrist" means an individual who is licensed under  
29 this article to engage in the practice of podiatric medicine and

1 surgery.

2 (j) ~~(h)~~ "Practice agreement" means an agreement described in  
3 section 17047.

4 (k) "Practice as a certified anesthesiologist assistant" means  
5 providing assistance to an anesthesiologist engaged in the practice  
6 of anesthesiology by performing any of the functions described in  
7 section 17034a under the supervision of the anesthesiologist.

8 (l) "Practice as a physician's assistant" means the practice of  
9 medicine with a participating physician under a practice agreement.

10 (m) "Practice of anesthesiology" means engaging in the  
11 practice of medicine as an anesthesiologist.

12 (n) ~~(i)~~ "Practice of genetic counseling" means provision of  
13 any of the following services:

14 (i) Obtaining and evaluating individual, family, and medical  
15 histories to determine the genetic risk for genetic or medical  
16 conditions or diseases in a client, the client's descendants, or  
17 other family members of the client.

18 (ii) Discussing with a client the features, natural history,  
19 means of diagnosis, genetic and environmental factors, and  
20 management of the genetic risks of genetic or medical conditions or  
21 diseases.

22 (iii) Identifying and coordinating appropriate genetic  
23 laboratory tests and other diagnostic studies for genetic  
24 assessment of a client.

25 (iv) Integrating genetic laboratory test results and other  
26 diagnostic studies with personal and family medical history to  
27 assess and communicate a client's risk factors for genetic or  
28 medical conditions or diseases.

29 (v) Explaining to a client the clinical implications of

1 genetic laboratory tests and other diagnostic studies and their  
2 results.

3 (vi) Evaluating the responses of a client and the client's  
4 family to a genetic or medical condition or disease or to the risk  
5 of recurrence of that condition or disease and providing client-  
6 centered counseling and anticipatory guidance.

7 (vii) Identifying and utilizing community resources that  
8 provide medical, educational, financial, and psychosocial support  
9 and advocacy to a client.

10 (viii) Providing written documentation of medical, genetic, and  
11 counseling information for families of and health care  
12 professionals of a client.

13 (o) ~~(j)~~—"Practice of medicine" means the diagnosis, treatment,  
14 prevention, cure, or relieving of a human disease, ailment, defect,  
15 complaint, or other physical or mental condition, by attendance,  
16 advice, device, diagnostic test, or other means, or offering,  
17 undertaking, attempting to do, or holding oneself out as able to  
18 do, any of these acts.

19 ~~(k) "Practice as a physician's assistant" means the practice~~  
20 ~~of medicine with a participating physician under a practice~~  
21 ~~agreement.~~

22 (p) ~~(l)~~—"Qualified supervisor" means an individual who is a  
23 genetic counselor and who holds a license under this part other  
24 than a temporary or limited license.

25 (q) "Supervision" means that term as defined in section 16109,  
26 except that for subdivision (k) and sections 17034a to 17034b it  
27 also includes the existence of a predetermined plan for emergency  
28 situations, including, but not limited to, the designation of an  
29 anesthesiologist to supervise a certified anesthesiologist



1     **assistant in the absence of the primary supervising**  
2     **anesthesiologist.**

3         **(r)** ~~(m)~~—"Task force" means the joint task force created in  
4     section 17025.

5         **(s)** ~~(n)~~—"Temporary licensed genetic counselor" means a genetic  
6     counselor who has been issued a temporary license under this  
7     article.

8         (2) In addition to the definitions in this part, article 1  
9     contains definitions and principles of construction applicable to  
10    all articles in this code and part 161 contains definitions  
11    applicable to this part.

12         Sec. 17011. (1) An individual shall not engage in the practice  
13    of medicine or practice as a physician's assistant unless licensed  
14    or otherwise authorized by this article. An individual shall not  
15    engage in teaching or research that requires the practice of  
16    medicine unless the individual is licensed or otherwise authorized  
17    by this article.

18         (2) Notwithstanding section 16145 or rules promulgated under  
19    that section, the board may grant a license to an individual who  
20    meets the requirements of section 16186 or 17031(2) after reviewing  
21    the applicant's record of practice, experience, and credentials and  
22    determining that the applicant is competent to practice medicine.

23         (3) For individuals applying for licensure under section  
24    16186, the board shall not impose requirements on graduates of  
25    medical schools located outside the United States or Canada that  
26    exceed the requirements imposed on graduates of medical schools  
27    located in the United States or Canada.

28         (4) Notwithstanding section 16145 or rules promulgated under  
29    that section, the board may grant a license in accordance with

1 section 16186 after determining that each of the following  
2 conditions is satisfied:

3 (a) The applicant has disclosed that a sanction is in force  
4 against ~~him or her~~ **the applicant** as described in section  
5 16174(2) (b) and considering the reasons for the sanction and the  
6 applicant's record of practice, experience, credentials, and  
7 competence to engage in the practice of medicine, that sanction  
8 should not prevent the applicant from being granted a license in  
9 this state.

10 (b) The sanction imposed by the other state is not permanent.

11 (c) The sanction imposed by the other state was not the result  
12 of a patient safety violation.

13 (d) If the applicant was required by the state that imposed  
14 the sanction to participate in and complete a probationary period  
15 or treatment plan as a condition of the continuation of ~~his or her~~  
16 **the applicant's** licensure, the applicant did not complete the  
17 probationary period or treatment plan because the applicant ceased  
18 engaging in the practice of medicine in that state.

19 (e) As a condition of licensure under this subsection, the  
20 applicant voluntarily agrees to complete a probationary period or  
21 treatment plan, the terms of which are no less stringent than those  
22 imposed by the state that imposed the sanction.

23 (5) Except as otherwise provided in ~~this~~ subsection **(6)**, the  
24 following words, titles, or letters or a combination ~~thereof, of~~  
25 **the words, titles, or letters**, with or without qualifying words or  
26 phrases, are restricted in use only to those individuals authorized  
27 under this part to use the terms and in a way prescribed in this  
28 part: ~~"doctor of medicine",~~

29 **(a) "Doctor of medicine", "m.d.", "physician's assistant", and**

1 "p.a."

2 (b) Beginning August 1, 2026, "certified anesthesiologist  
3 assistant" and "c.a.a."

4 (6) Notwithstanding section 16261, an individual who was  
5 specially trained at an institution of higher education in this  
6 state to assist a physician in the field of orthopedics and, upon  
7 completion of training, received a 2-year associate of science  
8 degree as an orthopedic physician's assistant before January 1,  
9 1977 may use the title "orthopedic physician's assistant" whether  
10 or not the individual is licensed under this part.

11 Sec. 17034. (1) Beginning 90 days after the effective date of  
12 the rules promulgated by the board under section 17034a, an  
13 individual shall not engage in practice as a certified  
14 anesthesiologist assistant unless the individual is licensed or  
15 otherwise authorized under this article.

16 (2) The board may grant an educational limited license under  
17 section 16182(2) (a) to an individual who provides satisfactory  
18 evidence to the board that the individual meets all of the  
19 requirements for licensure except the certifying examination. An  
20 educational limited license issued under this section is valid  
21 until the expiration of a period determined by the board that does  
22 not exceed 1 year or until the results of the required certifying  
23 examination are made available, whichever is earlier.

24 (3) The board may grant a license as a certified  
25 anesthesiologist assistant to an individual who provides  
26 satisfactory evidence to the board that the individual has  
27 successfully completed all of the following:

28 (a) A graduate level training program approved by the board.

29 (b) A certifying examination for certified anesthesiologist

1 assistants that is accredited by the Commission on Accreditation of  
2 Allied Health Education Programs or a predecessor or successor  
3 organization of the Commission on Accreditation of Allied Health  
4 Education Programs.

5 (c) A course in advanced cardiac life-support techniques  
6 approved by the board.

7 Sec. 17034a. (1) The board, in consultation with the  
8 department, shall promulgate rules to do all of the following:

9 (a) Limit the duties and activities described in subsection  
10 (2) that may be performed by certified anesthesiologist assistants.

11 (b) Subject to section 16204, prescribe continuing education  
12 requirements as a condition for the renewal of a certified  
13 anesthesiologist assistant license.

14 (2) A certified anesthesiologist assistant shall not engage in  
15 the practice as a certified anesthesiologist assistant unless the  
16 certified anesthesiologist assistant is under the supervision of an  
17 anesthesiologist. A certified anesthesiologist assistant may  
18 perform any of the following functions under the supervision of an  
19 anesthesiologist with whom the certified anesthesiologist assistant  
20 is assisting in the practice of anesthesiology:

21 (a) Obtaining a comprehensive patient history and presenting  
22 the history to the supervising anesthesiologist.

23 (b) Developing and implementing an anesthesia care plan for a  
24 patient.

25 (c) Ordering and performing a preoperative anesthetic patient  
26 evaluation and a postoperative anesthetic patient evaluation.

27 (d) Discussing and educating a patient about the patient's  
28 anesthesia care plan.

29 (e) Pretesting and calibrating an anesthesia delivery system

1 and monitoring, obtaining, and interpreting information from the  
2 anesthesia delivery system and monitoring equipment.

3 (f) Performing a monitoring technique.

4 (g) Establishing airway management by performing ventilatory  
5 support and through the intubation of the trachea, the placement of  
6 a laryngeal mask airway, and the placement of other ancillary  
7 support, including, but not limited to, an oral and nasopharyngeal  
8 airway, and a bag valve mask.

9 (h) Administering and adjusting a vasoactive drug to a patient  
10 and monitoring the response of the patient.

11 (i) Administering an anesthetic drug, adjuvant drug, and  
12 accessory drug to a patient and monitoring the response of the  
13 patient.

14 (j) Performing monitored anesthesia care, deep sedation, and  
15 general anesthesia.

16 (k) Performing regional anesthesia, including, but not limited  
17 to, an epidural anesthetic procedure, a spinal anesthetic  
18 procedure, and a peripheral nerve block.

19 (l) Administering blood, blood products, and supportive fluids.

20 (m) Performing anesthesia-related health care, including, but  
21 not limited to, induction, maintenance, and emergence of anesthesia  
22 and addressing fluid and electrolyte balance.

23 (n) Participating in a function needed in the postanesthesia  
24 recovery area, including, but not limited to, administering  
25 postoperative sedation, anxiolysis, or analgesia medication to  
26 treat a patient's response to anesthesia.

27 (o) Performing a peripheral or central venous and arterial  
28 line procedure for blood sampling, monitoring, or access.

29 (p) Initiating and participating in a cardiopulmonary

1 resuscitation team in response to a life-threatening situation.

2 (q) Relieving a member of an anesthesia care team that is  
3 engaged in a patient care if the member is acting under the  
4 supervision of an anesthesiologist.

5 Sec. 17034b. (1) An anesthesiologist who supervises a  
6 certified anesthesiologist assistant shall comply with all of the  
7 following:

8 (a) The anesthesiologist shall, at all times, be in the  
9 physical proximity of the certified anesthesiologist assistant in a  
10 manner that allows the anesthesiologist to return and reestablish  
11 direct contact with the patient to meet the patient's medical needs  
12 and address any of the patient's urgent or emergent clinical  
13 problems.

14 (b) The anesthesiologist shall ensure that all activities,  
15 functions, services, and treatment measures performed by a  
16 certified anesthesiologist assistant are properly documented by the  
17 certified anesthesiologist assistant.

18 (c) The anesthesiologist shall not supervise more than 4  
19 certified anesthesiologist assistants concurrently.

20 (2) Subject to section 16215, an anesthesiologist who  
21 supervises a certified anesthesiologist assistant may delegate the  
22 performance of any of the following acts, tasks, and functions to  
23 the certified anesthesiologist assistant:

24 (a) The entry of verbal or written medication chart orders  
25 prescribed by the anesthesiologist into a patient's medical record.

26 (b) Performing, ordering, and interpreting preoperative,  
27 point-of-care intraoperative, or postoperative diagnostic testing  
28 or procedures.

29 Sec. 17501. (1) As used in this part:

1           (a) "Anesthesiologist" means a physician who has successfully  
2 completed a training program in anesthesiology accredited by the  
3 Accreditation Council for Graduate Medical Education, the American  
4 Osteopathic Association, or an equivalent organization as  
5 determined by the board.

6           (b) "Certified anesthesiologist assistant" means an individual  
7 who is licensed under this article to engage in practice as a  
8 certified anesthesiologist assistant.

9           (c) ~~(a)~~—"Electrodiagnostic studies" means the testing of  
10 neuromuscular functions utilizing nerve conduction tests and needle  
11 electromyography. It does not include the use of surface  
12 electromyography.

13           (d) ~~(b)~~—"Medical care services" means those services within  
14 the scope of practice of physicians who are licensed or authorized  
15 by the board, except those services that the board prohibits or  
16 otherwise restricts within a practice agreement or determines shall  
17 not be delegated by a physician ~~without endangering~~ **because a**  
18 **delegation would endanger** the health and safety of patients as  
19 provided for in section 17548(1).

20           (e) ~~(c)~~—"Participating physician" means a physician, a  
21 physician designated by a group of physicians under section 17549  
22 to represent that group, or a physician designated by a health  
23 facility or agency under section 20174 to represent that health  
24 facility or agency.

25           (f) ~~(d)~~—"Physician" means an individual who is licensed or  
26 authorized under this article to engage in the practice of  
27 osteopathic medicine and surgery.

28           (g) ~~(e)~~—"Practice agreement" means an agreement described in  
29 section 17547.

1           (h) "Practice as a certified anesthesiologist assistant" means  
2 providing assistance to an anesthesiologist engaged in the practice  
3 of anesthesiology by performing any of the functions described in  
4 section 17534a under the supervision of the anesthesiologist.

5           (i) "Practice as a physician's assistant" means the practice  
6 of osteopathic medicine and surgery with a participating physician  
7 under a practice agreement.

8           (j) "Practice of anesthesiology" means engaging in the  
9 practice of osteopathic medicine and surgery as an  
10 anesthesiologist.

11           (k) ~~(f)~~—"Practice of osteopathic medicine and surgery" means a  
12 separate, complete, and independent school of medicine and surgery  
13 utilizing full methods of diagnosis and treatment in physical and  
14 mental health and disease, including the prescription and  
15 administration of drugs and biologicals, operative surgery,  
16 obstetrics, radiological and other electromagnetic emissions, and  
17 placing special emphasis on the interrelationship of the  
18 musculoskeletal system to other body systems.

19           ~~(g) "Practice as a physician's assistant" means the practice~~  
20 ~~of osteopathic medicine and surgery with a participating physician~~  
21 ~~under a practice agreement.~~

22           (l) "Supervision" means that term as defined in section 16109,  
23 except that for subdivision (h) and sections 17534a to 17534b it  
24 also includes the existence of a predetermined plan for emergency  
25 situations, including, but not limited to, the designation of an  
26 anesthesiologist to supervise a certified anesthesiologist  
27 assistant in the absence of the primary supervising  
28 anesthesiologist.

29           (m) ~~(h)~~—"Task force" means the joint task force created in



1 section 17025.

2 (2) In addition to the definitions in this part, article 1  
3 contains general definitions and principles of construction  
4 applicable to all articles in the code and part 161 contains  
5 definitions applicable to this part.

6 Sec. 17511. (1) A person shall not engage in the practice of  
7 osteopathic medicine and surgery or practice as a physician's  
8 assistant unless licensed or otherwise authorized by this article.

9 (2) Notwithstanding section 16145 or rules promulgated under  
10 that section, the board may grant a license in accordance with  
11 section 16186 after determining that each of the following  
12 conditions is satisfied:

13 (a) The applicant has disclosed that a sanction is in force  
14 against ~~him or her~~ **the applicant** as described in section  
15 16174(2)(b) and considering the reasons for the sanction and the  
16 applicant's record of practice, experience, credentials, and  
17 competence to engage in the practice of osteopathic medicine and  
18 surgery, that sanction should not prevent the applicant from being  
19 granted a license in this state.

20 (b) The sanction imposed by the other state is not permanent.

21 (c) The sanction imposed by the other state was not the result  
22 of a patient safety violation.

23 (d) If the applicant was required by the state that imposed  
24 the sanction to participate in and complete a probationary period  
25 or treatment plan as a condition of the continuation of ~~his or her~~  
26 **the applicant's** licensure, the applicant did not complete the  
27 probationary period or treatment plan because the applicant ceased  
28 engaging in the practice of osteopathic medicine and surgery in  
29 that state.

(e) As a condition of licensure under this subsection, the applicant voluntarily agrees to complete a probationary period or treatment plan, the terms of which are no less stringent than those imposed by the state that imposed the sanction.

(3) Except as otherwise provided in ~~this~~ subsection **(4)**, the following words, titles, or letters or a combination thereof, ~~of the words, titles, or letters,~~ with or without qualifying words or phrases, are restricted in use only to those persons authorized under this part to use the terms and in a way prescribed in this part: ~~"osteopath",~~

**(a) "Osteopath", "osteopathy", "osteopathic practitioner", "doctor of osteopathy", "diplomat in osteopathy", "d.o.", "physician's assistant", and "p.a.".**

**(b) Beginning August 1, 2026, "certified anesthesiologist assistant" and "c.a.a.".**

**(4)** Notwithstanding section 16261, a person who was specially trained at an institution of higher education in this state to assist a physician in the field of orthopedics and, upon completion of training, received a 2-year associate of science degree as an orthopedic physician's assistant before January 1, 1977 may use the title "orthopedic physician's assistant" whether or not the individual is licensed under this part.

**Sec. 17534. (1) Beginning 90 days after the effective date of the rules promulgated by the board under section 17534a, an individual shall not engage in practice as a certified anesthesiologist assistant unless the individual is licensed or otherwise authorized under this article.**

**(2) The board may grant an educational limited license under section 16182(2)(a) to an individual who provides satisfactory**

1 evidence to the board that the individual meets all of the  
2 requirements for licensure except the certifying examination. An  
3 educational limited license issued under this section is valid  
4 until the expiration of a period determined by the board that does  
5 not exceed 1 year or until the results of the required certifying  
6 examination are made available, whichever is earlier.

7 (3) The board may grant a license as a certified  
8 anesthesiologist assistant to an individual who provides  
9 satisfactory evidence to the board that the individual has  
10 successfully completed all of the following:

11 (a) A graduate level training program approved by the board.

12 (b) A certifying examination for certified anesthesiologist  
13 assistants that is accredited by the Commission on Accreditation of  
14 Allied Health Education Programs or a predecessor or successor  
15 organization of the Commission on Accreditation of Allied Health  
16 Education Programs.

17 (c) A course in advanced cardiac life-support techniques  
18 approved by the board.

19 Sec. 17534a. (1) The board, in consultation with the  
20 department, shall promulgate rules to do all of the following:

21 (a) Limit the duties and activities described in subsection  
22 (2) that may be performed by certified anesthesiologist assistants.

23 (b) Subject to section 16204, prescribe continuing education  
24 requirements as a condition for the renewal of a certified  
25 anesthesiologist assistant license.

26 (2) A certified anesthesiologist assistant shall not engage in  
27 the practice as a certified anesthesiologist assistant unless the  
28 certified anesthesiologist assistant is under the supervision of an  
29 anesthesiologist. A certified anesthesiologist assistant may

1 perform any of the following functions under the supervision of an  
2 anesthesiologist with whom the certified anesthesiologist assistant  
3 is assisting in the practice of anesthesiology:

4 (a) Obtaining a comprehensive patient history and presenting  
5 the history to the supervising anesthesiologist.

6 (b) Developing and implementing an anesthesia care plan for a  
7 patient.

8 (c) Ordering and performing a preoperative anesthetic patient  
9 evaluation and a postoperative anesthetic patient evaluation.

10 (d) Discussing and educating a patient about the patient's  
11 anesthesia care plan.

12 (e) Pretesting and calibrating an anesthesia delivery system  
13 and monitoring, obtaining, and interpreting information from the  
14 anesthesia delivery system and monitoring equipment.

15 (f) Performing a monitoring technique.

16 (g) Establishing airway management by performing ventilatory  
17 support and through the intubation of the trachea, the placement of  
18 a laryngeal mask airway, and the placement of other ancillary  
19 support, including, but not limited to, an oral and nasopharyngeal  
20 airway, and a bag valve mask.

21 (h) Administering and adjusting a vasoactive drug to a patient  
22 and monitoring the response of the patient.

23 (i) Administering an anesthetic drug, adjuvant drug, and  
24 accessory drug to a patient and monitoring the response of the  
25 patient.

26 (j) Performing monitored anesthesia care, deep sedation, and  
27 general anesthesia.

28 (k) Performing regional anesthesia, including, but not limited  
29 to, an epidural anesthetic procedure, a spinal anesthetic

1 procedure, and a peripheral nerve block.

2 (l) Administering blood, blood products, and supportive fluids.

3 (m) Performing anesthesia-related health care, including, but  
4 not limited to, induction, maintenance, and emergence of anesthesia  
5 and addressing fluid and electrolyte balance.

6 (n) Participating in a function needed in the postanesthesia  
7 recovery area, including, but not limited to, administering  
8 postoperative sedation, anxiolysis, or analgesia medication to  
9 treat a patient's response to anesthesia.

10 (o) Performing a peripheral or central venous and arterial  
11 line procedure for blood sampling, monitoring, or access.

12 (p) Initiating and participating in a cardiopulmonary  
13 resuscitation team in response to a life-threatening situation.

14 (q) Relieving a member of an anesthesia care team that is  
15 engaged in a patient care if the member is acting under the  
16 supervision of an anesthesiologist.

17 Sec. 17534b. (1) An anesthesiologist who supervises a  
18 certified anesthesiologist assistant shall comply with all of the  
19 following:

20 (a) The anesthesiologist shall, at all times, be in the  
21 physical proximity of the certified anesthesiologist assistant in a  
22 manner that allows the anesthesiologist to return and reestablish  
23 direct contact with the patient to meet the patient's medical needs  
24 and address any of the patient's urgent or emergent clinical  
25 problems.

26 (b) The anesthesiologist shall ensure that all activities,  
27 functions, services, and treatment measures performed by a  
28 certified anesthesiologist assistant are properly documented by the  
29 certified anesthesiologist assistant.

1           (c) The anesthesiologist shall not supervise more than 4  
2 certified anesthesiologist assistants concurrently.

3           (2) Subject to section 16215, an anesthesiologist who  
4 supervises a certified anesthesiologist assistant may delegate the  
5 performance of any of the following acts, tasks, and functions to  
6 the certified anesthesiologist assistant:

7           (a) The entry of verbal or written medication chart orders  
8 prescribed by the anesthesiologist into a patient's medical record.

9           (b) Performing, ordering, and interpreting preoperative,  
10 point-of-care intraoperative, or postoperative diagnostic testing.