

MAINE STATE LEGISLATURE

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May 12, 1947

To Adam P. Leighton, M. D., Secretary
Board of Registration of Medicine

I have your letter of May 9th in which you state that you have in mind that illegality is creeping into the present-day practice of physicians and surgeons of Maine. It is true that during the war, when there was a scarcity of medical men, they had to rely upon nurses to assist them in their surgical operations. You state in your letter that now that the war is over, the habit not only has continued, but seems to have spread, to the end that too many doctors are hiring graduate nurses to help at the operating tables and oversee much of the post-operative treatment, doing dressings and taking care of the patients medically. You request me to look up the medical practice act of Maine and tell you if this is not illegal and contrary to the law.

I have checked over the provisions of Chapter 61 of the Revised Statutes, relating to the registration of physicians and surgeons and the promotion of medical education, and I have also looked over Chapter 68, which prohibits the practice of any healing art or science without first meeting the requirements of one of the following examination boards: 1) Registration of Medicine; 2) Registration of Nurses; 3) Registration of Dentists; 4) Registration of Osteopaths; 5) Registration of Chiropractors; 6) Registration of Pediatricians, and having been legally licensed by one of said boards.

You can plainly see that registered nurses have a right to practise under the direction of a regular M. D. the work which you mention in your letter, that is, assisting at the operating table, looking after the post-operative treatment and doing the dressings. In practice, of course, this is done under the direction of the staff physicians and surgeons; and in private practice of course graduate licensed nurses are assisting doctors in post-operative care.

I do not feel that this is illegal or contrary to law, providing the registered physician has supervision of the registered nurse in doing this work. About the only way that your Board could act would be upon complaint from someone against a registered M. D. who is violating the activities of the physicians and surgeons' Law, in that he is turning these cases absolutely over to a registered nurse and not supervising the operations and after-care. I do not know of any physician who has delegated a registered nurse to operate upon a patient, that is, actually use the scalpel. However, of course, the nurse must stand by to assist, hand instruments to the surgeon as he calls for them, and also do dressings and solutions which he calls for. Of course, he must rely somewhat upon the nurse in charge of the patient as to post-operative care.

Any complaint to your office should be that the doctor is not supervising the operative procedure in the operating room and the after-care of the patient upon whom he has operated. Of course, as you know, a registered nurse cannot practise medicine; but there is a borderline as to how far she can go under the direction of a registered M. D. in the after-care of post-operative cases; and, as a lawyer, I should not care to say where that borderline is. You, as a surgeon with many years' experience, are much better qualified than I to pass upon each individual case that comes to you.

If this complaint that came to you on May 9th is one which should be investigated, that is, one where the doctor has not supervised the care of his patient after an operation, I feel that it is your duty to look into it and perhaps notify your attorney or the attorney for the insurance company which should indemnify the physicians as county associations.

As far as this office is concerned, you may rest assured that I am ready to go along and assist you and the Board in any way that I can. . .

Ralph W. Farris
Attorney General

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