



What's In a Name?

Edw. C. Lopez, PA-C, C.P.M.M.

A title or a name may imply a specific rank, family, designation, or station and the implied information provided by that name may be correct and embraced at the time when assigned. Over time, a title may evolve and lose its identity.

In the 1960's as the United States of America was embroiled in a war in Southeast Asia that proved to be one of our least distinguished historical foreign policy moments. There was a group of young men returning home from that war, lucky enough to have survived but who's role while there was not to shoot and kill but to save lives. These young men carried out this mission by caring for those who were sick and injured during the dangerous and life-threatening ravages of jungle warfare as Army Medics and Navy Corpsman.

After returning home from that experience, these veterans wondered, what job could they pursue that could use that experience and training in the civilian world.

At the same time in North Carolina a physician and Chairman of the Department of Medicine at Duke University became keenly aware that a large population of that state's citizenry lived in rural areas throughout the state and had little access to care. The Duke Medical Center was experiencing an acute shortage of qualified clinical staff to run day to day clinical operations at the facility. Hearing of these veterans being discharged with exceptional experience in combat medical training and no way to use this experience but to possibly work as "orderlies" at the VA Hospitals, this physician came up with an idea that might serve everyone for the best.

And thus in 1965 Drs. Eugene Stead and Henry McIntosh, director of the Cardiac Care Unit at Duke Medical Center developed an abbreviated two-year medical school education. Four former military Corpsman were accepted to train on a parallel track with the Duke University Medical students, building on their previous years

of education, training and experience with the sole responsibility to fill the clinical staffing void at Duke. Eventually this training would help care for the rural underserved communities of North Carolina- resulting in the creation of a new U.S. profession. In his letter to the Duke Medical Center Board of Directors dated September 24, 1964, Dr. Stead announced, "The Department of Medicine of Duke University Medical Center is establishing a program to create a new position in the health field. We have chosen to call these individuals 'Physician Assistant'. They will be capable of extending the arms and brains of the physician, so that he can care for more people."

Today, 57 years after the first three graduating "PAs" put on their white lab coats and name tags, the U.S. has evolved into a very different place in many ways and while perhaps some would say we have changed for the better, others would say we still have many challenges and obstacles before us. But what is undeniable is that as of the latest 2023 census 207,000 PAs have earned National Board certification since 1975 with over 178,000 currently board certified. Today, 126,634 state licensed PAs are graduating from over 300 medical schools and university PA programs nationwide. PAs are working worldwide in every specialty and clinical role imaginable including primary care clinics in rural America, cardiac transplant centers in our major cities, in the U.S. State Dept., in the White House caring for presidential staff, as forensic medical investigators and as hospital department CEO's.

***What's in a Name?
That which we call a
rose by any other
name would smell as
sweet.***

- William Shakespeare



PA News - What's in a Name

With the evolution of this profession has come a close self examination of its title and its name. As the profession has evolved, there has been a voice, soft and quiet at first and each year becoming louder that the name, "Physician Assistant" has outgrown itself, become outdated and clearly misrepresents what the profession is in the 21st Century while it is quickly evolving as it strives to help meet the healthcare manpower needs of America and beyond. And so, after many years of debate, self-examination and counsel, the AAPA in their 2021 annual House of Delegates conference voted 198 to 68 in favor of adopting a name change of the profession to "Physician Associate". Needless to say, this has made most PAs very happy as they believe that this "Name" of their profession more accurately describes, reflects and portrays who they are and what their role is in America's healthcare system without changing the "PA" moniker. However, what is also true is that like any cultural or professional changes in society, some will resist, deny or push back the tide of change for a variety of legitimate or even spurious reasons.

With this professional enthusiasm and excitement, many PAs around the country have decided to embrace this new "name" or "title" or "designation" including several states who have or are planning to submit new state legislation to change their designation of their professional title to "Physician Associate". Oregon, our neighbor to the south, has successfully agreed to make that legal name change. However, what must be remembered, is that while a professional organization may decide to change a title, professional designation or a profession's name, PAs by all 50 state licensing laws are not regulated by professional organizations, political action committees or social movements. PAs are defined and regulated by individual state laws and statutes, and this includes the professional designation which includes the name or title.

In the state of Washington that statute can be found in the Washington Administration Code WAC 246-918-130 as well as RCW 18.71A.010 (4). The WAC outlines requirements to initially license and maintain PA licensure while endorsing and supporting the current PA name and title.

At the same time, it has been and continues to be the role of the Washington Medical Commission (WMC) to "protect the public by ensuring quality healthcare is provided by physicians and physician assistants. The WMC establishes and enforces qualifications for licensure, consistent standards of practice and continuing competency. The WMC currently regulates about 34,000 licenses, more than 3,000 of which are PA's."

In conclusion, the WMC is aware of the evolution of healthcare practices and most professional decisions made by the Physician and Physician Assistant professions both in Washington state and nationally. We continue to closely monitor those decisions as they come up. However, the WMC recognizes that our statutory and legal responsibility and authority is to uphold and support the law as written in our state relating to our licensees while striving to protect the public health of our citizens. We will continue to do so until the law and regulations mandate us to do otherwise. Therefore, we currently take no position regarding the PA profession name change, reminding all Washington State PAs that the current professional licensed title and professional designation for PAs in Washington state is "Physician Assistant".

New Profession - Anesthesiologist Assistants

The WMC filed a CR-101, Preproposal Statement of Inquiry, to establish licensing regulations for anesthesiologist assistants in response to Senate Bill (SB) 5184 (Chapter 362, Laws of 2024) codified in chapter 18.71D RCW. The CR-101 was filed on August 28, 2024, as WSR #24-18-057. The WMC will hold workshops for this rulemaking in the coming months. To provide comments on this rulemaking, please visit the [website linked here](#).