Physician associate title and introduction
guidance for PAs, supervisors, employers and organisations

The Faculty of Physician Associates has created this guidance to provide clarity around the role of physician associates (PAs). It provides practical examples of how physician associates should describe their role and is aimed at increasing understanding for patients, employers, other healthcare professionals and the public.

Who are physician associates?

Physician associates (PAs) are healthcare professionals who work as part of a multidisciplinary team under the supervision of a named senior doctor (a General Medical Council (GMC)-registered consultant or GP). While they are not medical doctors, PAs can assess, diagnose and treat patients in primary, secondary and community care environments within their scope of practice.

Medical associate professions (MAPs)

PAs are part of NHS England’s MAPs workforce grouping. PAs have been part of the healthcare workforce for 20 years. MAPs add to the breadth of skills within multidisciplinary teams, to help meet the needs of patients and enable more care to be delivered in clinical settings. PAs do not fall under the allied health professions (AHPs) or advanced practice groups.

Titles and introductions

It is important that PAs take all reasonable steps to inform patients and staff of their role and to avoid confusion of roles. This includes considering the potential for verbal and written role titles to be misunderstood and taking the time to explain their role in any clinical interaction.

Guidance

It is our view that, when a PA introduces themselves to a patient or staff member, they must make it clear at the start of the interaction that they are a physician associate, as well as explain the use of the term ‘PA’ as a recognised abbreviation of the title.

PAs should offer patients and staff the opportunity to enquire more about their role, taking sufficient time to explain the role, including their training, qualifications, that they are not a doctor and that they work under the supervision of a named senior doctor, and within a consultant/GP and employer approved scope of practice.

The time required for this to take place in sufficient detail should be factored into any patient consultation times.

PAs must correct patients and staff if they refer to them as a registered doctor, nurse or other professionally protected role title. This includes verbal, written and other forms of communication.
We recommend that PAs, employers and organisations should not use the following terminology when referring to PAs and the PA profession:

- trainee
- foundation
- specialist/specialty
- consultant.

Initial introduction

The FPA has provided an example of an initial introduction that PAs may wish to use within their clinical practice:

‘Hello, my name is [Forename Surname] and I am one of the physician associates working in [specialty]. Physician associates are commonly referred to as PAs. I work alongside the doctors, but I am not a doctor.

Titles

The FPA does not recommend the use of prefixes in clinical interactions, clinical notes or clinic letters.

PAs must always use the full title ‘physician associate’ when they first interact with a patient or staff member, followed by the abbreviation PA, followed by the specialty in which they work. This is to ensure that patients hear and know the role title and abbreviation first, followed by the specialty area they are working in.

PAs must not use protected titles or abbreviations which may imply that they are registered with the GMC as a medical doctor. Please see Appendix 1 for protected titles under the Medical Act (1983).

PAs must not use the prefix ‘Dr’ or title ‘doctor’ in any clinical environment or interaction with patients. This could be confusing or misleading for a patient.

‘Doctor of medicine’ is a legally protected title and the public would reasonably assume that anyone introducing themselves as ‘doctor’ in a healthcare setting meant a ‘doctor of medicine’. This is also the case in non-clinical settings when providing care; for example, if a PA is providing first aid.

As well as verbal interactions, our guidance applies to written clinical notes, clinic letters, clinical websites (eg GP practice website), social media platforms where people identify themselves as a PA, or any work relating to their clinical practice and/or interactions with patients.

PAs who hold an accredited and recognised level 8 equivalent doctorate degree and work in academia are entitled to use the prefix ‘Dr’ or title ‘Doctor’ when working in an academic context/environment. The FPA advises that PAs using the prefix ‘Dr’ in an academic setting should also use their postnominal qualification to clearly identify their qualification.

PAs should not use prefixes such as Mr/Mrs/Ms/Mx in any verbal clinical interaction with patients, written clinical notes, clinic letters, clinical websites (eg GP practice website), social media platforms where they identify themselves as a PA, or any work relating to their clinical practice interacting with patients. This is a prefix that is traditionally associated with a surgeon in clinical settings in the UK and could be confusing or misleading for a patient.
PAs should not use titles or abbreviations that may confuse patients about their role (eg ‘GP physician associate’, ‘GP PA’, ‘PA surgeon’).

**Standardisation**

PAs should adopt a standardised way of using their professional title. The FPA recommends that all PAs use the template below:

**Forename Surname, Postnominals**  
**Physician Associate in Specialty**  
**Register: Registration number** *(currently MVR, see * below for planned future GMC registration)*  
**Employer Name**

**Examples:**

Sushmita Chatterjee MSc  
Physician Associate in General Practice  
PAMVR: 99998*  
Named Primary Care Network/Practice

James Smith PGCert  
Physician Associate in Emergency Medicine  
PAMVR: 99999*  
Named NHS Foundation Trust

*At the time that the GMC opens a register for PAs, those who gain GMC registration should include their GMC number below their title in replacement of their PAMVR number, as outlined above.

**Comparison to other professions**

PAs are not medical doctors and are trained to provide care as a PA, with supervision from a senior doctor (GMC-registered consultant or GP). The FPA is aware that non-doctor healthcare professionals have previously been compared to the seniority level of a doctor, and that PAs have been compared to this and other professional groups from an organisational perspective. Examples have included referring to PAs as working at ‘FY1’, ‘senior house officer (SHO)’ or ‘registrar’ level. The FPA recommends against this for PAs.

PAs work across the breadth of healthcare, providing care to patients and supporting the wider multidisciplinary team. PAs are not in a postgraduate medical training programme and are commonly employed to work in a set specialty area. The tasks and responsibilities of a PA working in one specialty area may differ from those of a PA in another, making it difficult and potentially confusing to make any comparison to traditional medical or professional hierarchies. The FPA does not believe that it is helpful or effective to compare PAs to a set seniority level of a doctor or another professional group.

The FPA will soon be publishing a career development pathway for PAs, which will detail the potential seniority levels to which a PA could progress and the expectations of each level. The FPA recommends that PAs, employers and organisations use the FPA Career Development Pathway when explaining PA roles and seniority.
Appendix 1

Medical Act (1983)

The Medical Act (1983) governs the regulation and credentials of medical doctors in the UK and defines offences in respect of unregistered and unlicensed practice.

Medical doctors practising medicine in the UK must have a licence to practise and registration with the GMC. It is illegal for anyone to claim or infer that they are registered with the GMC as a medical doctor when they are not.

Under the Medical Act, it is illegal for someone to falsely use the following protected titles to imply that they are a registered medical practitioner if they are not:

- doctor of medicine
- general practitioner (GP)
- surgeon
- physician
- licentiate in medicine and surgery
- bachelor of medicine
- apothecary
- any name, title or description implying that they are registered as a medical doctor with the GMC.

The GMC makes it clear that ‘The title Doctor on its own is not a protected title as it can be an academic qualification (eg a PhD), not always linked to the practice of medicine. Therefore, a person can legitimately use the title Doctor without needing registration with us, as long as they are not practising medicine or claiming to have registration with us.’