

**Department of Planning and Budget
2004 Fiscal Impact Statement**

1. Bill Number Senate Bill 555

House of Origin	<input type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
Second House	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input checked="" type="checkbox"/> Enrolled

2. Patron L. Louise Lucas

3. Committee Passed Both Houses

4. Title Pronouncements of death under certain circumstances by physician assistants

5. Summary/Purpose: This bill authorizes a physician assistant practicing under the supervision of a physician to pronounce death under the following circumstances: (i) the physician assistant works at (a) a home health organization, or (b) a hospice, or (c) a hospital or nursing home, including state-operated hospitals, or (d) the Department of Corrections; (ii) the physician assistant is directly involved in the care of the patient; (iii) the patient's death has occurred; (iv) the patient is under the care of a physician when his death occurs; (v) the patient's death has been anticipated; (vi) the physician is unable to be present within a reasonable period of time to determine death; and (vii) there is a valid Do Not Resuscitate Order pursuant to § 54.1-2987.1 for the patient who has died. The physician assistant must inform the patient's attending and consulting physicians of his death as soon as practicable and must inform the chief medical examiner of unexpected deaths. The physician assistant will not make a determination of the cause of death, i.e., physicians will continue to have this responsibility. The Board of Medicine's procedures, if any, will apply to these pronouncements of death, and the physician assistant is not relieved of any liability from failure to comply with the Board's regulations. This bill provides limited authority to pronounce death to physician assistants identical to the authority registered nurses have already been granted.

6. No Fiscal Impact

7. Budget amendment necessary: No

8. Fiscal implications: None

9. Specific agency or political subdivisions affected: None

10. Technical amendment necessary: No

11. Other comments: None

Date: 03/01/04 / kwm

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cc: Secretary of Health and Human Resources