



AMERICAN ASSOCIATION
OF MEDICAL ASSISTANTS®

20 N. WACKER DR., STE. 1575
CHICAGO, ILLINOIS 60606

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Section 90-18(c)(13) of the North Carolina statutes reads as follows:

(a) No person shall perform any act constituting the practice of medicine or surgery, as defined in this Article, or any of the branches thereof...

...

(c) The following shall not constitute practicing medicine or surgery as defined in this Article:

...

(13) ...This subdivision shall not limit or prevent any physician from delegating to a qualified person any acts, tasks, and functions that are otherwise permitted by law or established by custom...

In addition, the Board of Nursing has issued regulations and a position paper concerning the roles of unlicensed office assistants in a physician's office. I have enclosed a copy of this position paper. Please read carefully the paragraphs I have highlighted. It is my legal opinion that if a physician "has total responsibility/accountability for the role of a medical office assistant," a reasonable scope of clinical procedures (such as intramuscular, intradermal, and subcutaneous injections, calling in prescriptions as specifically authorized by the physician, doing a preliminary reading of PPDs and informing the supervising physician for his/her final reading and diagnosis, assisting in sterile technique procedures, and venipuncture) may be delegated by the overseeing/delegating/supervising physician(s) to competent and knowledgeable medical assistants working under direct physician supervision in outpatient settings.

(Procedures which constitute the practice of medicine, or which state law **specifically and unambiguously** permits only certain licensed allied health care professionals to perform, however, may not be delegated to medical assistants.)

Because of the language of the Nursing Practice Act, it is permissible for physicians to delegate telephone screening to competent medical assistants as long as such screening is specifically authorized in writing by the supervising physician(s), requires the medical assistant to follow set protocols/algorithms/decision trees established by the physician, and does not require the medical assistant to exercise independent professional judgment or to make clinical assessments/evaluations.



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Although the nurse practice act and the attendant regulations of the board of nursing govern what **nursing** duties can be delegated by nurses to unlicensed personnel, the medical practice act and the attendant regulations of the board of medical examiners govern what procedures can be delegated by a **licensed physician** to **unlicensed employees** such as medical assistants.

I have enclosed the entry-level competencies taught in medical assisting programs accredited by CAAHEP, and the *Content Outline* of the CMA (AAMA) Certification Examination. Although these documents do not have the force of law, they should offer some guidance on scope of practice.

I hope this is helpful. Please let me know whether you have further questions, and whether I can be of further assistance.



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