

THE SOCIETY OF THORACIC SURGEONS

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PHYSICIAN ASSISTANT ENDORSEMENT STATEMENT

The Society of Thoracic Surgeons supports the use of physician assistants, working under the supervision of cardiothoracic surgeons, in the practice of cardiothoracic surgery. Physician assistants should be credentialed by their local hospital and have received appropriate instruction and training in all procedures and all clinical duties performed under the supervising physician. The duties performed by a physician assistant under the supervision of a cardiothoracic surgeon may include, but are not limited to, the following: 1) conduit procurement for coronary artery bypass surgery; 2) first assisting in surgery; 3) arterial line placement; 4) central line placement; 5) Swan Ganz catheter placement; 6) thoracentesis; 7) placement of, and removal of, intra-aortic balloons; 8) placement and removal of chest tubes; and, 9) pre and postoperative patient care.

Appropriate instruction and training for physician assistants in postgraduate settings should be provided by the supervising cardiothoracic surgeon. This instruction and training can be augmented by clinical rotations in cardiothoracic surgery while the physician assistant was in PA school, by postgraduate apprenticeship programs—either affiliated with an educational institution or in a private-practice setting, by continuing medical education programs specific for cardiothoracic surgery, or by technical skills workshops specific for CT surgery.

The supervising cardiothoracic surgeon is responsible for determining the skill level of the physician assistant in order to help ensure that all clinical duties are performed safely and competently.

The Society does not intend for this endorsement statement to supersede any applicable local or state law or regulation, or any local or state credentialing or regulatory authority or agency. It should be used only as a guide to what are generally considered appropriate and acceptable standards for the physician assistant's scope of clinical duties in a cardiothoracic practice.

This document is not intended to exclude any other non-physician clinical staff employed by or supervised by the CT surgeon from performing any appropriate clinical duty performed under the supervision of the cardiothoracic surgeon.

Adopted by the Board of Directors of The Society of Thoracic Surgeons: May 4, 2003