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Brian P. Harrity  
137 Peregrine Lane  
Hummelstown, Pa 17036

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INDEPENDENT REGULATORY  
COMMISSION

Joseph C. Gallagher, Jr., D.O.  
Chairman, Osteopathic Board of Medicine  
P.O. Box 2649,  
Harrisburg, PA 17105-2649

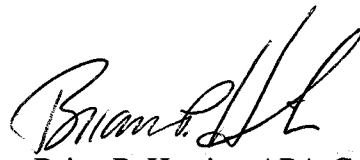
5 March 2009

Dear Dr Gallagher,

I would like to take a moment to support the proposed changes in the privileges for physician assistants with DO's as supervisors. Physician assistants have been practicing for 30+ years and I am glad to see Pennsylvania is moving in the right direction to utilize physician assistants to their full potential. In healthcare today with the rising cost and increasing demand the proposed changes will open up access to health care by allowing physician assistants to practice in more locations throughout the state. These changes may result in drawing physician assistants to this state, expanding local practices, all the while keeping the overall cost down.

I have 7 years experience as a physician assistant, 4 of these years were with the United States Army. The Army physician assistants have a more robust scope of practice than most civilian practices, work for either an MD or DO without differentiation. My privileges were the same, regardless of the MD or DO status of my supervisor. These rules applied to all the physician assistants in the 1<sup>st</sup> Cavalry Division. Like many Army PA's, I was the primary provider for approximately 800 soldiers, and was routinely seeing 20 – 25 patients 5 days a week in a primary care setting. While assigned to the 1<sup>ST</sup> Cavalry Division, I am not aware of any incidence occurring of a physician assistant working within their scope of practice with a patient having a preventable adverse or less than optimal outcome.

The proposed changes are for the better, the benefits far outweigh the risks, and should be passed immediately. I hope that in the near future physician assistants will be able to work for either an MD or DO without distinction providing quality affordable care.



Brian P. Harrity, APA-C, MPAS

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