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HOUSE BILL NO. 1449

Offered January 11, 2017

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A *BILL to amend and reenact §§ 8.01-225 and 54.1-3408 of the Code of Virginia, relating to dispensing of naloxone.*

Patrons—Boysko, Bell, John J., LeMunyon, Cole, Filler-Corn, Hayes, Heretick, Hope, Kory, Krizek, Levine, Mullin, Murphy, Plum, Simon, Watts and Webert

Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:

1. That §§ 8.01-225 and 54.1-3408 of the Code of Virginia are amended and reenacted as follows:

§ 8.01-225. Persons rendering emergency care, obstetrical services exempt from liability.

A. Any person who:

1. In good faith, renders emergency care or assistance, without compensation, to any ill or injured person (i) at the scene of an accident, fire, or any life-threatening emergency; (ii) at a location for screening or stabilization of an emergency medical condition arising from an accident, fire, or any life-threatening emergency; or (iii) en route to any hospital, medical clinic, or doctor's office, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such care or assistance. For purposes of this subdivision, emergency care or assistance includes the forcible entry of a motor vehicle in order to remove an unattended minor at risk of serious bodily injury or death, provided the person has attempted to contact a law-enforcement officer, as defined in § 9.1-101, a firefighter, as defined in § 65.2-102, emergency medical services personnel, as defined in § 32.1-111.1, or an emergency 911 system, if feasible under the circumstances.

2. In the absence of gross negligence, renders emergency obstetrical care or assistance to a female in active labor who has not previously been cared for in connection with the pregnancy by such person or by another professionally associated with such person and whose medical records are not reasonably available to such person shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care or assistance. The immunity herein granted shall apply only to the emergency medical care provided.

3. In good faith and without compensation, including any emergency medical services provider who holds a valid certificate issued by the Commissioner of Health, administers epinephrine in an emergency to an individual shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment if such person has reason to believe that the individual receiving the injection is suffering or is about to suffer a life-threatening anaphylactic reaction.

4. Provides assistance upon request of any police agency, fire department, emergency medical services agency, or governmental agency in the event of an accident or other emergency involving the use, handling, transportation, transmission, or storage of liquefied petroleum gas, liquefied natural gas, hazardous material, or hazardous waste as defined in § 10.1-1400 or regulations of the Virginia Waste Management Board shall not be liable for any civil damages resulting from any act of commission or omission on his part in the course of his rendering such assistance in good faith.

5. Is an emergency medical services provider possessing a valid certificate issued by authority of the State Board of Health who in good faith renders emergency care or assistance, whether in person or by telephone or other means of communication, without compensation, to any injured or ill person, whether at the scene of an accident, fire, or any other place, or while transporting such injured or ill person to, from, or between any hospital, medical facility, medical clinic, doctor's office, or other similar or related medical facility, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care, treatment, or assistance, including but in no way limited to acts or omissions which involve violations of State Department of Health regulations or any other state regulations in the rendering of such emergency care or assistance.

6. In good faith and without compensation, renders or administers emergency cardiopulmonary resuscitation (CPR); cardiac defibrillation, including, but not limited to, the use of an automated external defibrillator (AED); or other emergency life-sustaining or resuscitative treatments or procedures which have been approved by the State Board of Health to any sick or injured person, whether at the scene of a fire, an accident, or any other place, or while transporting such person to or from any hospital, clinic, doctor's office, or other medical facility, shall be deemed qualified to administer such emergency treatments and procedures and shall not be liable for acts or omissions resulting from the rendering of such emergency resuscitative treatments or procedures.

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58 7. Operates an AED at the scene of an emergency, trains individuals to be operators of AEDs, or
59 orders AEDs, shall be immune from civil liability for any personal injury that results from any act or
60 omission in the use of an AED in an emergency where the person performing the defibrillation acts as
61 an ordinary, reasonably prudent person would have acted under the same or similar circumstances,
62 unless such personal injury results from gross negligence or willful or wanton misconduct of the person
63 rendering such emergency care.

64 8. Maintains an AED located on real property owned or controlled by such person shall be immune
65 from civil liability for any personal injury that results from any act or omission in the use in an
66 emergency of an AED located on such property unless such personal injury results from gross
67 negligence or willful or wanton misconduct of the person who maintains the AED or his agent or
68 employee.

69 9. Is an employee of a school board or of a local health department approved by the local governing
70 body to provide health services pursuant to § 22.1-274 who, while on school property or at a
71 school-sponsored event, (i) renders emergency care or assistance to any sick or injured person; (ii)
72 renders or administers emergency cardiopulmonary resuscitation (CPR); cardiac defibrillation, including,
73 but not limited to, the use of an automated external defibrillator (AED); or other emergency
74 life-sustaining or resuscitative treatments or procedures that have been approved by the State Board of
75 Health to any sick or injured person; (iii) operates an AED, trains individuals to be operators of AEDs,
76 or orders AEDs; or (iv) maintains an AED, shall not be liable for civil damages for ordinary negligence
77 in acts or omissions on the part of such employee while engaged in the acts described in this
78 subdivision.

79 10. Is a volunteer in good standing and certified to render emergency care by the National Ski Patrol
80 System, Inc., who, in good faith and without compensation, renders emergency care or assistance to any
81 injured or ill person, whether at the scene of a ski resort rescue, outdoor emergency rescue, or any other
82 place or while transporting such injured or ill person to a place accessible for transfer to any available
83 emergency medical system unit, or any resort owner voluntarily providing a ski patroller employed by
84 him to engage in rescue or recovery work at a resort not owned or operated by him, shall not be liable
85 for any civil damages for acts or omissions resulting from the rendering of such emergency care,
86 treatment, or assistance, including but not limited to acts or omissions which involve violations of any
87 state regulation or any standard of the National Ski Patrol System, Inc., in the rendering of such
88 emergency care or assistance, unless such act or omission was the result of gross negligence or willful
89 misconduct.

90 11. Is an employee of (i) a school board, (ii) a school for students with disabilities as defined in
91 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19
92 as administered by the Virginia Council for Private Education and is authorized by a prescriber and
93 trained in the administration of insulin and glucagon, who, upon the written request of the parents as
94 defined in § 22.1-1, assists with the administration of insulin or administers glucagon to a student
95 diagnosed as having diabetes who requires insulin injections during the school day or for whom
96 glucagon has been prescribed for the emergency treatment of hypoglycemia shall not be liable for any
97 civil damages for ordinary negligence in acts or omissions resulting from the rendering of such
98 treatment if the insulin is administered according to the child's medication schedule or such employee
99 has reason to believe that the individual receiving the glucagon is suffering or is about to suffer
100 life-threatening hypoglycemia. Whenever any such employee is covered by the immunity granted herein,
101 the school board or school employing him shall not be liable for any civil damages for ordinary
102 negligence in acts or omissions resulting from the rendering of such insulin or glucagon treatment.

103 12. Is a school nurse, an employee of a school board, an employee of a local governing body, or an
104 employee of a local health department who is authorized by a prescriber and trained in the
105 administration of epinephrine and who provides, administers, or assists in the administration of
106 epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber
107 of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions
108 resulting from the rendering of such treatment.

109 13. Is an employee of a school for students with disabilities, as defined in § 22.1-319 and licensed by
110 the Board of Education, or an employee of a private school that is accredited pursuant to § 22.1-19 as
111 administered by the Virginia Council for Private Education who is authorized by a prescriber and trained
112 in the administration of epinephrine and who administers or assists in the administration of epinephrine
113 to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber of the
114 epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions
115 resulting from the rendering of such treatment. Whenever any employee is covered by the immunity
116 granted in this subdivision, the school shall not be liable for any civil damages for ordinary negligence
117 in acts or omissions resulting from such administration or assistance.

118 14. Is an employee of a provider licensed by the Department of Behavioral Health and
119 Developmental Services, or provides services pursuant to a contract with a provider licensed by the

120 Department of Behavioral Health and Developmental Services, who has been trained in the
 121 administration of insulin and glucagon and who administers or assists with the administration of insulin
 122 or administers glucagon to a person diagnosed as having diabetes who requires insulin injections or for
 123 whom glucagon has been prescribed for the emergency treatment of hypoglycemia in accordance with
 124 § 54.1-3408 shall not be liable for any civil damages for ordinary negligence in acts or omissions
 125 resulting from the rendering of such treatment if the insulin is administered in accordance with the
 126 prescriber's instructions or such person has reason to believe that the individual receiving the glucagon is
 127 suffering or is about to suffer life-threatening hypoglycemia. Whenever any employee of a provider
 128 licensed by the Department of Behavioral Health and Developmental Services or a person who provides
 129 services pursuant to a contract with a provider licensed by the Department of Behavioral Health and
 130 Developmental Services is covered by the immunity granted herein, the provider shall not be liable for
 131 any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such
 132 insulin or glucagon treatment.

133 15. Is an employee of a provider licensed by the Department of Behavioral Health and
 134 Developmental Services, or provides services pursuant to a contract with a provider licensed by the
 135 Department of Behavioral Health and Developmental Services, who has been trained in the
 136 administration of epinephrine and who administers or assists in the administration of epinephrine to a
 137 person believed in good faith to be having an anaphylactic reaction in accordance with the prescriber's
 138 instructions shall not be liable for any civil damages for ordinary negligence in acts or omissions
 139 resulting from the rendering of such treatment.

140 16. In good faith prescribes, dispenses, or administers naloxone or other opioid antagonist used for
 141 overdose reversal in an emergency to an individual who is believed to be experiencing or about to
 142 experience a life-threatening opiate overdose shall not be liable for any civil damages for ordinary
 143 negligence in acts or omissions resulting from the rendering of such treatment if acting in accordance
 144 with the provisions of subsection X *or* Y of § 54.1-3408 or in his role as a member of an emergency
 145 medical services agency.

146 B. Any licensed physician serving without compensation as the operational medical director for an
 147 emergency medical services agency that holds a valid license as an emergency medical services agency
 148 issued by the Commissioner of Health shall not be liable for any civil damages for any act or omission
 149 resulting from the rendering of emergency medical services in good faith by the personnel of such
 150 licensed agency unless such act or omission was the result of such physician's gross negligence or
 151 willful misconduct.

152 Any person serving without compensation as a dispatcher for any licensed public or nonprofit
 153 emergency medical services agency in the Commonwealth shall not be liable for any civil damages for
 154 any act or omission resulting from the rendering of emergency services in good faith by the personnel
 155 of such licensed agency unless such act or omission was the result of such dispatcher's gross negligence
 156 or willful misconduct.

157 Any individual, certified by the State Office of Emergency Medical Services as an emergency
 158 medical services instructor and pursuant to a written agreement with such office, who, in good faith and
 159 in the performance of his duties, provides instruction to persons for certification or recertification as a
 160 certified basic life support or advanced life support emergency medical services provider shall not be
 161 liable for any civil damages for acts or omissions on his part directly relating to his activities on behalf
 162 of such office unless such act or omission was the result of such emergency medical services instructor's
 163 gross negligence or willful misconduct.

164 Any licensed physician serving without compensation as a medical advisor to an E-911 system in the
 165 Commonwealth shall not be liable for any civil damages for any act or omission resulting from
 166 rendering medical advice in good faith to establish protocols to be used by the personnel of the E-911
 167 service, as defined in § 58.1-1730, when answering emergency calls unless such act or omission was the
 168 result of such physician's gross negligence or willful misconduct.

169 Any licensed physician who directs the provision of emergency medical services, as authorized by
 170 the State Board of Health, through a communications device shall not be liable for any civil damages
 171 for any act or omission resulting from the rendering of such emergency medical services unless such act
 172 or omission was the result of such physician's gross negligence or willful misconduct.

173 Any licensed physician serving without compensation as a supervisor of an AED in the
 174 Commonwealth shall not be liable for any civil damages for any act or omission resulting from
 175 rendering medical advice in good faith to the owner of the AED relating to personnel training, local
 176 emergency medical services coordination, protocol approval, AED deployment strategies, and equipment
 177 maintenance plans and records unless such act or omission was the result of such physician's gross
 178 negligence or willful misconduct.

179 C. Any communications services provider, as defined in § 58.1-647, including mobile service, and
 180 any provider of Voice-over-Internet Protocol service, in the Commonwealth shall not be liable for any

181 civil damages for any act or omission resulting from rendering such service with or without charge
182 related to emergency calls unless such act or omission was the result of such service provider's gross
183 negligence or willful misconduct.

184 Any volunteer engaging in rescue or recovery work at a mine, or any mine operator voluntarily
185 providing personnel to engage in rescue or recovery work at a mine not owned or operated by such
186 operator, shall not be liable for civil damages for acts or omissions resulting from the rendering of such
187 rescue or recovery work in good faith unless such act or omission was the result of gross negligence or
188 willful misconduct. For purposes of this subsection, "Voice-over-Internet Protocol service" or "VoIP
189 service" means any Internet protocol-enabled services utilizing a broadband connection, actually
190 originating or terminating in Internet Protocol from either or both ends of a channel of communication
191 offering real time, multidirectional voice functionality, including, but not limited to, services similar to
192 traditional telephone service.

193 D. Nothing contained in this section shall be construed to provide immunity from liability arising out
194 of the operation of a motor vehicle.

195 E. For the purposes of this section, "compensation" shall not be construed to include (i) the salaries
196 of police, fire, or other public officials or personnel who render such emergency assistance; (ii) the
197 salaries or wages of employees of a coal producer engaging in emergency medical services or first aid
198 services pursuant to the provisions of § 45.1-161.38, 45.1-161.101, 45.1-161.199, or 45.1-161.263; (iii)
199 complimentary lift tickets, food, lodging, or other gifts provided as a gratuity to volunteer members of
200 the National Ski Patrol System, Inc., by any resort, group, or agency; (iv) the salary of any person who
201 (a) owns an AED for the use at the scene of an emergency, (b) trains individuals, in courses approved
202 by the Board of Health, to operate AEDs at the scene of emergencies, (c) orders AEDs for use at the
203 scene of emergencies, or (d) operates an AED at the scene of an emergency; or (v) expenses reimbursed
204 to any person providing care or assistance pursuant to this section.

205 For the purposes of this section, "emergency medical services provider" shall include a person
206 licensed or certified as such or its equivalent by any other state when he is performing services that he
207 is licensed or certified to perform by such other state in caring for a patient in transit in the
208 Commonwealth, which care originated in such other state.

209 Further, the public shall be urged to receive training on how to use CPR and an AED in order to
210 acquire the skills and confidence to respond to emergencies using both CPR and an AED.

211 **§ 54.1-3408. Professional use by practitioners.**

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

217 B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral
218 prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may
219 cause drugs or devices to be administered by:

220 1. A nurse, physician assistant, or intern under his direction and supervision;

221 2. Persons trained to administer drugs and devices to patients in state-owned or state-operated
222 hospitals or facilities licensed as hospitals by the Board of Health or psychiatric hospitals licensed by
223 the Department of Behavioral Health and Developmental Services who administer drugs under the
224 control and supervision of the prescriber or a pharmacist;

225 3. Emergency medical services personnel certified and authorized to administer drugs and devices
226 pursuant to regulations of the Board of Health who act within the scope of such certification and
227 pursuant to an oral or written order or standing protocol; or

228 4. A licensed respiratory therapist as defined in § 54.1-2954 who administers by inhalation controlled
229 substances used in inhalation or respiratory therapy.

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

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

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

241 Pursuant to an order or standing protocol issued by the prescriber within the course of his
242 professional practice, any school nurse, school board employee, employee of a local governing body, or

243 employee of a local health department who is authorized by a prescriber and trained in the
244 administration of epinephrine may possess and administer epinephrine.

245 Pursuant to an order or a standing protocol issued by the prescriber within the course of his
246 professional practice, any employee of a school for students with disabilities, as defined in § 22.1-319
247 and licensed by the Board of Education, or any employee of a private school that is accredited pursuant
248 to § 22.1-19 as administered by the Virginia Council for Private Education who is authorized by a
249 prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

250 Pursuant to an order issued by the prescriber within the course of his professional practice, an
251 employee of a provider licensed by the Department of Behavioral Health and Developmental Services or
252 a person providing services pursuant to a contract with a provider licensed by the Department of
253 Behavioral Health and Developmental Services may possess and administer epinephrine, provided such
254 person is authorized and trained in the administration of epinephrine.

255 Pursuant to an oral or written order or standing protocol issued by the prescriber within the course of
256 his professional practice, such prescriber may authorize pharmacists to possess epinephrine and oxygen
257 for administration in treatment of emergency medical conditions.

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

261 F. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course
262 of his professional practice, such prescriber may authorize licensed athletic trainers to possess and
263 administer topical corticosteroids, topical lidocaine, or other Schedule VI topical drugs; oxygen for use
264 in emergency situations; and epinephrine for use in emergency cases of anaphylactic shock.

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

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

283 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his
284 professional practice, such prescriber may authorize, with the consent of the parents as defined in
285 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in
286 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19
287 as administered by the Virginia Council for Private Education who is trained in the administration of
288 insulin and glucagon to assist with the administration of insulin or administer glucagon to a student
289 diagnosed as having diabetes and who requires insulin injections during the school day or for whom
290 glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall
291 only be effective when a licensed nurse, nurse practitioner, physician, or physician assistant is not
292 present to perform the administration of the medication.

293 Pursuant to a written order issued by the prescriber within the course of his professional practice,
294 such prescriber may authorize an employee of a provider licensed by the Department of Behavioral
295 Health and Developmental Services or a person providing services pursuant to a contract with a provider
296 licensed by the Department of Behavioral Health and Developmental Services to assist with the
297 administration of insulin or to administer glucagon to a person diagnosed as having diabetes and who
298 requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of
299 hypoglycemia, provided such employee or person providing services has been trained in the
300 administration of insulin and glucagon.

301 I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the
302 administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is
303 not physically present, by (i) licensed pharmacists, (ii) registered nurses, or (iii) licensed practical nurses

304 under the immediate and direct supervision of a registered nurse. A prescriber acting on behalf of and in
305 accordance with established protocols of the Department of Health may authorize the administration of
306 vaccines to any person by a pharmacist, nurse, or designated emergency medical services provider who
307 holds an advanced life support certificate issued by the Commissioner of Health under the direction of
308 an operational medical director when the prescriber is not physically present. The emergency medical
309 services provider shall provide documentation of the vaccines to be recorded in the Virginia
310 Immunization Information System.

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

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

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

321 K. Pursuant to an oral or written order or standing protocol issued by the prescriber within the
322 course of his professional practice, such prescriber may authorize registered professional nurses certified
323 as sexual assault nurse examiners-A (SANE-A) under his supervision and when he is not physically
324 present to possess and administer preventive medications for victims of sexual assault as recommended
325 by the Centers for Disease Control and Prevention.

326 L. This section shall not prevent the administration of drugs by a person who has satisfactorily
327 completed a training program for this purpose approved by the Board of Nursing and who administers
328 such drugs in accordance with a prescriber's instructions pertaining to dosage, frequency, and manner of
329 administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to
330 security and record keeping, when the drugs administered would be normally self-administered by (i) an
331 individual receiving services in a program licensed by the Department of Behavioral Health and
332 Developmental Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision
333 Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the
334 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program
335 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of
336 any facility authorized or operated by a state or local government whose primary purpose is not to
337 provide health care services; (vi) a resident of a private children's residential facility, as defined in §
338 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department of
339 Behavioral Health and Developmental Services; or (vii) a student in a school for students with
340 disabilities, as defined in § 22.1-319 and licensed by the Board of Education.

341 In addition, this section shall not prevent a person who has successfully completed a training
342 program for the administration of drugs via percutaneous gastrostomy tube approved by the Board of
343 Nursing and been evaluated by a registered nurse as having demonstrated competency in administration
344 of drugs via percutaneous gastrostomy tube from administering drugs to a person receiving services from
345 a program licensed by the Department of Behavioral Health and Developmental Services to such person
346 via percutaneous gastrostomy tube. The continued competency of a person to administer drugs via
347 percutaneous gastrostomy tube shall be evaluated semiannually by a registered nurse.

348 M. Medication aides registered by the Board of Nursing pursuant to Article 7 (§ 54.1-3041 et seq.)
349 of Chapter 30 may administer drugs that would otherwise be self-administered to residents of any
350 assisted living facility licensed by the Department of Social Services. A registered medication aide shall
351 administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to
352 dosage, frequency, and manner of administration; in accordance with regulations promulgated by the
353 Board of Pharmacy relating to security and recordkeeping; in accordance with the assisted living
354 facility's Medication Management Plan; and in accordance with such other regulations governing their
355 practice promulgated by the Board of Nursing.

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

363 O. In addition, this section shall not prevent the administration of drugs by a person to (i) a child in
364 a child day program as defined in § 63.2-100 and regulated by the State Board of Social Services or a
365 local government pursuant to § 15.2-914, or (ii) a student of a private school that is accredited pursuant

366 to § 22.1-19 as administered by the Virginia Council for Private Education, provided such person (a) has
 367 satisfactorily completed a training program for this purpose approved by the Board of Nursing and
 368 taught by a registered nurse, licensed practical nurse, nurse practitioner, physician assistant, doctor of
 369 medicine or osteopathic medicine, or pharmacist; (b) has obtained written authorization from a parent or
 370 guardian; (c) administers drugs only to the child identified on the prescription label in accordance with
 371 the prescriber's instructions pertaining to dosage, frequency, and manner of administration; and (d)
 372 administers only those drugs that were dispensed from a pharmacy and maintained in the original,
 373 labeled container that would normally be self-administered by the child or student, or administered by a
 374 parent or guardian to the child or student.

375 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by
 376 persons if they are authorized by the State Health Commissioner in accordance with protocols
 377 established by the State Health Commissioner pursuant to § 32.1-42.1 when (i) the Governor has
 378 declared a disaster or a state of emergency or the United States Secretary of Health and Human Services
 379 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public
 380 health emergency; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such
 381 persons have received the training necessary to safely administer or dispense the needed drugs or
 382 devices. Such persons shall administer or dispense all drugs or devices under the direction, control, and
 383 supervision of the State Health Commissioner.

384 Q. Nothing in this title shall prohibit the administration of normally self-administered drugs by
 385 unlicensed individuals to a person in his private residence.

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

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

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

404 T. Persons who are otherwise authorized to administer controlled substances in hospitals shall be
 405 authorized to administer influenza or pneumococcal vaccines pursuant to § 32.1-126.4.

406 U. Pursuant to a specific order for a patient and under his direct and immediate supervision, a
 407 prescriber may authorize the administration of controlled substances by personnel who have been
 408 properly trained to assist a doctor of medicine or osteopathic medicine, provided the method does not
 409 include intravenous, intrathecal, or epidural administration and the prescriber remains responsible for
 410 such administration.

411 V. A physician assistant, nurse or a dental hygienist may possess and administer topical fluoride
 412 varnish to the teeth of children aged six months to three years pursuant to an oral or written order or a
 413 standing protocol issued by a doctor of medicine, osteopathic medicine, or dentistry that conforms to
 414 standards adopted by the Department of Health.

415 W. A prescriber, acting in accordance with guidelines developed pursuant to § 32.1-46.02, may
 416 authorize the administration of influenza vaccine to minors by a licensed pharmacist, registered nurse,
 417 licensed practical nurse under the direction and immediate supervision of a registered nurse, or
 418 emergency medical services provider who holds an advanced life support certificate issued by the
 419 Commissioner of Health when the prescriber is not physically present.

420 X. Notwithstanding the provisions of § 54.1-3303, pursuant to an oral, written, or standing order
 421 issued by a prescriber, and in accordance with protocols developed by the Board of Pharmacy in
 422 consultation with the Board of Medicine and the Department of Health, a pharmacist may dispense
 423 naloxone or other opioid antagonist used for overdose reversal and a person may possess and administer
 424 naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be
 425 experiencing or about to experience a life-threatening opiate overdose. Law-enforcement officers as
 426 defined in § 9.1-101 and firefighters who have completed a training program may also possess and

427 administer naloxone in accordance with protocols developed by the Board of Pharmacy in consultation
428 with the Board of Medicine and the Department of Health.

429 *Y. Notwithstanding the provisions of § 54.1-3310, a person who is authorized by the Department of*
430 *Behavioral Health and Developmental Services to train individuals on the administration of naloxone for*
431 *use in opioid overdose reversal and who is acting on behalf of an organization that provides substance*
432 *abuse services to individuals at risk of experiencing an opioid overdose or training in the administration*
433 *of naloxone for overdose reversal and that has obtained a controlled substances registration from the*
434 *Board of Pharmacy pursuant to § 54.1-3423 may dispense naloxone to a person who has completed a*
435 *training program on the administration of naloxone for opioid overdose reversal approved by the*
436 *Department of Behavioral Health and Developmental Services, provided that such dispensing is (i)*
437 *pursuant to a standing order issued by a prescriber, (ii) in accordance with protocols developed by the*
438 *Board of Pharmacy in consultation with the Board of Medicine and the Department of Health, and (iii)*
439 *without charge or compensation. A person to whom naloxone has been dispensed pursuant to this*
440 *subdivision may possess naloxone and may administer naloxone to a person who is believed to be*
441 *experiencing or about to experience a life-threatening opioid overdose.*