2017 SESSION

17104396D 1 **HOUSE BILL NO. 1453** 2 AMENDMENT IN THE NATURE OF A SUBSTITUTE 3 (Proposed by the House Committee on Health, Welfare and Institutions 4 on January 26, 2017) 5 (Patron Prior to Substitute—Delegate LaRock) 6 7 of naloxone. 8 Be it enacted by the General Assembly of Virginia: 9 10 A. Any person who: 11 emergency 911 system, if feasible under the circumstances. emergency medical care provided. omission on his part in the course of his rendering such assistance in good faith. regulations in the rendering of such emergency care or assistance.

7. Operates an AED at the scene of an emergency, trains individuals to be operators of AEDs, or 56 orders AEDs, shall be immune from civil liability for any personal injury that results from any act or 57 omission in the use of an AED in an emergency where the person performing the defibrillation acts as 58 59 an ordinary, reasonably prudent person would have acted under the same or similar circumstances,

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

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.

1. In good faith, renders emergency care or assistance, without compensation, to any ill or injured 12 13 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 14 15 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 16 17 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 18 the person has attempted to contact a law-enforcement officer, as defined in § 9.1-101, a firefighter, as 19 20 defined in § 65.2-102, emergency medical services personnel, as defined in § 32.1-111.1, or an 21

22 2. In the absence of gross negligence, renders emergency obstetrical care or assistance to a female in 23 active labor who has not previously been cared for in connection with the pregnancy by such person or 24 by another professionally associated with such person and whose medical records are not reasonably 25 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 26 27

28 3. In good faith and without compensation, including any emergency medical services provider who 29 holds a valid certificate issued by the Commissioner of Health, administers epinephrine in an emergency 30 to an individual shall not be liable for any civil damages for ordinary negligence in acts or omissions 31 resulting from the rendering of such treatment if such person has reason to believe that the individual 32 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 33 34 35 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 36 37 Management Board shall not be liable for any civil damages resulting from any act of commission or 38

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 44 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 45 omissions which involve violations of State Department of Health regulations or any other state 46 47

6. In good faith and without compensation, renders or administers emergency cardiopulmonary **48** resuscitation (CPR); cardiac defibrillation, including, but not limited to, the use of an automated external 49 defibrillator (AED); or other emergency life-sustaining or resuscitative treatments or procedures which 50 51 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, 52 doctor's office, or other medical facility, shall be deemed qualified to administer such emergency 53 54 treatments and procedures and shall not be liable for acts or omissions resulting from the rendering of 55 such emergency resuscitative treatments or procedures.

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unless such personal injury results from gross negligence or willful or wanton misconduct of the personrendering such emergency care.

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

67 9. Is an employee of a school board or of a local health department approved by the local governing body to provide health services pursuant to § 22.1-274 who, while on school property or at a 68 school-sponsored event, (i) renders emergency care or assistance to any sick or injured person; (ii) 69 70 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 71 72 life-sustaining or resuscitative treatments or procedures that have been approved by the State Board of Health to any sick or injured person; (iii) operates an AED, trains individuals to be operators of AEDs, 73 74 or orders AEDs; or (iv) maintains an AED, shall not be liable for civil damages for ordinary negligence 75 in acts or omissions on the part of such employee while engaged in the acts described in this 76 subdivision.

10. Is a volunteer in good standing and certified to render emergency care by the National Ski Patrol 77 78 System, Inc., who, in good faith and without compensation, renders emergency care or assistance to any 79 injured or ill person, whether at the scene of a ski resort rescue, outdoor emergency rescue, or any other 80 place or while transporting such injured or ill person to a place accessible for transfer to any available 81 emergency medical system unit, or any resort owner voluntarily providing a ski patroller employed by him to engage in rescue or recovery work at a resort not owned or operated by him, shall not be liable 82 for any civil damages for acts or omissions resulting from the rendering of such emergency care, 83 84 treatment, or assistance, including but not limited to acts or omissions which involve violations of any state regulation or any standard of the National Ski Patrol System, Inc., in the rendering of such 85 86 emergency care or assistance, unless such act or omission was the result of gross negligence or willful 87 misconduct.

88 11. Is an employee of (i) a school board, (ii) a school for students with disabilities as defined in 89 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 90 as administered by the Virginia Council for Private Education and is authorized by a prescriber and 91 trained in the administration of insulin and glucagon, who, upon the written request of the parents as 92 defined in § 22.1-1, assists with the administration of insulin or administers glucagon to a student 93 diagnosed as having diabetes who requires insulin injections during the school day or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia shall not be liable for any 94 95 civil damages for ordinary negligence in acts or omissions resulting from the rendering of such 96 treatment if the insulin is administered according to the child's medication schedule or such employee 97 has reason to believe that the individual receiving the glucagon is suffering or is about to suffer 98 life-threatening hypoglycemia. Whenever any such employee is covered by the immunity granted herein, 99 the school board or school employing him shall not be liable for any civil damages for ordinary 100 negligence in acts or omissions resulting from the rendering of such insulin or glucagon treatment.

101 12. Is a school nurse, an employee of a school board, an employee of a local governing body, or an 102 employee of a local health department who is authorized by a prescriber and trained in the 103 administration of epinephrine and who provides, administers, or assists in the administration of 104 epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber 105 of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions 106 resulting from the rendering of such treatment.

13. Is an employee of a school for students with disabilities, as defined in § 22.1-319 and licensed by 107 108 the Board of Education, or an employee of a private school that is accredited pursuant to § 22.1-19 as 109 administered by the Virginia Council for Private Education who is authorized by a prescriber and trained 110 in the administration of epinephrine and who administers or assists in the administration of epinephrine 111 to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber of the 112 epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions 113 resulting from the rendering of such treatment. Whenever any employee is covered by the immunity 114 granted in this subdivision, the school shall not be liable for any civil damages for ordinary negligence 115 in acts or omissions resulting from such administration or assistance.

116 14. Is an employee of a provider licensed by the Department of Behavioral Health and 117 Developmental Services, or provides services pursuant to a contract with a provider licensed by the 118 Department of Behavioral Health and Developmental Services, who has been trained in the 119 administration of insulin and glucagon and who administers or assists with the administration of insulin 120 or administers glucagon to a person diagnosed as having diabetes who requires insulin injections or for 121 whom glucagon has been prescribed for the emergency treatment of hypoglycemia in accordance with

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

131 15. Is an employee of a provider licensed by the Department of Behavioral Health and 132 Developmental Services, or provides services pursuant to a contract with a provider licensed by the 133 Department of Behavioral Health and Developmental Services, who has been trained in the 134 administration of epinephrine and who administers or assists in the administration of epinephrine to a 135 person believed in good faith to be having an anaphylactic reaction in accordance with the prescriber's 136 instructions shall not be liable for any civil damages for ordinary negligence in acts or omissions 137 resulting from the rendering of such treatment.

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

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

150 Any person serving without compensation as a dispatcher for any licensed public or nonprofit 151 emergency medical services agency in the Commonwealth shall not be liable for any civil damages for 152 any act or omission resulting from the rendering of emergency services in good faith by the personnel 153 of such licensed agency unless such act or omission was the result of such dispatcher's gross negligence 154 or willful misconduct.

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

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

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

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

177 C. Any communications services provider, as defined in § 58.1-647, including mobile service, and
178 any provider of Voice-over-Internet Protocol service, in the Commonwealth shall not be liable for any
179 civil damages for any act or omission resulting from rendering such service with or without charge
180 related to emergency calls unless such act or omission was the result of such service provider's gross
181 negligence or willful misconduct.

182 Any volunteer engaging in rescue or recovery work at a mine, or any mine operator voluntarily

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

191 D. Nothing contained in this section shall be construed to provide immunity from liability arising out 192 of the operation of a motor vehicle.

193 E. For the purposes of this section, "compensation" shall not be construed to include (i) the salaries 194 of police, fire, or other public officials or personnel who render such emergency assistance; (ii) the 195 salaries or wages of employees of a coal producer engaging in emergency medical services or first aid services pursuant to the provisions of § 45.1-161.38, 45.1-161.101, 45.1-161.199, or 45.1-161.263; (iii) 196 197 complimentary lift tickets, food, lodging, or other gifts provided as a gratuity to volunteer members of the National Ski Patrol System, Inc., by any resort, group, or agency; (iv) the salary of any person who 198 199 (a) owns an AED for the use at the scene of an emergency, (b) trains individuals, in courses approved 200 by the Board of Health, to operate AEDs at the scene of emergencies, (c) orders AEDs for use at the 201 scene of emergencies, or (d) operates an AED at the scene of an emergency; or (v) expenses reimbursed 202 to any person providing care or assistance pursuant to this section.

203 For the purposes of this section, "emergency medical services provider" shall include a person 204 licensed or certified as such or its equivalent by any other state when he is performing services that he 205 is licensed or certified to perform by such other state in caring for a patient in transit in the Commonwealth, which care originated in such other state. 206

207 Further, the public shall be urged to receive training on how to use CPR and an AED in order to 208 acquire the skills and confidence to respond to emergencies using both CPR and an AED. 209

§ 54.1-3408. Professional use by practitioners.

210 A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or a licensed 211 nurse practitioner pursuant to § 54.1-2957.01, a licensed physician assistant pursuant to § 54.1-2952.1, or 212 a TPA-certified optometrist pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 shall only 213 prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic 214 purposes within the course of his professional practice.

215 B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral 216 prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may 217 cause drugs or devices to be administered by: 218

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

219 2. Persons trained to administer drugs and devices to patients in state-owned or state-operated 220 hospitals or facilities licensed as hospitals by the Board of Health or psychiatric hospitals licensed by 221 the Department of Behavioral Health and Developmental Services who administer drugs under the 222 control and supervision of the prescriber or a pharmacist;

223 3. Emergency medical services personnel certified and authorized to administer drugs and devices 224 pursuant to regulations of the Board of Health who act within the scope of such certification and 225 pursuant to an oral or written order or standing protocol; or

226 4. A licensed respiratory therapist as defined in § 54.1-2954 who administers by inhalation controlled 227 substances used in inhalation or respiratory therapy.

228 C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by 229 state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may 230 authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used 231 in the diagnosis or treatment of disease.

232 D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 233 course of his professional practice, such prescriber may authorize registered nurses and licensed practical 234 nurses to possess (i) epinephrine and oxygen for administration in treatment of emergency medical 235 conditions and (ii) heparin and sterile normal saline to use for the maintenance of intravenous access 236 lines.

237 Pursuant to the regulations of the Board of Health, certain emergency medical services technicians 238 may possess and administer epinephrine in emergency cases of anaphylactic shock.

239 Pursuant to an order or standing protocol issued by the prescriber within the course of his 240 professional practice, any school nurse, school board employee, employee of a local governing body, or 241 employee of a local health department who is authorized by a prescriber and trained in the 242 administration of epinephrine may possess and administer epinephrine.

243 Pursuant to an order or a standing protocol issued by the prescriber within the course of his 244 professional practice, any employee of a school for students with disabilities, as defined in § 22.1-319

and licensed by the Board of Education, or any employee of a private school that is accredited pursuant to § 22.1-19 as administered by the Virginia Council for Private Education who is authorized by a prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

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

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 pharmacists to possess epinephrine and oxygen
 for administration in treatment of emergency medical conditions.

E. 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 physical therapists to possess and
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; oxygen for use
in emergency situations; and epinephrine for use in emergency cases of anaphylactic shock.

263 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 264 course of his professional practice, and in accordance with policies and guidelines established by the 265 Department of Health pursuant to § 32.1-50.2, such prescriber may authorize registered nurses or 266 licensed practical nurses under the immediate and direct supervision of a registered nurse to possess and 267 administer tuberculin purified protein derivative (PPD) in the absence of a prescriber. The Department of 268 Health's policies and guidelines shall be consistent with applicable guidelines developed by the Centers 269 for Disease Control and Prevention for preventing transmission of mycobacterium tuberculosis and shall be updated to incorporate any subsequently implemented standards of the Occupational Safety and 270 271 Health Administration and the Department of Labor and Industry to the extent that they are inconsistent 272 with the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe 273 the categories of persons to whom the tuberculin test is to be administered and shall provide for 274 appropriate medical evaluation of those in whom the test is positive. The prescriber shall ensure that the 275 nurse implementing such standing protocols has received adequate training in the practice and principles 276 underlying tuberculin screening.

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.

281 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 282 professional practice, such prescriber may authorize, with the consent of the parents as defined in 283 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in 284 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 285 as administered by the Virginia Council for Private Education who is trained in the administration of 286 insulin and glucagon to assist with the administration of insulin or administer glucagon to a student 287 diagnosed as having diabetes and who requires insulin injections during the school day or for whom 288 glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall 289 only be effective when a licensed nurse, nurse practitioner, physician, or physician assistant is not 290 present to perform the administration of the medication.

291 Pursuant to a written order issued by the prescriber within the course of his professional practice, 292 such prescriber may authorize an employee of a provider licensed by the Department of Behavioral 293 Health and Developmental Services or a person providing services pursuant to a contract with a provider 294 licensed by the Department of Behavioral Health and Developmental Services to assist with the 295 administration of insulin or to administer glucagon to a person diagnosed as having diabetes and who 296 requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of 297 hypoglycemia, provided such employee or person providing services has been trained in the 298 administration of insulin and glucagon.

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, by (i) licensed pharmacists, (ii) 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, nurse, or designated emergency medical services provider who holds an advanced life support certificate issued by the Commissioner of Health under the direction of an operational medical director when the prescriber is not physically present. The emergency medical
 services provider shall provide documentation of the vaccines to be recorded in the Virginia
 Immunization Information System.

309 J. A dentist may cause Schedule VI topical drugs to be administered under his direction and **310** 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.

K. 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 professional nurses certified as sexual assault nurse examiners-A (SANE-A) under his supervision and when he is not physically present to possess and administer preventive medications for victims of sexual assault as recommended by the Centers for Disease Control and Prevention.

324 L. This section shall not prevent the administration of drugs by a person who has satisfactorily 325 completed a training program for this purpose approved by the Board of Nursing and who administers 326 such drugs in accordance with a prescriber's instructions pertaining to dosage, frequency, and manner of administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to 327 328 security and record keeping, when the drugs administered would be normally self-administered by (i) an individual receiving services in a program licensed by the Department of Behavioral Health and 329 330 Developmental Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the 331 332 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program 333 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of 334 any facility authorized or operated by a state or local government whose primary purpose is not to 335 provide health care services; (vi) a resident of a private children's residential facility, as defined in 336 § 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department 337 of Behavioral Health and Developmental Services; or (vii) a student in a school for students with 338 disabilities, as defined in § 22.1-319 and licensed by the Board of Education.

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

M. Medication aides registered by the Board of Nursing pursuant to Article 7 (§ 54.1-3041 et seq.) 346 347 of Chapter 30 may administer drugs that would otherwise be self-administered to residents of any 348 assisted living facility licensed by the Department of Social Services. A registered medication aide shall 349 administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to 350 dosage, frequency, and manner of administration; in accordance with regulations promulgated by the 351 Board of Pharmacy relating to security and recordkeeping; in accordance with the assisted living 352 facility's Medication Management Plan; and in accordance with such other regulations governing their 353 practice promulgated by the Board of Nursing.

N. 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.

O. In addition, this section shall not prevent the administration of drugs by a person to (i) a child in
a child day program as defined in § 63.2-100 and regulated by the State Board of Social Services or a
local government pursuant to § 15.2-914, or (ii) a student of a private school that is accredited pursuant
to § 22.1-19 as administered by the Virginia Council for Private Education, provided such person (a) has
satisfactorily completed a training program for this purpose approved by the Board of Nursing and
taught by a registered nurse, licensed practical nurse, nurse practitioner, physician assistant, doctor of
medicine or osteopathic medicine, or pharmacist; (b) has obtained written authorization from a parent or

guardian; (c) administers drugs only to the child identified on the prescription label in accordance with
the prescriber's instructions pertaining to dosage, frequency, and manner of administration; and (d)
administers only those drugs that were dispensed from a pharmacy and maintained in the original,
labeled container that would normally be self-administered by the child or student, or administered by a
parent or guardian to the child or student.

373 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by 374 persons if they are authorized by the State Health Commissioner in accordance with protocols 375 established by the State Health Commissioner pursuant to § 32.1-42.1 when (i) the Governor has 376 declared a disaster or a state of emergency or the United States Secretary of Health and Human Services 377 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public 378 health emergency; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such 379 persons have received the training necessary to safely administer or dispense the needed drugs or 380 devices. Such persons shall administer or dispense all drugs or devices under the direction, control, and 381 supervision of the State Health Commissioner.

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

R. 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.

388 S. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care 389 technicians who are certified by an organization approved by the Board of Health Professions or persons 390 authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.), in the ordinary 391 course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, topical 392 needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for the 393 purpose of facilitating renal dialysis treatment, when such administration of medications occurs under the 394 orders of a licensed physician, nurse practitioner, or physician assistant and under the immediate and 395 direct supervision of a licensed registered nurse. Nothing in this chapter shall be construed to prohibit a 396 patient care dialysis technician trainee from performing dialysis care as part of and within the scope of 397 the clinical skills instruction segment of a supervised dialysis technician training program, provided such 398 trainee is identified as a "trainee" while working in a renal dialysis facility.

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.).

402 T. Persons who are otherwise authorized to administer controlled substances in hospitals shall be 403 authorized to administer influenza or pneumococcal vaccines pursuant to § 32.1-126.4.

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

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

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

418 X. Notwithstanding the provisions of § 54.1-3303, pursuant to an oral, written, or standing order 419 issued by a prescriber, and in accordance with protocols developed by the Board of Pharmacy in 420 consultation with the Board of Medicine and the Department of Health, a pharmacist may dispense 421 naloxone or other opioid antagonist used for overdose reversal and a person may possess and administer 422 naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be 423 experiencing or about to experience a life-threatening opiate opioid overdose. Law-enforcement officers 424 as defined in § 9.1-101 and firefighters who have completed a training program may also possess and 425 administer naloxone in accordance with protocols developed by the Board of Pharmacy in consultation 426 with the Board of Medicine and the Department of Health.

427 Y. Notwithstanding any other law or regulation to the contrary, a person who is authorized by the 428 Department of Behavioral Health and Developmental Services to train individuals on the administration

429 of naloxone for use in opioid overdose reversal and who is acting on behalf of an organization that 430 provides services to individuals at risk of experiencing an opioid overdose or training in the 431 administration of naloxone for overdose reversal and that has obtained a controlled substances 432 registration from the Board of Pharmacy pursuant to § 54.1-3423 may dispense naloxone to a person who has completed a training program on the administration of naloxone for opioid overdose reversal 433 434 approved by the Department of Behavioral Health and Developmental Services, provided that such dispensing is (i) pursuant to a standing order issued by a prescriber, (ii) in accordance with protocols 435 developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of 436 437 Health, and (iii) without charge or compensation. The dispensing may occur at a site other than that of 438 the controlled substance registration provided the entity possessing the controlled substances registration maintains records in accordance with regulations of the Board of Pharmacy. A person to whom 439 440 naloxone has been dispensed pursuant to this subsection may possess naloxone and may administer 441 naloxone to a person who is believed to be experiencing or about to experience a life-threatening opioid 442 overdose.

443 2. That an emergency exists and this act is in force from its passage.

444 3. That the Board of Pharmacy shall promulgate regulations to implement the provisions of this 445 act to be effective within 280 days of its enactment.