## 2007 SESSION

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HOUSE BILL NO. 2037
AMENDMENT IN THE NATURE OF A SUBSTITUTE
(Proposed by the House Committee on Health, Welfare and Institutions
on January 16, 2007)
(Patron Prior to Substitute — Delegate Hamilton)

A BILL to amend and reenact § 54.1-3408 of the Code of Virginia, relating to professional use by
practitioners.
Be it enacted by the General Assembly of Virginia:

That § 54.1-3408 of the Code of Virginia is amended and reenacted as follows:
§ 54.1-3408. Professional use by practitioners.

A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or 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 Chapter 32 of this title shall

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
only prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic
purposes within the course of his professional practice.
B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral

17 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 18 supervision, or he may prescribe and cause drugs and devices to be administered to patients in 19 20 state-owned or state-operated hospitals or facilities licensed as hospitals by the Board of Health or 21 psychiatric hospitals licensed by the State Mental Health, Mental Retardation and Substance Abuse 22 Services Board by other persons who have been trained properly to administer drugs and who administer 23 drugs only under the control and supervision of the prescriber or a pharmacist or a prescriber may cause drugs and devices to be administered to patients by emergency medical services personnel who have 24 been certified and authorized to administer such drugs and devices pursuant to Board of Health 25 regulations governing emergency medical services and who are acting within the scope of such 26 27 certification. A prescriber may authorize a licensed respiratory care practitioner as defined in 28 § 54.1-2954 to administer by inhalation controlled substances used in inhalation or respiratory therapy.

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
authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used
in the diagnosis or treatment of disease.

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

37 Pursuant to the regulations of the Board of Health, certain emergency medical services technicians38 may possess and administer epinephrine in emergency cases of anaphylactic shock.

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

F. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course
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
administer epinephrine for use in emergency cases of anaphylactic shock.

G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 46 47 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 **48** 49 licensed practical nurses under the immediate and direct supervision of a registered nurse to possess and administer tuberculin purified protein derivative (PPD) in the absence of a prescriber. The Department of 50 51 Health's policies and guidelines shall be consistent with applicable guidelines developed by the Centers for Disease Control and Prevention for preventing transmission of mycobacterium tuberculosis and shall 52 53 be updated to incorporate any subsequently implemented standards of the Occupational Safety and 54 Health Administration and the Department of Labor and Industry to the extent that they are inconsistent with the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe 55 the categories of persons to whom the tuberculin test is to be administered and shall provide for 56 57 appropriate medical evaluation of those in whom the test is positive. The prescriber shall ensure that the nurse implementing such standing protocols has received adequate training in the practice and principles 58 59 underlying tuberculin screening.

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

64 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 65 professional practice, such prescriber may authorize, with the consent of the parents as defined in 66 § 22.1-1, an employee of a school board who is trained in the administration of insulin and glucagon to assist with the administration of insulin or administer glucagon to a student diagnosed as having diabetes 67 and who requires insulin injections during the school day or for whom glucagon has been prescribed for 68 the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed 69 70 nurse, nurse practitioner, physician or physician assistant is not present to perform the administration of 71 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.

**79** J. A dentist may cause Schedule VI topical drugs to be administered under his direction and 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.

In addition, a dentist may authorize a dental hygienist under his direction to administer Schedule VI
 nitrous oxide and oxygen inhalation analgesia and, to persons 18 years of age or older, Schedule VI
 local anesthesia.

89 K. (For expiration date - See Editor's note) This section shall not prevent the administration of drugs 90 by a person who has satisfactorily completed a training program for this purpose approved by the Board 91 of Nursing and who administers such drugs in accordance with a physician's instructions pertaining to 92 dosage, frequency, and manner of administration, and in accordance with regulations promulgated by the 93 Board of Pharmacy relating to security and record keeping, when the drugs administered would be 94 normally self-administered by (i) a resident of a facility licensed or certified by the State Mental Health, 95 Mental Retardation and Substance Abuse Services Board; (ii) a resident of any assisted living facility 96 which is licensed by the Department of Social Services; (iii) a resident of the Virginia Rehabilitation 97 Center for the Blind and Vision Impaired; (iv) a resident of a facility approved by the Board or 98 Department of Juvenile Justice for the placement of children in need of services or delinquent or alleged 99 delinquent youth; (v) a program participant of an adult day-care center licensed by the Department of 100 Social Services; or (vi) a resident of any facility authorized or operated by a state or local government whose primary purpose is not to provide health care services. 101

102 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 103 104 of Nursing and who administers such drugs in accordance with a physician's instructions pertaining to 105 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 106 normally self-administered by (i) a resident of a facility licensed or certified by the Department of 107 108 Mental Health, Mental Retardation and Substance Abuse Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision Impaired; (iii) a resident of a facility approved by the 109 110 Board or Department of Juvenile Justice for the placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program participant of an adult day-care center licensed by the 111 112 Department of Social Services; or (v) a resident of any facility authorized or operated by a state or local 113 government whose primary purpose is not to provide health care services.

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

129 N. In addition, this section shall not prevent the administration of drugs by a person to a child in a 130 child day program as defined in § 63.2-100 and regulated by the State Board of Social Services or the 131 Child Day Care Council, provided such person (i) has satisfactorily completed a training program for this purpose approved by the Board of Nursing and taught by a registered nurse, licensed practical 132 133 nurse, doctor of medicine or osteopathic medicine, or pharmacist; (ii) has obtained written authorization 134 from a parent or guardian; (iii) administers drugs only to the child identified on the prescription label in 135 accordance with the prescriber's instructions pertaining to dosage, frequency, and manner of 136 administration; and (iv) administers only those drugs that were dispensed from a pharmacy and 137 maintained in the original, labeled container that would normally be administered by a parent or 138 guardian to the child.

139 O. In addition, this section shall not prevent the administration or dispensing of drugs and devices by 140 persons if they are authorized by the State Health Commissioner in accordance with protocols 141 established by the State Health Commissioner pursuant to § 32.1-42.1 when (i) the Governor has 142 declared a disaster or a state of emergency caused by an act of terrorism or the United States Secretary 143 of Health and Human Services has issued a declaration of an actual or potential bioterrorism incident or 144 other actual or potential public health emergency; (ii) it is necessary to permit the provision of needed 145 drugs or devices; and (iii) such persons have received the training necessary to safely administer or 146 dispense the needed drugs or devices. Such persons shall administer or dispense all drugs or devices 147 under the direction, control and supervision of the State Health Commissioner.

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

Q. 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.

154 R. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care 155 technicians who are certified by an organization approved by the Board of Health Professions or persons 156 authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.) of this title, in the 157 ordinary course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, 158 topical needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for 159 the purpose of facilitating renal dialysis treatment, when such administration of medications occurs under 160 the orders of a licensed physician, nurse practitioner or physician assistant and under the immediate and direct supervision of a licensed registered nurse. Nothing in this chapter shall be construed to prohibit a 161 162 patient care dialysis technician trainee from performing dialysis care as part of and within the scope of the clinical skills instruction segment of a supervised dialysis technician training program, provided such 163 trainee is identified as a "trainee" while working in a renal dialysis facility. 164

165 The dialysis care technician or dialysis patient care technician administering the medications shall 166 have demonstrated competency as evidenced by holding current valid certification from an organization 167 approved by the Board of Health Professions pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.) of this 168 title.

169 S. Persons who are otherwise authorized to administer controlled substances in hospitals shall be 170 authorized to administer influenza or pneumococcal vaccines pursuant to § 32.1-126.4.

171 *T. Pursuant to a specific order for a patient and under his direct and immediate supervision, a* 172 prescriber may authorize the administration of controlled substances by personnel who have been 173 properly trained to assist a doctor of medicine or osteopathic medicine, provided the method does not 174 include intravenous, intrathecal, or epidural administration and the prescriber remains responsible for 175 such administration

175 such administration.