

**25 GAR PROFESSIONAL & VOCATIONAL REGULATIONS
CH. 10 GUAM BOARD OF ALLIED HEALTH EXAMINERS**

**CHAPTER 10
GUAM BOARD OF ALLIED HEALTH EXAMINERS**

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NOTE: Guam Board of Allied Health Examiners was repealed by P.L. 16-123. These Rules and Regulations were filed with the Legislative Secretary on June 10, 1987.

§ 10101. Definitions.

(a) *Licensed Physician* means a physician currently licensed to practice medicine in the Territory of Guam.

(b) *Physician Assistant* means a skilled person licensed by the Guam Board of Allied Health Examiners of the Territory of Guam as being qualified by academic and practical training to provide patient services under the direct supervision of a licensed physician who is responsible, in a manner determined by the Board, for the performance of that person. A physician assistant is not an independent practitioner.

(c) *Board* means the Guam Board of Allied Health Examiners.

(d) *Direct Supervision* means the opportunity or ability of the supervising physician(s) to exercise control over the services performed by the physician assistant. A supervising physician must be physically on the premises where the physician assistant is practicing, except in the case of home visits and extended care facilities when the physician must be available on island by telecommunication.

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(e) *Supervising physician* means a licensed physician who is registered by the Board to supervise a specific physician assistant.

§ 10102. Requirements for Licensure.

(a) Licensed physician assistants must be graduates of programs approved by the physician assistant Examining Committee (PAEC) in an institution accredited by the Committee on Allied Health Education and Accreditation (CAHEA); and

(b) Have passed a proficiency examination developed by the National Commission on Certification of Physician Assistants or its successor.

§ 10103. Supervising Physician.

The Board shall maintain a current list of registered licensed physicians provided by the Guam Board of Medical Examiners.

§ 10104. Registration of Physician Assistants Supervision.

Prior to practicing on Guam, the licensed physician assistant shall present for approval of the Board a completed application as designated by the Board. The supervising physician shall specify the specialty areas in which the physician assistant shall provide services. Proposed changes of supervision registration must be approved by the Board.

§ 10105. Re-Certification.

Each licensed physician assistant must present evidence of current certification through the National Commission on Certification of Physician Assistants, or its successor, every two years in order to be re-certified by the Board.

§ 10106. Scope of Practice.

A physician assistant may provide any medical services delegated to him/her by a supervising physician or group of physicians when such services are within his/her skills, form a usual physicians when such services are within his/her skills, form a usual component of the physician's scope of practice, and are provided under the direct supervision of a supervising physician.

Physician assistants extended privileges or employed by hospital or skilled nursing facility may, if permissible under the by-laws and rules and

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regulations of such facility, write medical orders (including medications, tests and treatments) for in-patients under the care of the supervising physician. In every case, medical orders so written must be countersigned by the supervising physician or confirmed by telephone within twenty-four hours. Such a co-signature is required prior to the execution of the orders.

§ 10107. Identification.

While working, the physician assistant shall wear or display appropriate identification, clearly indicating that he or she is a physician assistant.

The physician assistant's license must be displayed in the office and any satellite operation in which he may function.

A physician assistant may not advertise himself/herself in a manner that would mislead the patients of the supervising physician or the public.

§ 10108. Supervision Required.

(a) Tasks performed by the physician assistant must be under the direct supervision of a licensed physician, registered by this Board to be the supervising physician.

(b) The supervising physician (or group of physicians) must provide written guidelines readily available at each site at which the physician assistant is practicing covering medical conditions commonly encountered and diagnostic and treatment protocols.

(c) All medical records must be reviewed and co-signed by the approved supervising physician within seven days.

(d) The Board shall keep a current register of licensed physician assistants and their supervising physicians; this register shall be available for public inspection.

(e) The Board shall administer the provisions of this Act and enforce them with the aid of the Government of Guam Attorney General's Office.

(f) Any person not approved as required by these rules and regulations who holds himself or herself out as a physician assistant, or uses any other term to indicate or imply that he or she is a physician assistant, or acts as a physician assistant without having obtained the approval of the Board, is

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subject to penalties applicable to the unlicensed practice of medicine.

(g) Upon being duly licensed by the Guam Board of Allied Health Examiners, the applicant shall have his/her name, address and other pertinent information enrolled by the Board on a roster of licensed physician assistants.

(h) Licensed physician assistants shall not perform work in a medical specialty area in which they have not been trained or in which their supervising physician is not qualified.

(i) Not more than two currently licensed physician assistants may be supervised by a licensed physician.

(j) If no registered supervising physician is available to supervise the physician assistant, the physician assistant must not perform patient care activities.

(k) Nothing in this Act shall be construed to prohibit the employment of physician assistants by a medical care facility where such physician assistants function under the direct supervision of a Guam-licensed physician or group of Guam- licensed physicians approved by the Board as Supervising Physician.

§ 10109. Prescribing.

A physician assistant may administer, prescribe and dispense any licensed drug other than Scheduled II-III drugs as a delegated authority of the supervising physician if such authorization is registered by the Board.

§ 10110. Denial, Suspension, or Revocation of Licensure.

(a) The Guam Board of Allied Health Examiners shall have authority to refuse, revoke, or suspend the license of a physician assistant for any of the following reasons:

(1) Conviction of felony in this Territory or any other state, territory or country. Conviction as used in this paragraph shall include a finding or verdict of guilty, an admission of guilt, or a plea of nolo contendere;

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(2) Habitually using any habit-forming drug such as opium or any of its derivatives, morphine, heroin, cocaine, or any habit-forming drug;

(3) Fraud or deceit in obtaining initial approval as a physician assistant, or in the practice of the physician assistant profession;

(4) Professional misconduct of incompetence, or gross carelessness or manifest incapacity in the practice of medicine;

(5) Practicing as a physician assistant under a physician whose license to practice under the Guam Board of Medical Examiners is denied or suspended;

(6) Having his/her approval to serve as a physician assistant revoked or suspended or having any other disciplinary action taken, or an application for approval refused, revoked, or suspended by the proper regulatory authority of another state, territory or country;

(7) Violating a lawful regulation promulgated by the Board or violating a lawful of the Board, previously entered by the Board in a disciplinary proceeding.

(b) Disciplinary measures: When the Guam Board of Allied Health Examiners determines that the approval of a physician assistant may be refused, revoked or suspended under the terms of this Act, it may:

(1) Deny the application for approval;

(2) Administer a public or private reprimand;

(3) Revoke, suspend, limit or otherwise restrict licensure and/or registration;

(4) Require a physician assistant to submit to the care, counseling, or treatment of a physician or physicians designated by the Board;

(5) Suspend enforcement of its finding thereof and place the physician assistant on probation with the right to vacate the probationary order;

(6) Restore or reissue, at its discretion, a license to serve as a physician assistant, and impose the disciplinary or corrective measure which it might have originally imposed.

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§ 10111. Codes of Professional Conduct/Ethics.

(a) All licensees, registrants, and certificate holders shall comply with the following Codes of Professional Conduct:

(1) **OCCUPATIONAL THERAPY.** In the case of Occupational Therapists and Occupational Therapist Assistants licensed by the Board as provided in Articles 7 and 14 of Chapter 12, Title 10, the Code of Professional Conduct shall be the American Occupational Therapy Association (AOTA) Occupational Therapy Code of Ethics (2015), as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Occupational Therapists and Occupational Therapist Assistants and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the AOTA Occupational Therapy Code of Ethics (2015) and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control;

(2) **ACUPUNCTURE.** The Code of Professional Conduct for persons licensed to practice acupuncture shall be the National Certification Commission for Acupuncture and Oriental Medicine Code of Ethics as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for the Practice of Acupuncture and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the National Certification Commission for Acupuncture and Oriental Medicine Code of Ethics and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(3) **AUDIOLOGY.** The Code of Professional Conduct for Audiologists licensed by the Board shall be the Code of Ethics published by the American Speech-Language-Hearing Association (2016), as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Audiologist and by reference thereto

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shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for the Practice of Audiology and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(4) **CHIROPRACTIC MEDICINE.** The Code of Professional Conduct for Chiropractors licensed by the Board shall be the American Chiropractic Association Code of Ethics as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Chiropractors and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Chiropractors and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(5) **CLINICAL PSYCHOLOGY.** The Code of Professional Conduct for Clinical Psychologists licensed by the Board shall be the Association of State and Provincial Psychology Boards (ASPPB) Code of Conduct (2018), and the American Psychological Association (APA) Ethical Principles of Psychologists and Code of Conduct (2017) as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Clinical Psychologists and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Clinical Psychologist and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(6) **LICENSED PROFESSIONAL COUNSELING.** The Code of Professional Conduct for Licensed Professional Counselors licensed by the Board shall be the American Counseling Association Code of Ethics as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Licensed Professional Counselors and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of

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Professional Conduct for Licensed Professional Counselors and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(7) **LICENSED MENTAL HEALTH COUNSELING.** The Code of Professional Conduct for Licensed Mental Health Counselors licensed by the Board shall be the American Mental Health Counselors Association (AMHCA) Code of Ethics (Oct. 2015), as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Licensed Mental Health Counselors and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Licensed Mental Health Counselors and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(8) **MARRIAGE AND FAMILY THERAPY.** The Code of Professional Conduct for Marriage and Family Therapists licensed by the Board shall be the American Association of Marriage and Family Therapy (AAMFT) Code of Ethics as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Marriage and Family Therapists and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Marriage and Family Therapists and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(9) **PHYSICAL THERAPY.** The Code of Professional Conduct for Physical Therapists licensed by the Board shall be the American Physical Therapy Association (APTA) Code of Ethics for the Physical Therapist; and the APTA Guide for Professional Conduct, as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. The Code of Professional Conduct for Physical Therapist Assistants licensed by the Board shall be the APTA Guide for Conduct of the Physical Therapist Assistant (PTA); and the APTA Standards of Ethical Conduct for the Physical Therapist Assistant, as

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adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Physical Therapists and Physical Therapist Assistant, and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Physical Therapists and Physical Therapist Assistant, and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(10) **PHYSICIAN ASSISTANTS.** The Code of Professional Conduct for Physician Assistants licensed by the Board shall be the Guidelines for Ethical Conduct for the Physician Assistant Profession (2013) as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Physician Assistants and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Physician Assistants and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(11) **PODIATRY.** The Code of Professional Conduct for Podiatrists licensed by the Board shall be the American Podiatric Medical Association – Code of Ethics (2013) as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Podiatrist and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Podiatrist and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(12) **SPEECH-LANGUAGE PATHOLOGY.** The Code of Professional Conduct for Speech-Language Pathologists and Speech-Language Pathology Assistants licensed by the Board shall be the American Speech-Language-Hearing Association (ASHA) Code of Ethics (2016) as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as

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the Code of Professional Conduct for Speech-Language Pathologists and Speech-Language Pathology Assistants and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(13) **VETERINARY MEDICINE.** The Code of Professional Conduct for Veterinarians licensed by the Board shall be the American Veterinary Medical Association Principles of Veterinary Medical Ethics (PVME) as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Veterinarians and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Veterinarians and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(14) **RESPIRATORY THERAPY.** The Code of Professional Conduct for Respiratory Therapists licensed by the Board shall be the American Association for Respiratory Care (AARC) Code of Ethics as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Respiratory Therapy and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the American Association for Respiratory Care Code of Ethics and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(15) **NUTRITION AND DIETETICS.** The Code of Professional Conduct for Nutritionists and Clinical Dietitians licensed by the Board shall be the Academy of Nutrition and Dietetics Code of Ethics as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Nutritionists and Clinical Dietitians and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional

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Conduct for Nutritionists and Clinical Dieticians and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(16) NURSING HOME ADMINISTRATORS. The Code of Professional Conduct for Nursing Home Administrators licensed by the Board shall be the American College of Health Care Administrators (ACHCA) Code of Ethics and the National Association for Home Care & Hospice (NAHC) Code of Ethics as adopted as of the effective dates of these rules, and any revisions made hereafter thereto. These Rules shall be known as the Code of Professional Conduct for Nursing Home Administrators and by reference thereto shall have the full force and effect of a regulation of the Board. In the event of a conflict between the Code of Professional Conduct for Nursing Home Administrators and any statute enacted by the Guam Legislature or any rule promulgated by this Board the more recent in time statute or rule shall control.

(b) Each applicant or licensee, registrant, or certificate holder is responsible for being familiar with and following the Code of Ethics of that individual's profession.

(c) Unethical conduct includes, but is not limited to, the following:

(1) Knowingly circulating untrue, fraudulent, misleading or deceptive advertising.

(2) Engaging in sexual activities with clients.

(3) Addiction to the habitual use of intoxicating liquors, narcotics, or other stimulants to such an extent as to incapacitate him from the performance of his professional obligations and duties.

(4) Failure of a licensee to inform clients fully about the limits of confidentiality in a given situation, the purposes— for which information is obtained, and how it may be used.

(5) Denial of a client's reasonable request for access to any records concerning the client. When providing clients with access to records, the licensee shall take due care to protect the confidences of others contained in those records.

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(6) Failure to obtain informed consent of clients before taping, recording, or permitting third party observation of their activities.

(7) Failure to clarify the nature and directions of a licensee's loyalties and responsibilities and keep all parties informed of their commitments when a conflict of interest exists between a client and the licensee's employing institution.

(8) Failure to fully inform consumers as to the purpose and nature of an evaluation, research, treatment, educational or training procedure, and freely acknowledging that clients', students, or participants in research have freedom of choice with regard to participation.

(9) Failure to attempt to terminate a clinical or consulting relationship when it is reasonably clear that the relationship is not benefiting the consumer, patient, or client. Licensees who find that their services are being used by employers in a way that is not beneficial to the participants or to employees who may be affected, or to significant others, have the responsibility to make their observations known to the responsible persons and to propose modification or termination of the engagement.

(10) Failure to make every effort to avoid dual relationships with clients and/or relationships which might impair independent professional judgment or increase the risk of client exploitation.

(11) Failure to assist clients in finding needed services by making appropriate referrals in those instances where payment of the usual fee would be a hardship.

(12) Failure to terminate service to clients and professional relationships with them, when such service and relationships are no longer required. The licensee who anticipates the termination or interruption of service to clients shall notify clients promptly and seek the transfer, referral, or continuation of service in relation to the clients' needs and preferences.

(13) Setting fees that are unreasonable and not commensurate with the service performed.

(14) Engaging in the division of fees or agreeing to split or divide

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the fee received for professional services with any person for bringing or referring a patient.

SOURCE: Adopted as § 101301 by P.L. 35-049:2 (Nov. 12, 2019), renumbered by the Compiler pursuant to the authority of 1 GCA § 1606.
