## HOUSE HUMAN SERVICES COMMITTEE SB 2274

## Testimony of Jay Metzger, PA-C North Dakota Academy of Physician Assistants March 23, 2021

Chairman Wiesz, members of the House Human Services Committee, my name is Jay Metzger and I am a physician assistant (PA) and president of the North Dakota Academy of Physician Assistants (NDAPA). I am testifying on behalf of the NDAPA in **opposition to SB 2274** due to patient safety concerns, and I will also provide a factual account of what PA education entails in general and specifically from pharmacological and prescribing perspectives. Information presented or circulated in favor of SB 2274 to the North Dakota Senate about PA education and training was misleading, inaccurate, or incomplete.

As you will see in the attached document (PA Education Overview), PAs have extensive education in the science of pharmacology, benefits, risks, interactions, and most importantly, the actual application of prescription medications to patients in the clinical setting. In the information provided to the Senate by various people and entities, it was suggested that PAs only have two courses in pharmacology (two credits each) in comparison to that of naturopathic doctors who may have as many as eight credits. What was misleading is that

while PAs only have two courses entitled "pharmacology," pharmacology is embedded in every clinical medicine classroom course and supervised clinical patient care rotation. The amount of classroom time alone spent on pharmacology and appropriate/safe prescribing of medications, not to include case studies, simulations, labs, reading, studying, etc., is more than 215 hours. Supervised clinical experience for PA students is over 1800 hours on average and more than 1500 patients are seen during that time, most of which require prescribing or monitoring of prescription medications. Once in practice, PAs continue to collaborate with physicians and other healthcare providers to ensure the safe practice of medicine, especially when treating people with prescription medications and monitoring of these therapies.

As a PA educator, I can also tell you that one credit at one institution does not always equal one credit at another. In reviewing the information supplied in previous testimony and other forms circulated to the Senate, there were many misleading comparisons made about naturopathic education in contrast to PA education, NP education, and physician education. Much of this misleading information was comparing credit-credit or credit-hours. Doing the math on one of the most highly acclaimed naturopathic schools in the nation, one credit of clinical experience is only 23 hours per credit, whereas North Dakota's only PA school has 38 to 50 hours per credit. This difference in credits vs. hours is

significant and raises concerns about the actual education and training that naturopathic doctors receive regarding prescription medications.

This is not a "turf war" rather a concern for patient safety. We will still have more than enough patients to care for in our practices. We as PAs have pursued changes to our scope of practice, and with those have come opposition from other medical providers. The key difference here is that PAs have advocated for things that we are well educated, trained, and practice every day. Naturopathic doctors are valuable providers in the areas that they are educated and trained. Having alternative medical professionals to care for patients who do not wish to be treated with conventional allopathic or osteopathic means can be of benefit in many cases. However, when it comes to prescription medications, it is best to have a team approach and leave that aspect to other professionals who have the training and experience to safely manage these medications in our patients.

The NDAPA thanks you for your time and respectfully ask for a **DO NOT PASS on SB 2274**.

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