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**HOUSE BILL NO. 908****AMENDMENT IN THE NATURE OF A SUBSTITUTE**

(Proposed by the House Committee on Health, Welfare and Institutions  
on February 4, 2020)

(Patrons Prior to Substitute—Delegates Hayes, Gooditis [HBs 1465 and 1466], and Hope [HB 650])

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

**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.

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

60 unless such personal injury results from gross negligence or willful or wanton misconduct of the person  
61 rendering such emergency care.

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

67 9. Is an employee of a school board or of a local health department approved by the local governing  
68 body to provide health services pursuant to § 22.1-274 who, while on school property or at a  
69 school-sponsored event, (i) renders emergency care or assistance to any sick or injured person; (ii)  
70 renders or administers emergency cardiopulmonary resuscitation (CPR); cardiac defibrillation, including,  
71 but not limited to, the use of an automated external defibrillator (AED); or other emergency  
72 life-sustaining or resuscitative treatments or procedures that have been approved by the State Board of  
73 Health to any sick or injured person; (iii) operates an AED, trains individuals to be operators of AEDs,  
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.

77 10. Is a volunteer in good standing and certified to render emergency care by the National Ski Patrol  
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  
82 him to engage in rescue or recovery work at a resort not owned or operated by him, shall not be liable  
83 for any civil damages for acts or omissions resulting from the rendering of such emergency care,  
84 treatment, or assistance, including but not limited to acts or omissions which involve violations of any  
85 state regulation or any standard of the National Ski Patrol System, Inc., in the rendering of such  
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, in the case of a school board employee,  
93 with the insertion or reinsertion of an insulin pump or any of its parts pursuant to subsection B of  
94 § 22.1-274.01:1 or administers glucagon to a student diagnosed as having diabetes who requires insulin  
95 injections during the school day or for whom glucagon has been prescribed for the emergency treatment  
96 of hypoglycemia shall not be liable for any civil damages for ordinary negligence in acts or omissions  
97 resulting from the rendering of such treatment if the insulin is administered according to the child's  
98 medication schedule or such employee has reason to believe that the individual receiving the glucagon is  
99 suffering or is about to suffer life-threatening hypoglycemia. Whenever any such employee is covered  
100 by the immunity granted herein, the school board or school employing him shall not be liable for any  
101 civil damages for ordinary negligence in acts or omissions resulting from the rendering of such insulin  
102 or glucagon treatment.

103 12. Is an employee of a public institution of higher education or a private institution of higher  
104 education who is authorized by a prescriber and trained in the administration of insulin and glucagon,  
105 who assists with the administration of insulin or administers glucagon to a student diagnosed as having  
106 diabetes who requires insulin injections or for whom glucagon has been prescribed for the emergency  
107 treatment of hypoglycemia shall not be liable for any civil damages for ordinary negligence in acts or  
108 omissions resulting from the rendering of such treatment if the insulin is administered according to the  
109 student's medication schedule or such employee has reason to believe that the individual receiving the  
110 glucagon is suffering or is about to suffer life-threatening hypoglycemia. Whenever any employee is  
111 covered by the immunity granted in this subdivision, the institution shall not be liable for any civil  
112 damages for ordinary negligence in acts or omissions resulting from the rendering of such insulin or  
113 glucagon treatment.

114 13. Is a school nurse, an employee of a school board, an employee of a local governing body, or an  
115 employee of a local health department who is authorized by a prescriber and trained in the  
116 administration of epinephrine and who provides, administers, or assists in the administration of  
117 epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber  
118 of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions  
119 resulting from the rendering of such treatment.

120 14. Is an employee of a school for students with disabilities, as defined in § 22.1-319 and licensed by  
121 the Board of Education, or an 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 and who administers or assists in the administration of epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment. Whenever any employee is covered by the immunity granted in this subdivision, the school shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from such administration or assistance.

15. Is an employee of a public institution of higher education or a private institution of higher education who is authorized by a prescriber and trained in the administration of epinephrine and who administers or assists in the administration of epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment. Whenever any employee is covered by the immunity granted in this subdivision, the institution shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from such administration or assistance.

16. Is an 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 and who administers or assists in the administration of epinephrine to a participant in the outdoor experience or program for youth believed in good faith to be having an anaphylactic reaction, or is the prescriber of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment. Whenever any employee is covered by the immunity granted in this subdivision, the organization shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from such administration or assistance.

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

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

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

20. Is an employee of a school board, school for students with disabilities as defined in § 22.1-319 licensed by the Board of Education, or private school accredited pursuant to § 22.1-19 as administered by the Virginia Council for Private Education who is trained in the administration of injected medications for the treatment of adrenal crisis resulting from a condition causing adrenal insufficiency and who administers or assists in the administration of such medications to a student diagnosed with a condition causing adrenal insufficiency when the student is believed to be experiencing or about to experience an adrenal crisis pursuant to a written order or standing protocol issued by a prescriber within the course of his professional practice and in accordance with the prescriber's instructions shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment.

183 21. *In good faith administers naloxone or other opioid antagonist used for overdose reversal to a*  
184 *person who is believed to be experiencing or about to experience a life-threatening opioid overdose in*  
185 *accordance with the provisions of subsection Z of § 54.1-3408 shall not be liable for any civil damages*  
186 *for any personal injury that results from any act or omission in the administration of naloxone or other*  
187 *opioid antagonist used for overdose reversal, unless such act or omission was the result of gross*  
188 *negligence or willful and wanton misconduct.*

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

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

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

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

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

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

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

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

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

238 E. For the purposes of this section, "compensation" shall not be construed to include (i) the salaries  
239 of police, fire, or other public officials or personnel who render such emergency assistance; (ii) the  
240 salaries or wages of employees of a coal producer engaging in emergency medical services or first aid  
241 services pursuant to the provisions of § 45.1-161.38, 45.1-161.101, 45.1-161.199, or 45.1-161.263; (iii)  
242 complimentary lift tickets, food, lodging, or other gifts provided as a gratuity to volunteer members of  
243 the National Ski Patrol System, Inc., by any resort, group, or agency; (iv) the salary of any person who  
244 (a) owns an AED for the use at the scene of an emergency, (b) trains individuals, in courses approved

by the Board of Health, to operate AEDs at the scene of emergencies, (c) orders AEDs for use at the scene of emergencies, or (d) operates an AED at the scene of an emergency; or (v) expenses reimbursed to any person providing care or assistance pursuant to this section.

For the purposes of this section, "emergency medical services provider" shall include a person licensed or certified as such or its equivalent by any other state when he is performing services that he 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.

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

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

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

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

1. A nurse, physician assistant, or intern under his direction and supervision;
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 the Department of Behavioral Health and Developmental Services who administer drugs under the control and supervision of the prescriber or a pharmacist;

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 pursuant to an oral or written order or standing protocol; or

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

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

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

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 professional practice, any school nurse, school board employee, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

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 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 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 higher education who is authorized by a prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

Pursuant to an order or a standing protocol issued by the prescriber within the course of his 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 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.

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

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

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

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

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

334 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his  
335 professional practice, such prescriber may authorize, with the consent of the parents as defined in  
336 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in  
337 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19  
338 as administered by the Virginia Council for Private Education who is trained in the administration of  
339 insulin and glucagon to assist with the administration of insulin or administer glucagon to a student  
340 diagnosed as having diabetes and who requires insulin injections during the school day or for whom  
341 glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall  
342 only be effective when a licensed nurse, nurse practitioner, physician, or physician assistant is not  
343 present to perform the administration of the medication.

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

352 Pursuant to a written order issued by the prescriber within the course of his professional practice,  
353 such prescriber may authorize an employee of a provider licensed by the Department of Behavioral  
354 Health and Developmental Services or a person providing services pursuant to a contract with a provider  
355 licensed by the Department of Behavioral Health and Developmental Services to assist with the  
356 administration of insulin or to administer glucagon to a person diagnosed as having diabetes and who  
357 requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of  
358 hypoglycemia, provided such employee or person providing services has been trained in the  
359 administration of insulin and glucagon.

360 I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the  
361 administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is  
362 not physically present, by (i) licensed pharmacists, (ii) registered nurses, or (iii) licensed practical nurses  
363 under the supervision of a registered nurse. A prescriber acting on behalf of and in accordance with  
364 established protocols of the Department of Health may authorize the administration of vaccines to any  
365 person by a pharmacist, nurse, or designated emergency medical services provider who holds an  
366 advanced life support certificate issued by the Commissioner of Health under the direction of an  
367 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.

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

Further, pursuant to a written order and in accordance with a standing protocol issued by the dentist in the course of his professional practice, a dentist may authorize a dental hygienist under his general supervision, as defined in § 54.1-2722, or his remote supervision, as defined in subsection E or F of § 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, and 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 completed a training program for this purpose approved by the Board of Nursing and who administers 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 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 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 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of any facility authorized or operated by a state or local government whose primary purpose is not to provide health care services; (vi) a resident of a private children's residential facility, as defined in § 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department of Behavioral Health and Developmental Services; or (vii) a student in a school for students with 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.) of Chapter 30 may administer drugs that would otherwise be self-administered to residents of any assisted living facility licensed by the Department of Social Services. A registered medication aide shall administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to dosage, frequency, and manner of administration; in accordance with regulations promulgated by the Board of Pharmacy relating to security and recordkeeping; in accordance with the assisted living facility's Medication Management Plan; and in accordance with such other regulations governing their practice promulgated by the Board of Nursing.

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

429 medicine or osteopathic medicine, or pharmacist; (b) has obtained written authorization from a parent or  
430 guardian; (c) administers drugs only to the child identified on the prescription label in accordance with  
431 the prescriber's instructions pertaining to dosage, frequency, and manner of administration; and (d)  
432 administers only those drugs that were dispensed from a pharmacy and maintained in the original,  
433 labeled container that would normally be self-administered by the child or student, or administered by a  
434 parent or guardian to the child or student.

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

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

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

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

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

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

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

471 V. A physician assistant, nurse, or dental hygienist may possess and administer topical fluoride  
472 varnish pursuant to an oral or written order or a standing protocol issued by a doctor of medicine,  
473 osteopathic medicine, or dentistry.

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

479 X. Notwithstanding the provisions of § 54.1-3303, pursuant to an oral, written, or standing order  
480 issued by a prescriber or a standing order issued by the Commissioner of Health or his designee  
481 authorizing the dispensing of naloxone or other opioid antagonist used for overdose reversal in the  
482 absence of an oral or written order for a specific patient issued by a prescriber, and in accordance with  
483 protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the  
484 Department of Health, a pharmacist, a health care provider providing services in a hospital emergency  
485 department, and emergency medical services personnel, as that term is defined in § 32.1-111.1, may  
486 dispense naloxone or other opioid antagonist used for overdose reversal and a person to whom naloxone  
487 or other opioid antagonist has been dispensed pursuant to this subsection may possess and administer  
488 naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be  
489 experiencing or about to experience a life-threatening opioid overdose. Law-enforcement officers as  
490 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, employees of regional jails, school nurses, local health department employees that are assigned to a public school pursuant to an agreement between the local health department and the school board, other school board employees or individuals contracted by a school board to provide school health services, and firefighters who have completed a training program may also possess and administer naloxone or other opioid antagonist used for overdose reversal and may dispense naloxone or other opioid antagonist used for overdose reversal pursuant to an oral, written, or standing order issued by a prescriber or a standing order issued by the Commissioner of Health or his designee in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health.

*Notwithstanding any other law or regulation to the contrary, an employee or other person acting on behalf of a public place may possess and administer naloxone or other opioid antagonist, other than naloxone in an injectable formulation with a hypodermic needle or syringe, to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose if he has completed a training program on the administration of such naloxone and administers naloxone in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health. For the purposes of this subsection, "public place" means any enclosed area that is used or held out for use by the public, whether owned or operated by a public or private interest.*

Y. Notwithstanding any other law or regulation to the contrary, a person who is acting on behalf of an organization that provides services to individuals at risk of experiencing an opioid overdose or training in the administration of naloxone for overdose reversal may dispense naloxone to a person who has received instruction on the administration of naloxone for opioid overdose reversal, provided that such dispensing is (i) pursuant to a standing order issued by a prescriber and (ii) in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health. If the person acting on behalf of an organization dispenses naloxone in an injectable formulation with a hypodermic needle or syringe, he shall first obtain authorization from the Department of Behavioral Health and Developmental Services to train individuals on the proper administration of naloxone by and proper disposal of a hypodermic needle or syringe, and he shall obtain a controlled substance registration from the Board of Pharmacy. The Board of Pharmacy shall not charge a fee for the issuance of such controlled substance registration. The dispensing may occur at a site other than that of the controlled substance registration provided the entity possessing the controlled substances registration maintains records in accordance with regulations of the Board of Pharmacy. No person who dispenses naloxone on behalf of an organization pursuant to this subsection shall charge a fee for the dispensing of naloxone that is greater than the cost to the organization of obtaining the naloxone dispensed. A person to whom naloxone has been dispensed pursuant to this subsection may possess naloxone and may administer naloxone to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose.

*Z. A person who is not otherwise authorized to administer naloxone or other opioid antagonist used for overdose reversal may administer naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose.*

AA. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 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 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 as administered by the Virginia Council for Private Education who is trained in the administration of injected medications for the treatment of adrenal crisis resulting from a condition causing adrenal insufficiency to administer such medication to a student diagnosed with a condition causing adrenal insufficiency when the student is believed to be experiencing or about to experience an adrenal crisis. Such authorization shall be effective only when a licensed nurse, nurse practitioner, physician, or physician assistant is not present to perform the administration of the medication.