## 2006 SESSION

**ENROLLED** 

## VIRGINIA ACTS OF ASSEMBLY - CHAPTER

2 An Act to amend and reenact §§ 54.1-3303 and 54.1-3408 of the Code of Virginia and to amend the 3 Code of Virginia by adding a section numbered 32.1-126.4, relating to standing orders or protocols 4 in hospitals for certain vaccinations.

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## Approved

[H 851]

7 Be it enacted by the General Assembly of Virginia:

8 1. That §§ 54.1-3303 and 54.1-3408 of the Code of Virginia are amended and reenacted and the 9 Code of Virginia is amended by adding a section numbered 32.1-126.4 as follows:

10 § 32.1-126.4. Hospital standing orders or protocols for certain vaccinations.

11 A. A hospital may provide or arrange for the administration under a standing order or protocol 12 approved by a member or committee of the hospital's medical staff of (i) influenza vaccinations and (ii) 13 pneumococcal vaccinations, thus waiving the requirement for specific written physician orders for influenza and pneumococcal immunizations. However, no such standing order or protocol shall 14 15 supersede a physician's authority to issue specific written orders relating to immunizations.

B. Any standing order or protocol authorized by this section shall require that the vaccinations be 16 17 administered in accordance with the most recent recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention after (i) ascertaining that the 18 19 vaccination is not medically contraindicated for the patient, (ii) determining the patient's wishes and any 20 religious objections, and (iii) obtaining informed consent from the patient or his legal representative.

21 C. Vaccinations administered under a standing order or protocol shall be documented in the patient's 22 health record.

23 § 54.1-3303. Prescriptions to be issued and drugs to be dispensed for medical or therapeutic purposes 24 only.

25 A. A prescription for a controlled substance may be issued only by a practitioner of medicine, 26 osteopathy, podiatry, dentistry or veterinary medicine who is authorized to prescribe controlled 27 substances, or by a licensed nurse practitioner pursuant to § 54.1-2957.01, a licensed physician assistant pursuant to § 54.1-2952.1, or a TPA-certified optometrist pursuant to Article 5 (§ 54.1-3222 et seq.) of 28 29 Chapter 32 of this title. The prescription shall be issued for a medicinal or therapeutic purpose and may 30 be issued only to persons or animals with whom the practitioner has a bona fide practitioner-patient 31 relationship.

32 For purposes of this section, a bona fide practitioner-patient-pharmacist relationship is one in which a 33 practitioner prescribes, and a pharmacist dispenses, controlled substances in good faith to his patient for 34 a medicinal or therapeutic purpose within the course of his professional practice. In addition, a bona fide 35 practitioner-patient relationship means that the practitioner shall (i) ensure that a medical or drug history is obtained; (ii) provide information to the patient about the benefits and risks of the drug being 36 37 prescribed; (iii) perform or have performed an appropriate examination of the patient, either physically or by the use of instrumentation and diagnostic equipment through which images and medical records 38 39 may be transmitted electronically; except for medical emergencies, the examination of the patient shall 40 have been performed by the practitioner himself, within the group in which he practices, or by a 41 consulting practitioner prior to issuing a prescription; and (iv) initiate additional interventions and 42 follow-up care, if necessary, especially if a prescribed drug may have serious side effects. Any 43 practitioner who prescribes any controlled substance with the knowledge that the controlled substance will be used otherwise than medicinally or for therapeutic purposes shall be subject to the criminal 44 45 penalties provided in § 18.2-248 for violations of the provisions of law relating to the distribution or possession of controlled substances. 46

47 B. In order to determine whether a prescription that appears questionable to the pharmacist results 48 from a bona fide practitioner-patient relationship, the pharmacist shall contact the prescribing practitioner 49 or his agent and verify the identity of the patient and name and quantity of the drug prescribed. The 50 person knowingly filling an invalid prescription shall be subject to the criminal penalties provided in § 18.2-248 for violations of the provisions of law relating to the sale, distribution or possession of 51 52 controlled substances.

53 No prescription shall be filled unless there is a bona fide practitioner-patient-pharmacist relationship. 54 A prescription not issued in the usual course of treatment or for authorized research is not a valid 55 prescription.

56 C. A pharmacist may dispense a controlled substance pursuant to a prescription of an out-of-state HB851ER

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practitioner of medicine, osteopathy, podiatry, dentistry or veterinary medicine authorized to issue such 57 58 prescription if the prescription complies with the requirements of this chapter and Chapter 34 59 (§ 54.1-3400 et seq.) of this title, known as the "Drug Control Act."

60 D. A licensed nurse practitioner who is authorized to prescribe controlled substances pursuant to 61 § 54.1-2957.01 may issue prescriptions or provide manufacturers' professional samples for controlled 62 substances and devices as set forth in Chapter 34 of this title in good faith to his patient for a medicinal 63 or therapeutic purpose within the scope of his professional practice.

64 E. A licensed physician assistant who is authorized to prescribe controlled substances pursuant to 65 § 54.1-2952.1 may issue prescriptions or provide manufacturers' professional samples for controlled 66 substances and devices as set forth in Chapter 34 of this title in good faith to his patient for a medicinal 67 or therapeutic purpose within the scope of his professional practice.

68 F. A TPA-certified optometrist who is authorized to prescribe controlled substances pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 of this title may issue prescriptions in good faith or 69 provide manufacturers' professional samples to his patients for medicinal or therapeutic purposes within 70 71 the scope of his professional practice for the drugs specified on the TPA-Formulary, established pursuant 72 to § 54.1-3223, which shall be limited to (i) oral analgesics included in Schedules III through VI, as 73 defined in §§ 54.1-3450 and 54.1-3455 of the Drug Control Act (§ 54.1-3400 et seq.), which are 74 appropriate to relieve ocular pain, (ii) other oral Schedule VI controlled substances, as defined in 75 § 54.1-3455 of the Drug Control Act, appropriate to treat diseases and abnormal conditions of the human 76 eye and its adnexa, (iii) topically applied Schedule VI drugs, as defined in § 54.1-3455 of the Drug 77 Control Act, and (iv) intramuscular administration of epinephrine for treatment of emergency cases of 78 anaphylactic shock.

79 G. The requirement for a bona fide practitioner-patient relationship shall be deemed to be satisfied 80 by a member or committee of a hospital's medical staff when approving a standing order or protocol for 81 the administration of influenza vaccinations and pneumococcal vaccinations in a hospital in compliance 82 with § 32.1-126.4. 83

§ 54.1-3408. Professional use by practitioners.

84 A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or a licensed 85 nurse practitioner pursuant to § 54.1-2957.01, a licensed physician assistant pursuant to § 54.1-2952.1, or a TPA-certified optometrist pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 of this title shall 86 87 only prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic 88 purposes within the course of his professional practice.

89 B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral 90 prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may cause them to be administered by a nurse, physician assistant or intern under his direction and 91 92 supervision, or he may prescribe and cause drugs and devices to be administered to patients in state-owned or state-operated hospitals or facilities licensed as hospitals by the Board of Health or 93 94 psychiatric hospitals licensed by the State Mental Health, Mental Retardation and Substance Abuse 95 Services Board by other persons who have been trained properly to administer drugs and who administer 96 drugs only under the control and supervision of the prescriber or a pharmacist or a prescriber may cause 97 drugs and devices to be administered to patients by emergency medical services personnel who have 98 been certified and authorized to administer such drugs and devices pursuant to Board of Health 99 regulations governing emergency medical services and who are acting within the scope of such certification. A prescriber may authorize a licensed respiratory care practitioner as defined in 100 101 § 54.1-2954 to administer by inhalation controlled substances used in inhalation or respiratory therapy.

102 C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may 103 104 authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used 105 in the diagnosis or treatment of disease.

106 D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 107 course of his professional practice, such prescriber may authorize registered nurses and licensed practical 108 nurses to possess (i) epinephrine for administration in treatment of emergency medical conditions and 109 (ii) heparin and sterile normal saline to use for the maintenance of intravenous access lines.

110 Pursuant to the regulations of the Board of Health, certain emergency medical services technicians 111 may possess and administer epinephrine in emergency cases of anaphylactic shock.

112 E. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course 113 of his professional practice, such prescriber may authorize licensed physical therapists to possess and 114 administer topical corticosteroids, topical lidocaine, and any other Schedule VI topical drug.

115 F. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course 116 of his professional practice, such prescriber may authorize licensed athletic trainers to possess and administer topical corticosteroids, topical lidocaine, or other Schedule VI topical drugs, or to possess and 117

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**118** administer epinephrine for use in emergency cases of anaphylactic shock.

119 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 120 course of his professional practice, and in accordance with policies and guidelines established by the Department of Health pursuant to § 32.1-50.2, such prescriber may authorize registered nurses or 121 122 licensed practical nurses under the immediate and direct supervision of a registered nurse to possess and 123 administer tuberculin purified protein derivative (PPD) in the absence of a prescriber. The Department of 124 Health's policies and guidelines shall be consistent with applicable guidelines developed by the Centers 125 for Disease Control and Prevention for preventing transmission of mycobacterium tuberculosis and shall 126 be updated to incorporate any subsequently implemented standards of the Occupational Safety and 127 Health Administration and the Department of Labor and Industry to the extent that they are inconsistent 128 with the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe the categories of persons to whom the tuberculin test is to be administered and shall provide for 129 130 appropriate medical evaluation of those in whom the test is positive. The prescriber shall ensure that the 131 nurse implementing such standing protocols has received adequate training in the practice and principles 132 underlying tuberculin screening.

133 The Health Commissioner or his designee may authorize registered nurses, acting as agents of the 134 Department of Health, to possess and administer, at the nurse's discretion, tuberculin purified protein 135 derivative (PPD) to those persons in whom tuberculin skin testing is indicated based on protocols and 136 policies established by the Department of Health.

137 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 138 professional practice, such prescriber may authorize, with the consent of the parents as defined in 139 § 22.1-1, an employee of a school board who is trained in the administration of insulin and glucagon to 140 assist with the administration of insulin or administer glucagon to a student diagnosed as having diabetes and who requires insulin injections during the school day or for whom glucagon has been prescribed for 141 142 the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed 143 nurse, nurse practitioner, physician or physician assistant is not present to perform the administration of 144 the medication.

I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is not physically present, (i) by licensed pharmacists, (ii) by registered nurses, or (iii) licensed practical nurses under the immediate and direct supervision of a registered nurse. A prescriber acting on behalf of and in accordance with established protocols of the Department of Health may authorize the administration of vaccines to any person by a pharmacist or nurse when the prescriber is not physically present.

152 J. A dentist may cause Schedule VI topical drugs to be administered under his direction and 153 supervision by either a dental hygienist or by an authorized agent of the dentist.

Further, pursuant to a written order and in accordance with a standing protocol issued by the dentist in the course of his professional practice, a dentist may authorize a dental hygienist under his general supervision, as defined in § 54.1-2722, to possess and administer topical oral fluorides, topical oral anesthetics, topical and directly applied antimicrobial agents for treatment of periodontal pocket lesions, as well as any other Schedule VI topical drug approved by the Board of Dentistry.

159 K. (For expiration date - See Editor's note) This section shall not prevent the administration of drugs 160 by a person who has satisfactorily completed a training program for this purpose approved by the Board 161 of Nursing and who administers such drugs in accordance with a physician's instructions pertaining to 162 dosage, frequency, and manner of administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to security and record keeping, when the drugs administered would be 163 164 normally self-administered by (i) a resident of a facility licensed or certified by the State Mental Health, Mental Retardation and Substance Abuse Services Board; (ii) a resident of any assisted living facility 165 which is licensed by the Department of Social Services; (iii) a resident of the Virginia Rehabilitation 166 Center for the Blind and Vision Impaired; (iv) a resident of a facility approved by the Board or 167 168 Department of Juvenile Justice for the placement of children in need of services or delinquent or alleged 169 delinquent youth; (v) a program participant of an adult day-care center licensed by the Department of 170 Social Services; or (vi) a resident of any facility authorized or operated by a state or local government 171 whose primary purpose is not to provide health care services.

K. (For effective date - see Editor's note) This section shall not prevent the administration of drugs
by a person who has satisfactorily completed a training program for this purpose approved by the Board
of Nursing and who administers such drugs in accordance with a physician's instructions pertaining to
dosage, frequency, and manner of administration, and in accordance with regulations promulgated by the
Board of Pharmacy relating to security and record keeping, when the drugs administered would be
normally self-administered by (i) a resident of a facility licensed or certified by the Department of
Mental Health, Mental Retardation and Substance Abuse Services; (ii) a resident of the Virginia

179 Rehabilitation Center for the Blind and Vision Impaired; (iii) a resident of a facility approved by the
180 Board or Department of Juvenile Justice for the placement of children in need of services or delinquent
181 or alleged delinquent youth; (iv) a program participant of an adult day-care center licensed by the
182 Department of Social Services; or (v) a resident of any facility authorized or operated by a state or local
183 government whose primary purpose is not to provide health care services.

184 L. (For effective date - see Editor's note) Medication aides registered by the Board of Nursing 185 pursuant to Article 7 (§ 54.1-3041 et seq.) of Chapter 30 may administer drugs that would otherwise be 186 self-administered to residents of any assisted living facility licensed by the Department of Social 187 Services. A registered medication aide shall administer drugs pursuant to this section in accordance with 188 the prescriber's instructions pertaining to dosage, frequency, and manner of administration; in accordance 189 with regulations promulgated by the Board of Pharmacy relating to security and recordkeeping; in 190 accordance with the assisted living facility's Medication Management Plan; and in accordance with such 191 other regulations governing their practice promulgated by the Board of Nursing.

M. In addition, this section shall not prevent the administration of drugs by a person who administers such drugs in accordance with a physician's instructions pertaining to dosage, frequency, and manner of administration and with written authorization of a parent, and in accordance with school board regulations relating to training, security and record keeping, when the drugs administered would be normally self-administered by a student of a Virginia public school. Training for such persons shall be accomplished through a program approved by the local school boards, in consultation with the local departments of health.

199 N. In addition, this section shall not prevent the administration or dispensing of drugs and devices by 200 persons if they are authorized by the State Health Commissioner in accordance with protocols 201 established by the State Health Commissioner pursuant to § 32.1-42.1 when (i) the Governor has 202 declared a disaster or a state of emergency caused by an act of terrorism or the United States Secretary 203 of Health and Human Services has issued a declaration of an actual or potential bioterrorism incident or 204 other actual or potential public health emergency; (ii) it is necessary to permit the provision of needed 205 drugs or devices; and (iii) such persons have received the training necessary to safely administer or 206 dispense the needed drugs or devices. Such persons shall administer or dispense all drugs or devices 207 under the direction, control and supervision of the State Health Commissioner.

208 O. Nothing in this title shall prohibit the administration of normally self-administered oral or topical209 drugs by unlicensed individuals to a person in his private residence.

P. This section shall not interfere with any prescriber issuing prescriptions in compliance with his authority and scope of practice and the provisions of this section to a Board agent for use pursuant to subsection G of § 18.2-258.1. Such prescriptions issued by such prescriber shall be deemed to be valid prescriptions.

O. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care 214 215 technicians who are certified by an organization approved by the Board of Health Professions pursuant 216 to Chapter 27.01 (§ 54.1-2729.1 et seq.) of this title, in the ordinary course of their duties in a 217 Medicare-certified renal dialysis facility, from administering heparin, topical needle site anesthetics, 218 dialysis solutions, sterile normal saline solution, and blood volumizers, for the purpose of facilitating 219 renal dialysis treatment, when such administration of medications occurs under the orders of a licensed 220 physician, nurse practitioner or physician assistant and under the immediate and direct supervision of a 221 licensed registered nurse.

The dialysis care technician or dialysis patient care technician administering the medications shall have demonstrated competency as evidenced by holding current valid certification from an organization approved by the Board of Health Professions pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.) of this title.

**226** *R. Persons who are otherwise authorized to administer controlled substances in hospitals shall be authorized to administer influenza or pneumococcal vaccines pursuant to § 32.1-126.4.*