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DEPARTMENT OF HEALTH
HARRISBURG, PA

November 8, 2007

Arthur Coccodrilli, Chairman
IRRC
14th Floor 333 Market Street
Harrisburg, PA 17101

Dear Chairman Coccodrilli:

The Pennsylvania Osteopathic Medical Association (POMA) has reviewed the proposed changes to the State Board of Osteopathic Medicine's provisions regarding prescriptive privileges for physician assistants, and we have reservations regarding the proposal.

While the Pennsylvania Osteopathic Medical Association (POMA) understands and appreciates the role of the PA in the total health care team approach to patient care, we have significant concerns about the proposed regulation allowing for expansion of the prescribing of Schedule II narcotics to a 30-day period. In today's environment of continually rising abuse and diversion of narcotics, and the economic and social impact created by this problem, it is our belief that provision of further distribution of Schedule II narcotics without the direct involvement of the supervising physician is aimed more at maintaining economic status without increasing the workload on the supervising physician than patient care. This certainly does not appear to be a valid justification, and certainly does not appear to benefit the patient in the long run if the patient requires Schedule II narcotics beyond the current 72 hour period.

The regulations state: "A physician assistant may write a prescription for a Schedule II controlled substance for up to a 30-day supply if the patient was examined at the time of renewal and the patient's ongoing therapy was reviewed and approved by the supervising physician prior to the writing of the renewal."

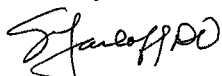
We disagree with the wording of the regulations because there is no assurance or validation that the physician has indeed examined and evaluated the patient unless the physician personally prescribes the medication. This would only take a few more seconds of time and documentation would be substantiated.

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The POMA also opposes the proposal that "A physician assistant may request, receive and sign for professional samples and may distribute professional samples to patients." We do not feel a physician assistant should be able to request, receive, sign for or distribute professional samples, and that this should be the responsibility of the physician.

Thank you for the opportunity to express our concerns regarding the SBOM's proposed changes. Your attention to these matters is greatly appreciated.

Sincerely,



Samuel J. Garloff, D.O.
President

c: Charles P. Fasano, D.O., Chairman, State Board of Osteopathic Medicine
P. Michael Sturla, Chairman, House Committee on Professional Licensure
POMA Board of Trustees