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University Hospital Emergency Center, an outdoor evening. Night is cool. Clear skies. Outside the ER doors, people walk around. Inside, almost every chair is occupied. "It's not uncommon for people to wait 12 hours, or even longer, to be seen," says Steve Salter, physician assistant-certified (PA-C).

Salter's shift started at 7 p.m. Before thirty minutes had passed, he had already seen a couple of Code 3's. There are not life-threatening cases, but may be accidental victims or injuries. "We have thirty PAs, fifteen doctors and fifty nurses. There are thirty people waiting. They're going to have a long wait," he says, gesturing at the computer screen, which gives a diagram of the ER unit. All 50 beds were occupied. The patients in these 50 beds may be waiting themselves for medical care, they go to telemetry, or even the psychiatric ward.

As Salter began to talk about a typical shift working in the ER, I realized he examined a patient, filled out paperwork and ordered tests that I had little time for conversation. His paper went off and he was called to go across the hall to see another patient.

Salter was a program director at Brooke Army Medical Center before he began his employment at University Hospital in 1997, as a part-time. He retired from the U.S. Army in 2000 and now works full-time.

University Hospital
Emergency Center,

Does he ever have a slow day? "We have slow periods of about one to two hours, sometimes," he says. "We may catch up on paperwork."

Though he admits, "This is a tough place to work," he enjoys his job as a physician assistant. Physician assistants spend 90% of their medical time on call, according to the American Academy of Physician Assistants. PAs are healthcare providers licensed to practice medicine with physician supervision. PAs examine patients, diagnose and treat illnesses, order and interpret tests, and use models to control patients' treatments.

A physician assistant's scope of practice varies with the training and experience, and the laws of the state in which he or she practices, as well as corresponding to the supervising physician's practice.

EDUCATION

Physician assistants study the same medical model as physicians, that is, to diagnose and treat medical problems. The PA program consists of classroom and clinical instruction in anatomy, physiopathology, radiology, clinical medicine, and physical diagnosis. PAs don't go through an internship or residency training. After they graduate, PAs are licensed to practice medicine in the various areas of medicine, i.e., internal medicine, family medicine, pediatrics and even surgery.

Upon graduation, PAs take the national certification examination that was developed by the National Commission on Certification of PAs and the Accreditation Review Commission on Education for the Physician Assistant, Inc.

Before enrolling in schools that train physician assistants, "people had to have 30 months experience as a medical assistant, then they had to pass a test," says Dr. Allen Whitford, D.O., Emergency Medicine at University Hospital. "Now, they only need two years of training," he says. "It's a much shorter training than being a doctor," he says.

Physicians go through formal education, then they're required to do an internship and complete a residency. PAs do not have to do residencies or internships.

Kodrosky graduated from high school and attended St. Francis University in Pennsylvania. What he likes best about his job is its diversity. "In one night, I can see patients with sprained ankles to ones who've had a heart attack," he says.

"There's a PA school at Fort Sam Houston," says Dr. Whitford, referring to the Army's...

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Dr. Allen Whitford, D.O., Emergency Medicine at University Hospital, started his medical career as a combat medic (a precursor to physician assistant) in the Vietnam War. The Army later paid for him to attend medical school.

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Medical Department and School at Fort Sam Houston trains approximately 25,000 students in 14 medical specialties.

Interestingly, the PA profession started with U.S. Army medics.

**HISTORY**

The Physician Assistant profession began in 1963 with Dr. Eugene Staud of the Duke University Medical Center in North Carolina where the first PA class was held. The purpose was to expand the practice of quality medical care due to the shortage of primary care physicians. The same medical model that was used to deploy physicians during WWII was used for this training. To use medics or medics serving in the Vietnam War served as a natural progression for this. The physician assistant program was born.

In fact, before Dr. Whitford became a physician, he was a physician assistant. He had been a combat medic in the Vietnam War, a Green Beret. The Army paid for him to go to medical school, he says.

In 1969, military combat medics attended the first class for physician extenders as they were called until the University of Washington School of Medicine and the Medics program. This reemphasized the PA training program, says Dr. Whitford.

The role of physician extenders is to care for patients when the primary physician is not available or to provide care for patients who cannot afford the services of a primary care physician. The role of the physician assistant is to care for patients when the primary physician is not available or to provide care for patients who cannot afford the services of a primary care physician.

Physician assistants are licensed to practice medicine in all 50 states and the District of Columbia. They are supervised by a physician, who is responsible for their medical judgment and decision-making.

Teamwork

Salyer, along with 20 other PAs, practice at the Emergency Center at University Hospital in San Antonio, a Level 1 Trauma Center. A PA, or physician extenders as they are known, work with a team of security, nurses, and physicians to provide care for patients. The PA role is to provide care in a timely and efficient manner.

**THE FUTURE**

"PAs are going to be utilized more. It's economics, PAs are more cost-effective than physicians," says Salyer.

People used to study to be doctors because it was the road to wealth. "Not anymore," says Salyer.

Approximately 62% of PAs in the U.S. are women.

Jennifer Jarrel, who works at University Hospital, is one of the growing number of women PAs.

Dr. Whitford: "Insurance companies have been doing this. We have a physician shortage. It makes sense to employ PAs."

The physician shortage is due to several factors, e.g., doctors increasingly want to work fewer hours and are going into more specialties, like radiology. Physicians are also retiring in family practice or obstetrics in increasing numbers.

As for making economic sense to employ PAs, the salary limit for physician assistants depends on experience and time in practice as well as if they are self-employed and work for someone. The median salary is for $65,000 to $75,000 according to a 2006 AAFP Physician Assistant Census Survey. In 2008, the median salary for physician assistants was reported to be $84,000.

The Texas Academy of Physician Assistants is working on legislative initiatives that can increase reimbursement for PAs. Physician assistants work under the supervision of a physician. The billing is done through the physician. However,放大这个图，我可以看到更详细的内容。