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This paper covers the brief history of the physician assistant occupation to provide insight into the circumstances under which that profession was developed and continues to examine the contemporary education requirements and roles of physician assistants in healthcare. By observing the contemporary education requirements and roles of physician assistants in healthcare, it is possible to notice that physician assistants are cost-effective, and they produce positive impacts in both economy and healthcare. Although physician assistants are trained to perform diagnostic tests, assign treatments, and help physicians alleviate some of their time to treat more patients, contemporary healthcare places significant emphasis on their roles in preventive care. They rely on continuous education, so they are always aware of the developments in the medical profession, and they implement the newest team-based models of healthcare delivery to improve healthcare delivery. The wide scope of their practice allows physician assistants to adapt to changes in the medical profession, deliver high-quality healthcare, and always remain in demand.

Keywords: physician assistant, physician assistant roles

## Physician Assistant Training and Their Roles in Healthcare

The physician assistant (PA) is a healthcare professional who is trained to assist doctors and provide healthcare under supervision from a physician. PAs Should not be confused with medical assistants because they do not perform routine clinical and clerical tasks. Instead, PAs are trained to perform diagnostic tests, carry out treatments, and resort to preventive care under the delegation of a physician. The first programs for PAs originated in the 1960s, and the programs were approved by the American Medical Association (AMA) in 1970. Contemporary PA schools have high requirements for education enrollment and rigorous training programs that cover both theoretical and practical medical training. When PAs graduate from school, they can expect an open and growing job market because they are not restricted to working in healthcare facilities anymore. Although PAs mainly work under the physicians’ orders, they are capable of taking a certain degree of medical responsibility, and their cost-effectiveness and abilities are appreciated in the healthcare industry.

## History of the PA Profession

The first proposal for training PAs was made by Hudson in 1961, but the American Medical Association (AMA) did not consider his suggestion seriously because they did not believe that physicians and patients would accept the PAs’ services even after their training (Carter, 2001). His original proposal included training two groups of people. One group would receive little training exclusively on the job to prove that very little training is required to assist in hospital settings. The second group would receive more training than technicians and fewer training than doctors, so they would gain more freedom and medical responsibility than the first group. The original proposal suggested that assistants must have two years of college and two years of vocational training, for which they would receive a bachelor’s degree in medical science. However, the first programs were launched in 1965 and 1969 when Hudson teamed up with Stead and Smith, two doctors who took his suggestion seriously and wanted to train assistants.

The first trainees were former military corpsmen, and Hudson’s colleagues insisted that they should train only the second group of PAs that would be able to take a degree of medical responsibility. In 1970, it was estimated that 30, 000 medics were receiving discharges from the army annually (Carter, 2001). Because medics are costly to train, the government decided to prequalify former medics into PAs. That was a cost-effective idea to maintain both the economy and healthcare in the country. The initial programs were successful, and in 1971, the PAs were granted a job category and examinations by the Civil Service Commission.

## Contemporary PA Training

Contemporary PA training covers both theoretical and clinical practice in its curriculum, and the average length of most PA education programs is 27 months. The United States currently provide 159 accredited PA programs represented by the Physician Assistant Education Association, and most of them can award a master’s degree to participants. The requirements to enroll in a PA school are high. Completing two years in college courses in basic science and behavioral science are the prerequisites for enrollment (American Academy of Physician Assistants [AAPA], n. d. b). Most programs prefer applicants with prior healthcare experience, but all programs require their applicants to be familiar with anatomy, microbiology, chemistry, biology, and physiology.

Core medical sciences, including anatomy, physiology, pathophysiology, physical diagnosis, biochemistry, microbiology, pharmacology, clinical laboratory science, behavioral science, and medical ethics, are covered in the PA curriculum (AAPA, n. d. b). In practice, PAs are obligated to complete more than 2, 000 hours of clinical rotations (AAPA, n. d. b). Although they mostly focus on primary care, their rotations have to cover family medicine, pediatrics, surgery, emergency medicine, psychiatry, gynecology, obstetrics, and internal medicine (AAPA, n. d. b). Although the PAs do not specialize unless they pursue a degree in PA postgraduate programs (Bureau of Labor Statistics [BLS], 2009), they must be familiar with and be able to participate in all fields of the medical science. Furthermore, each PA must complete 100 hours of ongoing medical education every two years to maintain the PA certification.

## Job Outlooks for PAs

According to the BLS (2009), the PA requirement on the labor market is expected to grow by 39 percent between 2008 and 2018, so their employment outlooks are expected to grow faster in contrast with average values for all occupations. The most common job opportunities for PAs are located in rural and inner-city healthcare facilities. However, their employment is not limited to working in healthcare facilities. According to AAPA (2010), 7, 500 PAs work for the government and the military, many PAs work in correctional institutions, such as prisons, and many PAs are self-employed. The median income for PAs was estimated at $81, 230 in May 2008 (BLS, 2009).

## Roles in Healthcare

All PAs practice medicine with a supervising physician, so they work on a team-based model that allows them to work with more patients and deliver high-quality healthcare to all of them. They are trained to think like doctors, and they have a degree of medical responsibility, so they can relieve the physician’s responsibilities by providing physical examinations, diagnostic tests, interpreting test results, prescribing treatments or medication, assisting the physicians in surgery, and giving medical orders to patients. Furthermore, PAs can form inter-disciplinary teams and collaborate with doctors from various specializations in treating patients. Studies show that PAs are as effective as doctors when providing care to patients because most patients do not recognize the difference between the two roles and are equally satisfied with both professions when receiving healthcare (AAPA, n. d. a).
If they do not deliver healthcare directly, PAs can work in healthcare administration, the academia, or focus on preventive healthcare. In the academia, PAs can focus on student education or participate in medical studies. In preventive care, PAs are recognized in chronic care management. Patient education is one of their main responsibilities, so PAs directly eliminate costly care serviced by reducing admissions, readmissions, and prescription drug use (AAPA, n. d. a). Because they contribute to disease prevention, patient education, and care coordination, the PAs are recognized for decreasing demands for care and eliminating unnecessary expenses in the healthcare industry.

## Conclusion

The healthcare industry prefers PAs because they are cost-effective and have a wide scope of practice. The States are progressively expanding the PAs’ authorities and allowing them to assist physicians in more procedures or perform more procedures independently. Those changes open more job opportunities for PAs, increase the quality of care delivery, and reduce wasted resources in healthcare by supporting patient education. The PA is an admirable profession because it supports lifelong learning and offers the widest scope of medical practice to learners. Despite the changes in the medical system, PAs will always be in demand because they can adapt to and work in any medical field.

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