

## NEUROSURGERY SCOPE OF PRACTICE GUIDELINES

Assists in providing preoperative and postoperative care, performs initial evaluations for consultation requests from other department or physicians, and writes appropriate orders for pre- and postoperative care as necessary. Documents patient care orders for admission, transfer and discharge orders during the hospitalization.

Assists when required with life saving procedures and emergency evaluations in cases such as cardiac arrest, respiratory arrest, trauma and other emergency evaluations.

Performs daily rounds independently or with the neurosurgical attending and other members of the neurosurgical team.

Notifies the neurosurgical attending on call or supervising surgeon(s) immediately in unusual or unexpected events requiring direct physician consultation.

Performs, when requested:

Urinary bladder catheterization/removal,

Central venous access with proof of competence

Removal of venous and arterial catheters

Wound care including dressing changes and simple debridement

Removal of sutures, staples, and surgical drains

Perform closure of simple wounds

Perform ventricular-peritoneal, ventriculo-atrial, and omya reservoir shunt taps

Assist the neurosurgeon with cervical traction and Garner-Well Tong application, assists with Halo placement and Intracranial Pressure monitor placement

The PA will also manage external ventricular drains

**Systems within the scope of practice of the neurosurgery physician-physician assistant team to initiate, continue, modify, or refer care include:**

**Skin and Appendages: (May identify, initiate work-up, and initiate care on referral)**

Cauterize/ excise / biopsy lesions - obtain second opinion of suspicious lesions

Common dermatoses

Nail disorders and release of subungual hematoma

Soft tissue injuries

**Eye (May identify, initiate work-up, and initiate care on referral)**

Symptoms of ocular disease

Disorders of the lids and lacrimal apparatus

Conjunctivitis

Ocular trauma

Foreign body removal

**Ear, Nose and Throat: (May identify, initiate work-up, and initiate care on referral)**

Diseases of the ear

Diseases of the nose and sinuses

Diseases of the oral cavity and pharynx

Diseases presenting as neck masses

**Lung: (May identify, initiate work-up, and initiate care on referral)**

Ordering of pulmonary function tests

Disorders of the airways

\*Any patient presenting in acute respiratory distress or suspected pulmonary emboli is to be evaluated by a physician.

**Heart: (May identify, initiate work-up, and initiate care on referral)**

Valvular heart disease

Coronary heart disease

Disturbances of rate and rhythm

Conduction disturbances

Cardiac failure

Hypertension

\*Chest pain suspicious of cardiac disease is to be evaluated by M.D., EKG's are to be over-read.

**Blood: (May identify, initiate work-up, and initiate care on referral)**

Peri-operative anemia

Hyper-coagulable or hypo-coagulable states

\*Peri-operative patients requiring transfusions shall be discussed by M.D.

**Alimentary Tract: (May identify, initiate work-up, and initiate care on referral)**

Symptoms and signs of gastrointestinal disease

Diseases of the esophagus

Diseases of the stomach and duodenum

Diseases of the small intestine

Diseases of the colon and rectum

Anorectal diseases

**Liver, Biliary Tract, and Pancreas (May identify, initiate work-up, and initiate care on referral)**

Diseases of the Liver

Diseases of the Biliary Tract

Diseases of the Pancreas

**Gynecology (May identify, initiate work-up, and initiate care on referral)**

Premenstrual Syndrome

Dysmenorrhea

Contraception (as it relates to amenorrhea in athletic population)

Menopausal Syndrome

**Allergic and Immunologic Disorders (May identify, initiate work-up, and initiate care on referral)**

Allergic diseases

**Fluid and Electrolyte Disorders (May identify, initiate work-up, and initiate care on referral)**

Diagnosis of fluid and electrolyte disorders in the peri-operative patient

Treatment of specific fluid, electrolyte and acid-base disorders in the peri-operative patient

Fluid management in the peri-operative patient

**Urology (May identify, initiate work-up, and initiate care on referral)**

Uncomplicated genitourinary tract infections in the peri-operative patient

Acute or chronic renal disease in the peri-operative patient

**Nervous System (May identify, initiate work-up, and initiate care on referral)**

Headache

Head injury- Obtain consultation with SUPERVISING PHYSICIAN if intracranial pathology suspected

Peripheral neuropathies

**Psychiatric Disorders (May identify, initiate work-up, and initiate care on referral)**

Psychiatric assessment

Common psychiatric disorders

Substance use disorders

**Endocrinology (May identify, initiate work-up, and initiate care on referral)**

Common presentations in endocrinology

**General Problems in Infectious Diseases (May identify, initiate work-up, and initiate care on referral)**

Fever of unknown origin (FUO)

Animal and human bite wounds

Wound infections

**Disorders Due to Physical Agents (May identify, initiate work-up, and initiate care on referral)**

Disorders due to cold

Disorders due to heat

Burns

**Cancer: Upon diagnosis- all cancer patients are to be discussed with SUPERVISING PHYSICIAN and appropriate referral made. (May identify, initiate work-up, and initiate care on referral)**

Incidence and etiology

Prevention of cancer

**CLINICAL SKILLS SPECIFIC TO PHYSICIAN ASSISTANTS IN NEUROLOGICAL SURGERY AND NEUROLOGY**

- Ventriculoperitoneal, ventriculopleural, and ventriculoatrial shunt taps
- Shunt opening pressure setting adjustment on the order of the supervising/alternate supervising physician
- Refill and reprogramming of intrathecal pain/spasticity pump systems – Baclofen can be overdosed
- Interrogating, analyzing, and reprogramming of dorsal column stimulators
- Diagnostic and therapeutic external ventricular drain taps to include routine surveillance lab tests
- Lumbar tap and/or insertion of lumbar drain