10101312D **SENATE BILL NO. 194** 1 2 Offered January 13, 2010 3 Prefiled January 12, 2010 4 A BILL to amend and reenact §§ 54.1-2901, 54.1-3001, and 54.1-3408 of the Code of Virginia, relating 5 to certain consumer-directed home health care tasks. 6 Patron—Northam 7 8 Referred to Committee on Education and Health 9 10 Be it enacted by the General Assembly of Virginia: 1. That §§ 54.1-2901, 54.1-3001, and 54.1-3408 of the Code of Virginia are amended and reenacted 11 as follows: 12 13 § 54.1-2901. Exceptions and exemptions generally. 14 A. The provisions of this chapter shall not prevent or prohibit: 15 1. Any person entitled to practice his profession under any prior law on June 24, 1944, from continuing such practice within the scope of the definition of his particular school of practice; 16 2. Any person licensed to practice naturopathy prior to June 30, 1980, from continuing such practice 17 in accordance with regulations promulgated by the Board; 18 19 3. Any licensed nurse practitioner from rendering care under the supervision of a duly licensed 20 physician when such services are authorized by regulations promulgated jointly by the Board of 21 Medicine and the Board of Nursing; 22 4. Any registered professional nurse, licensed nurse practitioner, graduate laboratory technician or 23 other technical personnel who have been properly trained from rendering care or services within the 24 scope of their usual professional activities which shall include the taking of blood, the giving of 25 intravenous infusions and intravenous injections, and the insertion of tubes when performed under the 26 orders of a person licensed to practice medicine; 27 5. Any dentist, pharmacist or optometrist from rendering care or services within the scope of his 28 usual professional activities; 29 6. Any practitioner licensed or certified by the Board from delegating to personnel supervised by 30 him, such activities or functions as are nondiscretionary and do not require the exercise of professional 31 judgment for their performance and which are usually or customarily delegated to such persons by practitioners of the healing arts, if such activities or functions are authorized by and performed for such 32 33 practitioners of the healing arts and responsibility for such activities or functions is assumed by such 34 practitioners of the healing arts; 35 7. The rendering of medical advice or information through telecommunications from a physician 36 licensed to practice medicine in Virginia or an adjoining state to emergency medical personnel acting in 37 an emergency situation; 38 8. The domestic administration of family remedies; 39 9. The giving or use of massages, steam baths, dry heat rooms, infrared heat or ultraviolet lamps in 40 public or private health clubs and spas; 10. The manufacture or sale of proprietary medicines in this Commonwealth by licensed pharmacists 41 42 or druggists; 11. The advertising or sale of commercial appliances or remedies; 43 12. The fitting by nonitinerant persons or manufacturers of artificial eyes, limbs or other apparatus or 44 45 appliances or the fitting of plaster cast counterparts of deformed portions of the body by a nonitinerant bracemaker or prosthetist for the purpose of having a three-dimensional record of the deformity, when 46 such bracemaker or prosthetist has received a prescription from a licensed physician directing the fitting 47 of such casts and such activities are conducted in conformity with the laws of Virginia; 48 49 13. Any person from the rendering of first aid or medical assistance in an emergency in the absence 50 of a person licensed to practice medicine or osteopathy under the provisions of this chapter; 51 14. The practice of the religious tenets of any church in the ministration to the sick and suffering by 52 mental or spiritual means without the use of any drug or material remedy, whether gratuitously or for 53 compensation: 54 15. Any legally qualified out-of-state or foreign practitioner from meeting in consultation with legally 55 licensed practitioners in this Commonwealth; 16. Any practitioner of the healing arts licensed or certified and in good standing with the applicable 56 regulatory agency in another state or Canada when that practitioner of the healing arts is in Virginia 57 58 temporarily and such practitioner has been issued a temporary license or certification by the Board from

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59 practicing medicine or the duties of the profession for which he is licensed or certified (i) in a summer 60 camp or in conjunction with patients who are participating in recreational activities, (ii) while participating in continuing educational programs prescribed by the Board, or (iii) by rendering at any 61 62 site any health care services within the limits of his license, voluntarily and without compensation, to 63 any patient of any clinic which is organized in whole or in part for the delivery of health care services 64 without charge as provided in § 54.1-106;

65 17. The performance of the duties of any commissioned or contract medical officer, or podiatrist in active service in the army, navy, coast guard, marine corps, air force, or public health service of the 66 United States while such individual is so commissioned or serving; 67

18. Any masseur, who publicly represents himself as such, from performing services within the scope 68 69 of his usual professional activities and in conformance with state law;

19. Any person from performing services in the lawful conduct of his particular profession or 70 71 business under state law; 72

20. Any person from rendering emergency care pursuant to the provisions of § 8.01-225;

73 21. Qualified emergency medical services personnel, when acting within the scope of their 74 certification, and licensed health care practitioners, when acting within their scope of practice, from 75 following Durable Do Not Resuscitate Orders issued in accordance with § 54.1-2987.1 and Board of Health regulations, or licensed health care practitioners from following any other written order of a 76 77 physician not to resuscitate a patient in the event of cardiac or respiratory arrest;

22. Any commissioned or contract medical officer of the army, navy, coast guard or air force 78 79 rendering services voluntarily and without compensation while deemed to be licensed pursuant to 80 § 54.1-106;

81 23. Any provider of a chemical dependency treatment program who is certified as an "acupuncture detoxification specialist" by the National Acupuncture Detoxification Association or an equivalent 82 83 certifying body, from administering auricular acupuncture treatment under the appropriate supervision of a National Acupuncture Detoxification Association certified licensed physician or licensed acupuncturist; 84

85 24. Any employee of any assisted living facility who is certified in cardiopulmonary resuscitation (CPR) acting in compliance with the patient's individualized service plan and with the written order of 86 the attending physician not to resuscitate a patient in the event of cardiac or respiratory arrest; 87

88 25. Any person working as a health assistant under the direction of a licensed medical or osteopathic 89 doctor within the Department of Corrections, the Department of Juvenile Justice or local correctional 90 facilities;

91 26. Any employee of a school board, authorized by a prescriber and trained in the administration of 92 insulin and glucagon, when, upon the authorization of a prescriber and the written request of the parents 93 as defined in § 22.1-1, assisting with the administration of insulin or administrating glucagon to a 94 student diagnosed as having diabetes and who requires insulin injections during the school day or for 95 whom glucagon has been prescribed for the emergency treatment of hypoglycemia;

27. Any practitioner of the healing arts or other profession regulated by the Board from rendering free health care to an underserved population of Virginia who (i) does not regularly practice his 96 97 98 profession in Virginia, (ii) holds a current valid license or certificate to practice his profession in another 99 state, territory, district or possession of the United States, (iii) volunteers to provide free health care to an underserved area of this Commonwealth under the auspices of a publicly supported all volunteer, 100 101 nonprofit organization that sponsors the provision of health care to populations of underserved people, (iv) files a copy of the license or certification issued in such other jurisdiction with the Board, (v) 102 notifies the Board at least five business days prior to the voluntary provision of services of the dates and 103 location of such service, and (vi) acknowledges, in writing, that such licensure exemption shall only be 104 valid, in compliance with the Board's regulations, during the limited period that such free health care is 105 made available through the volunteer, nonprofit organization on the dates and at the location filed with 106 107 the Board. The Board may deny the right to practice in Virginia to any practitioner of the healing arts 108 whose license or certificate has been previously suspended or revoked, who has been convicted of a felony or who is otherwise found to be in violation of applicable laws or regulations. However, the 109 Board shall allow a practitioner of the healing arts who meets the above criteria to provide volunteer 110 111 services without prior notice for a period of up to three days, provided the nonprofit organization verifies that the practitioner has a valid, unrestricted license in another state; 112

113 28. Any registered nurse, acting as an agent of the Department of Health, from obtaining specimens of sputum or other bodily fluid from persons in whom the diagnosis of active tuberculosis disease, as 114 115 defined in § 32.1-49.1, is suspected and submitting orders for testing of such specimens to the Division of Consolidated Laboratories or other public health laboratories, designated by the State Health 116 Commissioner, for the purpose of determining the presence or absence of tubercle bacilli as defined in 117 118 § 32.1-49.1:

119 29. Any physician of medicine or osteopathy or nurse practitioner from delegating to a registered nurse under his supervision the screening and testing of children for elevated blood-lead levels when 120

such testing is conducted (i) in accordance with a written protocol between the physician or nurse practitioner and the registered nurse and (ii) in compliance with the Board of Health's regulations promulgated pursuant to §§ 32.1-46.1 and 32.1-46.2. Any follow-up testing or treatment shall be conducted at the direction of a physician or nurse practitioner;

30. Any practitioner of one of the professions regulated by the Board of Medicine who is in good standing with the applicable regulatory agency in another state or Canada from engaging in the practice of that profession when the practitioner is in Virginia temporarily with an out-of-state athletic team or athlete for the duration of the athletic tournament, game, or event in which the team or athlete is competing; or

130 31. Any licensed nurse practitioner in the category of certified nurse midwife from rendering care in
 131 collaboration and consultation with a duly licensed physician when such services are authorized by
 132 regulations promulgated jointly by the Board of Medicine and the Board of Nursing.; or

133 32. Any person from performing consumer-directed health care tasks, which are typically 134 self-performed, for an individual who lives in a private residence and who, by reason of disability, is 135 unable to perform such tasks but who is capable of directing the appropriate performance of such tasks.

B. Notwithstanding any provision of law or regulation to the contrary, a nurse practitioner licensed
by the Boards of Nursing and Medicine in the category of certified nurse midwife may practice without
the requirement for physician supervision while participating in a pilot program approved by the Board
of Health pursuant to § 32.1-11.5.

140 § 54.1-3001. Exemptions.

141 This chapter shall not apply to the following:

142 1. The furnishing of nursing assistance in an emergency;

143 2. The practice of nursing, which is prescribed as part of a study program, by nursing students
144 enrolled in nursing education programs approved by the Board or by graduates of approved nursing
145 education programs for a period not to exceed ninety days following successful completion of the
146 nursing education program pending the results of the licensing examination, provided proper application
147 and fee for licensure have been submitted to the Board and unless the graduate fails the licensing
148 examination within the ninety-day period;

3. The practice of any legally qualified nurse of another state who is employed by the United Statesgovernment while in the discharge of his official duties;

151 4. The practice of nursing by a nurse who holds a current unrestricted license in another state, the 152 District of Columbia, a United States possession or territory, or who holds a current unrestricted license 153 in Canada and whose training was obtained in a nursing school in Canada where English was the 154 primary language, for a period of thirty days pending licensure in Virginia, if the nurse, upon 155 employment, has furnished the employer satisfactory evidence of current licensure and submits proper 156 application and fees to the Board for licensure before, or within ten days after, employment. At the 157 discretion of the Board, additional time may be allowed for nurses currently licensed in another state, 158 the District of Columbia, a United States possession or territory, or Canada who are in the process of 159 attaining the qualification for licensure in this Commonwealth;

160 5. The practice of nursing by any registered nurse who holds a current unrestricted license in another
161 state, the District of Columbia, or a United States possession or territory, or a nurse who holds an
162 equivalent credential in a foreign country, while enrolled in an advanced professional nursing program
163 requiring clinical practice. This exemption extends only to clinical practice required by the curriculum;

6. The practice of nursing by any nurse who holds a current unrestricted license in another state, the
District of Columbia, or a United States possession or territory and is employed to provide care to any
private individual while such private individual is traveling through or temporarily staying, as defined in
the Board's regulations, in the Commonwealth;

168 7. General care of the sick by nursing assistants, companions or domestic servants that does not constitute the practice of nursing as defined in this chapter;

8. The care of the sick when done solely in connection with the practice of religious beliefs by theadherents and which is not held out to the public to be licensed practical or professional nursing;

9. Any employee of a school board, authorized by a prescriber and trained in the administration of insulin and glucagon, when, upon the authorization of a prescriber and the written request of the parents as defined in § 22.1-1, assisting with the administration of insulin or administrating glucagon to a student diagnosed as having diabetes and who requires insulin injections during the school day or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia;

10. The practice of nursing by any nurse who is a graduate of a foreign nursing school and has met
the credential, language, and academic testing requirements of the Commission on Graduates of Foreign
Nursing Schools for a period not to exceed ninety days from the date of approval of an application
submitted to the Board when such nurse is working as a nonsupervisory staff nurse in a licensed nursing
home or certified nursing facility. During such ninety-day period, such nurse shall take and pass the

182 licensing examination to remain eligible to practice nursing in Virginia; no exemption granted under this subdivision shall be extended; or 183

184 11. The practice of nursing by any nurse rendering free health care to an underserved population in 185 Virginia who (i) does not regularly practice nursing in Virginia, (ii) holds a current valid license or 186 certification to practice nursing in another state, territory, district or possession of the United States, (iii) 187 volunteers to provide free health care to an underserved area of this Commonwealth under the auspices 188 of a publicly supported all volunteer, nonprofit organization that sponsors the provision of health care to populations of underserved people, (iv) files a copy of the license or certification issued in such other 189 190 jurisdiction with the Board, (v) notifies the Board at least five business days prior to the voluntary 191 provision of services of the dates and location of such service, and (vi) acknowledges, in writing, that 192 such licensure exemption shall only be valid, in compliance with the Board's regulations, during the limited period that such free health care is made available through the volunteer, nonprofit organization 193 194 on the dates and at the location filed with the Board. The Board may deny the right to practice in 195 Virginia to any nurse whose license or certificate has been previously suspended or revoked, who has 196 been convicted of a felony or who is otherwise found to be in violation of applicable laws or 197 regulations. However, the Board shall allow a nurse who meets the above criteria to provide volunteer 198 services without prior notice for a period of up to three days, provided the nonprofit organization 199 verifies that the practitioner has a valid, unrestricted license in another state; or

200 12. Any person performing consumer-directed health care tasks, which are typically self-performed, 201 for an individual who lives in a private residence and who, by reason of disability, is unable to perform such tasks but who is capable of directing the appropriate performance of such tasks. 202 203

§ 54.1-3408. Professional use by practitioners.

204 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 205 206 a TPA-certified optometrist pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 of this title shall 207 only prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic 208 purposes within the course of his professional practice.

209 B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral 210 prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may 211 cause them to be administered by a nurse, physician assistant or intern under his direction and 212 supervision, or he may prescribe and cause drugs and devices to be administered to patients in 213 state-owned or state-operated hospitals or facilities licensed as hospitals by the Board of Health or 214 psychiatric hospitals licensed by the Department of Behavioral Health and Developmental Services by 215 other persons who have been trained properly to administer drugs and who administer drugs only under 216 the control and supervision of the prescriber or a pharmacist or a prescriber may cause drugs and 217 devices to be administered to patients by emergency medical services personnel who have been certified 218 and authorized to administer such drugs and devices pursuant to Board of Health regulations governing 219 emergency medical services and who are acting within the scope of such certification. A prescriber may 220 authorize a licensed respiratory care practitioner as defined in § 54.1-2954 to administer by inhalation 221 controlled substances used in inhalation or respiratory therapy.

222 C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by 223 state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may 224 authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used 225 in the diagnosis or treatment of disease.

226 D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 227 course of his professional practice, such prescriber may authorize registered nurses and licensed practical 228 nurses to possess (i) epinephrine for administration in treatment of emergency medical conditions and 229 (ii) heparin and sterile normal saline to use for the maintenance of intravenous access lines.

230 Pursuant to the regulations of the Board of Health, certain emergency medical services technicians 231 may possess and administer epinephrine in emergency cases of anaphylactic shock.

232 E. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course 233 of his professional practice, such prescriber may authorize licensed physical therapists to possess and 234 administer topical corticosteroids, topical lidocaine, and any other Schedule VI topical drug.

235 F. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course 236 of his professional practice, such prescriber may authorize licensed athletic trainers to possess and 237 administer topical corticosteroids, topical lidocaine, or other Schedule VI topical drugs, or to possess and 238 administer epinephrine for use in emergency cases of anaphylactic shock.

239 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 240 course of his professional practice, and in accordance with policies and guidelines established by the Department of Health pursuant to § 32.1-50.2, such prescriber may authorize registered nurses or 241 242 licensed practical nurses under the immediate and direct supervision of a registered nurse to possess and 243 administer tuberculin purified protein derivative (PPD) in the absence of a prescriber. The Department of 244 Health's policies and guidelines shall be consistent with applicable guidelines developed by the Centers 245 for Disease Control and Prevention for preventing transmission of mycobacterium tuberculosis and shall 246 be updated to incorporate any subsequently implemented standards of the Occupational Safety and 247 Health Administration and the Department of Labor and Industry to the extent that they are inconsistent 248 with the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe 249 the categories of persons to whom the tuberculin test is to be administered and shall provide for 250 appropriate medical evaluation of those in whom the test is positive. The prescriber shall ensure that the 251 nurse implementing such standing protocols has received adequate training in the practice and principles 252 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.

257 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 258 professional practice, such prescriber may authorize, with the consent of the parents as defined in 259 § 22.1-1, an employee of a school board who is trained in the administration of insulin and glucagon to 260 assist with the administration of insulin or administer glucagon to a student diagnosed as having diabetes and who requires insulin injections during the school day or for whom glucagon has been prescribed for 261 262 the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed 263 nurse, nurse practitioner, physician or physician assistant is not present to perform the administration of 264 the medication.

I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is not physically present, (i) by licensed pharmacists, (ii) by registered nurses, or (iii) licensed practical nurses under the immediate and direct supervision of a registered nurse. A prescriber acting on behalf of and in accordance with established protocols of the Department of Health may authorize the administration of vaccines to any person by a pharmacist or nurse when the prescriber is not physically present.

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

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

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

282 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.

287 L. This section shall not prevent the administration of drugs by a person who has satisfactorily 288 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 289 290 administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to 291 security and record keeping, when the drugs administered would be normally self-administered by (i) an 292 individual receiving services in a program licensed by the Department of Behavioral Health and 293 Developmental Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision 294 Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the 295 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program 296 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of 297 any facility authorized or operated by a state or local government whose primary purpose is not to 298 provide health care services; (vi) a resident of a private children's residential facility, as defined in 299 § 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department 300 of Behavioral Health and Developmental Services; or (vii) a student in a school for students with 301 disabilities, as defined in § 22.1-319 and licensed by the Board of Education.

302 M. Medication aides registered by the Board of Nursing pursuant to Article 7 (§ 54.1-3041 et seq.)
 303 of Chapter 30 may administer drugs that would otherwise be self-administered to residents of any
 304 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 a child in a 317 318 child day program as defined in § 63.2-100 and regulated by the State Board of Social Services or the 319 Child Day Care Council, provided such person (i) has satisfactorily completed a training program for 320 this purpose approved by the Board of Nursing and taught by a registered nurse, licensed practical 321 nurse, doctor of medicine or osteopathic medicine, or pharmacist; (ii) has obtained written authorization from a parent or guardian; (iii) administers drugs only to the child identified on the prescription label in 322 323 accordance with the prescriber's instructions pertaining to dosage, frequency, and manner of 324 administration; and (iv) administers only those drugs that were dispensed from a pharmacy and 325 maintained in the original, labeled container that would normally be administered by a parent or 326 guardian to the child.

327 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by 328 persons if they are authorized by the State Health Commissioner in accordance with protocols 329 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 330 331 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public health emergency; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such 332 333 persons have received the training necessary to safely administer or dispense the needed drugs or 334 devices. Such persons shall administer or dispense all drugs or devices under the direction, control and 335 supervision of the State Health Commissioner.

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

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.

342 S. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care 343 technicians who are certified by an organization approved by the Board of Health Professions or persons 344 authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.) of this title, in the ordinary course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, 345 346 topical needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for the purpose of facilitating renal dialysis treatment, when such administration of medications occurs under 347 348 the orders of a licensed physician, nurse practitioner or physician assistant and under the immediate and 349 direct supervision of a licensed registered nurse. Nothing in this chapter shall be construed to prohibit a 350 patient care dialysis technician trainee from performing dialysis care as part of and within the scope of 351 the clinical skills instruction segment of a supervised dialysis technician training program, provided such 352 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.) of this title.

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 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

367 Virginia 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, or
licensed practical nurse under the direction and immediate supervision of a registered nurse, when the
prescriber is not physically present.

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