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HOUSE BILL NO. 2158

Offered January 9, 2019 Prefiled January 8, 2019

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

Patrons-Plum, Ayala, Delaney, Filler-Corn, Gooditis, Hope, Kory, Levine, Rodman and Simon

Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:

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

§ 54.1-3408. Professional use by practitioners.

A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or a licensed 12 13 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 shall only 14 prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic 15 16 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 18 19 cause drugs or devices to be administered by: 20

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

21 2. Persons trained to administer drugs and devices to patients in state-owned or state-operated hospitals or facilities licensed as hospitals by the Board of Health or psychiatric hospitals licensed by 22 23 the Department of Behavioral Health and Developmental Services who administer drugs under the 24 control and supervision of the prescriber or a pharmacist;

25 3. Emergency medical services personnel certified and authorized to administer drugs and devices pursuant to regulations of the Board of Health who act within the scope of such certification and 26 27 pursuant to an oral or written order or standing protocol; or

28 4. A licensed respiratory therapist as defined in § 54.1-2954 who administers by inhalation controlled 29 substances used in inhalation or respiratory therapy.

30 C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by 31 state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may 32 authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used 33 in the diagnosis or treatment of disease.

34 D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 35 course of his professional practice, such prescriber may authorize registered nurses and licensed practical 36 nurses to possess (i) epinephrine and oxygen for administration in treatment of emergency medical 37 conditions and (ii) heparin and sterile normal saline to use for the maintenance of intravenous access 38 lines. 39

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

Pursuant to an order or standing protocol issued by the prescriber within the course of his 41 professional practice, any school nurse, school board employee, employee of a local governing body, or 42 employee of a local health department who is authorized by a prescriber and trained in the 43 administration of epinephrine may possess and administer epinephrine. 44

45 Pursuant to an order or a standing protocol issued by the prescriber within the course of his professional practice, any employee of a school for students with disabilities, as defined in § 22.1-319 46 47 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 48 49 prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

50 Pursuant to an order or a standing protocol issued by the prescriber within the course of his professional practice, any employee of a public institution of higher education or a private institution of 51 52 higher education who is authorized by a prescriber and trained in the administration of epinephrine may 53 possess and administer epinephrine.

Pursuant to an order or a standing protocol issued by the prescriber within the course of his 54 55 professional practice, any employee of an organization providing outdoor educational experiences or programs for youth who is authorized by a prescriber and trained in the administration of epinephrine 56 57 may possess and administer epinephrine.

Pursuant to an order issued by the prescriber within the course of his professional practice, an 58

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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.

73 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 74 course of his professional practice, and in accordance with policies and guidelines established by the 75 Department of Health pursuant to § 32.1-50.2, such prescriber may authorize registered nurses or licensed practical nurses under the supervision of a registered nurse to possess and administer tuberculin 76 77 purified protein derivative (PPD) in the absence of a prescriber. The Department of Health's policies and 78 guidelines shall be consistent with applicable guidelines developed by the Centers for Disease Control 79 and Prevention for preventing transmission of mycobacterium tuberculosis and shall be updated to 80 incorporate any subsequently implemented standards of the Occupational Safety and Health Administration and the Department of Labor and Industry to the extent that they are inconsistent with 81 the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe the 82 83 categories of persons to whom the tuberculin test is to be administered and shall provide for appropriate medical evaluation of those in whom the test is positive. The prescriber shall ensure that the nurse 84 85 implementing such standing protocols has received adequate training in the practice and principles 86 underlying tuberculin screening.

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

91 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 92 professional practice, such prescriber may authorize, with the consent of the parents as defined in 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in 93 94 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 95 as administered by the Virginia Council for Private Education who is trained in the administration of 96 insulin and glucagon to assist with the administration of insulin or administer glucagon to a student 97 diagnosed as having diabetes and who requires insulin injections during the school day or for whom 98 glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall 99 only be effective when a licensed nurse, nurse practitioner, physician, or physician assistant is not 100 present to perform the administration of the medication.

101 Pursuant to a written order or standing protocol issued by the prescriber within the course of his 102 professional practice, such prescriber may authorize an employee of a public institution of higher education or a private institution of higher education who is trained in the administration of insulin and 103 glucagon to assist with the administration of insulin or administration of glucagon to a student diagnosed 104 105 as having diabetes and who requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed nurse, 106 107 nurse practitioner, physician, or physician assistant is not present to perform the administration of the 108 medication.

109 Pursuant to a written order issued by the prescriber within the course of his professional practice, 110 such prescriber may authorize an employee of a provider licensed by the Department of Behavioral 111 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 to assist with the 112 113 administration of insulin or to administer glucagon to a person diagnosed as having diabetes and who requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of 114 115 hypoglycemia, provided such employee or person providing services has been trained in the administration of insulin and glucagon. 116

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 supervision of a registered nurse. A prescriber acting on behalf of and in accordance with

3 of 5

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.

127 J. A dentist may cause Schedule VI topical drugs to be administered under his direction and 128 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.

L. This section shall not prevent the administration of drugs by a person who has satisfactorily 142 143 completed a training program for this purpose approved by the Board of Nursing and who administers 144 such drugs in accordance with a prescriber's instructions pertaining to dosage, frequency, and manner of 145 administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to 146 security and record keeping, when the drugs administered would be normally self-administered by (i) an 147 individual receiving services in a program licensed by the Department of Behavioral Health and 148 Developmental Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision 149 Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the 150 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program 151 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of 152 any facility authorized or operated by a state or local government whose primary purpose is not to 153 provide health care services; (vi) a resident of a private children's residential facility, as defined in § 154 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department of 155 Behavioral Health and Developmental Services; or (vii) a student in a school for students with 156 disabilities, as defined in § 22.1-319 and licensed by the Board of Education.

157 In addition, this section shall not prevent a person who has successfully completed a training 158 program for the administration of drugs via percutaneous gastrostomy tube approved by the Board of 159 Nursing and been evaluated by a registered nurse as having demonstrated competency in administration 160 of drugs via percutaneous gastrostomy tube from administering drugs to a person receiving services from 161 a program licensed by the Department of Behavioral Health and Developmental Services to such person 162 via percutaneous gastrostomy tube. The continued competency of a person to administer drugs via 163 percutaneous gastrostomy tube shall be evaluated semiannually by a registered nurse.

164 M. Medication aides registered by the Board of Nursing pursuant to Article 7 (§ 54.1-3041 et seq.) 165 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 166 167 administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to 168 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 169 170 facility's Medication Management Plan; and in accordance with such other regulations governing their 171 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.

179 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
181 local government pursuant to § 15.2-914, or (ii) a student of a private school that is accredited pursuant

182 to § 22.1-19 as administered by the Virginia Council for Private Education, provided such person (a) has 183 satisfactorily completed a training program for this purpose approved by the Board of Nursing and 184 taught by a registered nurse, licensed practical nurse, nurse practitioner, physician assistant, doctor of 185 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 186 187 the prescriber's instructions pertaining to dosage, frequency, and manner of administration; and (d) 188 administers only those drugs that were dispensed from a pharmacy and maintained in the original, 189 labeled container that would normally be self-administered by the child or student, or administered by a 190 parent or guardian to the child or student.

191 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by 192 persons if they are authorized by the State Health Commissioner in accordance with protocols 193 established by the State Health Commissioner pursuant to § 32.1-42.1 when (i) the Governor has declared a disaster or a state of emergency or the United States Secretary of Health and Human Services 194 195 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public 196 health emergency; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such 197 persons have received the training necessary to safely administer or dispense the needed drugs or 198 devices. Such persons shall administer or dispense all drugs or devices under the direction, control, and 199 supervision of the State Health Commissioner.

200 Q. Nothing in this title shall prohibit the administration of normally self-administered drugs by 201 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.

206 S. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care 207 technicians who are certified by an organization approved by the Board of Health Professions or persons 208 authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.), in the ordinary 209 course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, topical 210 needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for the 211 purpose of facilitating renal dialysis treatment, when such administration of medications occurs under the 212 orders of a licensed physician, nurse practitioner, or physician assistant and under the immediate and 213 direct supervision of a licensed registered nurse. Nothing in this chapter shall be construed to prohibit a 214 patient care dialysis technician trainee from performing dialysis care as part of and within the scope of 215 the clinical skills instruction segment of a supervised dialysis technician training program, provided such 216 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.).

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

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.

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

236 X. Notwithstanding the provisions of § 54.1-3303, pursuant to an oral, written, or standing order 237 issued by a prescriber or a standing order issued by the Commissioner of Health or his designee 238 authorizing the dispensing of naloxone or other opioid antagonist used for overdose reversal in the 239 absence of an oral or written order for a specific patient issued by a prescriber, and in accordance with 240 protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the 241 Department of Health, a pharmacist may dispense naloxone or other opioid antagonist used for overdose 242 reversal and a person may possess and administer naloxone or other opioid antagonist used for overdose 243 reversal to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose. Law-enforcement officers as defined in § 9.1-101, employees of the Department of Forensic
Science, employees of the Office of the Chief Medical Examiner, employees of the Department of
General Services Division of Consolidated Laboratory Services, employees of the Department of
Corrections designated as probation and parole officers or as correctional officers as defined in §
53.1-1, and firefighters who have completed a training program may also possess and administer
naloxone in accordance with protocols developed by the Board of Pharmacy in consultation with the
Board of Medicine and the Department of Health.

251 Y. Notwithstanding any other law or regulation to the contrary, (i) a person who is authorized by the 252 Department of Behavioral Health and Developmental Services to train individuals on the administration 253 of naloxone for use in opioid overdose reversal and who is acting on behalf of an organization that 254 provides services to individuals at risk of experiencing an opioid overdose or training in the 255 administration of naloxone for overdose reversal and that has obtained a controlled substances registration from the Board of Pharmacy pursuant to § 54.1-3423; (ii) emergency medical services personnel, as that term is defined in §32.1-111.1; and (iii) health care providers providing services in a 256 257 258 hospital emergency department may dispense naloxone to a person who has completed a training 259 program on the administration of naloxone for opioid overdose reversal approved by the Department of 260 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 developed by the Board of 261 Pharmacy in consultation with the Board of Medicine and the Department of Health, and (iii) without 262 263 charge or compensation. The dispensing may occur at a site other than that of the controlled substance 264 registration provided the entity possessing the controlled substances registration maintains records in 265 accordance with regulations of the Board of Pharmacy. A person who dispenses naloxone pursuant to 266 this subsection shall not be required to obtain a permit to conduct a pharmacy or a controlled 267 substance registration. No person that dispenses naloxone pursuant to this subsection may charge a fee 268 for the dispensing of naloxone that is greater than the cost to the organization of obtaining the naloxone 269 dispensed. A person who dispenses naloxone in accordance with this subsection shall provide basic 270 instructions regarding when and how to administer naloxone. A person to whom naloxone has been 271 dispensed pursuant to this subsection may possess naloxone and may administer naloxone to a person 272 who is believed to be experiencing or about to experience a life-threatening opioid overdose.

273 Z. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 274 professional practice, such prescriber may authorize, with the consent of the parents as defined in 275 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in 276 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 277 as administered by the Virginia Council for Private Education who is trained in the administration of 278 injected medications for the treatment of adrenal crisis resulting from a condition causing adrenal 279 insufficiency to administer such medication to a student diagnosed with a condition causing adrenal 280 insufficiency when the student is believed to be experiencing or about to experience an adrenal crisis. 281 Such authorization shall be effective only when a licensed nurse, nurse practitioner, physician, or 282 physician assistant is not present to perform the administration of the medication.

HB2158