2020 SESSION

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VIRGINIA ACTS OF ASSEMBLY - CHAPTER

2 An Act to amend and reenact § 54.1-3408 of the Code of Virginia, relating to medical assistants; 3 administration of fluoride varnish.

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Approved

Be it enacted by the General Assembly of Virginia: 6

7 1. That § 54.1-3408 of the Code of Virginia is amended and reenacted as follows: 8

§ 54.1-3408. Professional use by practitioners.

9 A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or a licensed 10 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 11 12 prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic 13 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 14 15 prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may cause drugs or devices to be administered by: 16 17

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

18 2. Persons trained to administer drugs and devices to patients in state-owned or state-operated 19 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 20 21 control and supervision of the prescriber or a pharmacist;

3. Emergency medical services personnel certified and authorized to administer drugs and devices 22 23 pursuant to regulations of the Board of Health who act within the scope of such certification and 24 pursuant to an oral or written order or standing protocol; or

25 4. A licensed respiratory therapist as defined in § 54.1-2954 who administers by inhalation controlled 26 substances used in inhalation or respiratory therapy.

27 C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by 28 state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may 29 authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used 30 in the diagnosis or treatment of disease.

31 D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 32 course of his professional practice, such prescriber may authorize registered nurses and licensed practical 33 nurses to possess (i) epinephrine and oxygen for administration in treatment of emergency medical 34 conditions and (ii) heparin and sterile normal saline to use for the maintenance of intravenous access 35 lines.

36 Pursuant to the regulations of the Board of Health, certain emergency medical services technicians 37 may possess and administer epinephrine in emergency cases of anaphylactic shock.

38 Pursuant to an order or standing protocol issued by the prescriber within the course of his 39 professional practice, any school nurse, school board employee, employee of a local governing body, or 40 employee of a local health department who is authorized by a prescriber and trained in the 41 administration of epinephrine may possess and administer epinephrine.

42 Pursuant to an order or a standing protocol issued by the prescriber within the course of his 43 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 44 to § 22.1-19 as administered by the Virginia Council for Private Education who is authorized by a 45 prescriber and trained in the administration of epinephrine may possess and administer epinephrine. 46

Pursuant to an order or a standing protocol issued by the prescriber within the course of his 47 professional practice, any employee of a public institution of higher education or a private institution of 48 49 higher education who is authorized by a prescriber and trained in the administration of epinephrine may 50 possess and administer epinephrine.

Pursuant to an order or a standing protocol issued by the prescriber within the course of his 51 52 professional practice, any employee of an organization providing outdoor educational experiences or 53 programs for youth who is authorized by a prescriber and trained in the administration of epinephrine 54 may possess and administer epinephrine.

Pursuant to an order issued by the prescriber within the course of his professional practice, an 55 56 employee of a provider licensed by the Department of Behavioral Health and Developmental Services or SB239ER

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.

60 Pursuant to an oral or written order or standing protocol issued by the prescriber within the course of
61 his professional practice, such prescriber may authorize pharmacists to possess epinephrine and oxygen
62 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.

70 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 71 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 72 73 licensed practical nurses under the supervision of a registered nurse to possess and administer tuberculin 74 purified protein derivative (PPD) in the absence of a prescriber. The Department of Health's policies and 75 guidelines shall be consistent with applicable guidelines developed by the Centers for Disease Control 76 and Prevention for preventing transmission of mycobacterium tuberculosis and shall be updated to 77 incorporate any subsequently implemented standards of the Occupational Safety and Health 78 Administration and the Department of Labor and Industry to the extent that they are inconsistent with 79 the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe the 80 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 81 82 implementing such standing protocols has received adequate training in the practice and principles 83 underlying tuberculin screening.

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

88 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 89 professional practice, such prescriber may authorize, with the consent of the parents as defined in 90 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in 91 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 92 as administered by the Virginia Council for Private Education who is trained in the administration of 93 insulin and glucagon to assist with the administration of insulin or administer glucagon to a student 94 diagnosed as having diabetes and who requires insulin injections during the school day or for whom 95 glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall 96 only be effective when a licensed nurse, nurse practitioner, physician, or physician assistant is not 97 present to perform the administration of the medication.

98 Pursuant to a written order or standing protocol issued by the prescriber within the course of his 99 professional practice, such prescriber may authorize an employee of a public institution of higher 100 education or a private institution of higher education who is trained in the administration of insulin and 101 glucagon to assist with the administration of insulin or administration of glucagon to a student diagnosed 102 as having diabetes and who requires insulin injections or for whom glucagon has been prescribed for the 103 emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed nurse, 104 nurse practitioner, physician, or physician assistant is not present to perform the administration of the 105 medication.

106 Pursuant to a written order issued by the prescriber within the course of his professional practice, 107 such prescriber may authorize an employee of a provider licensed by the Department of Behavioral 108 Health and Developmental Services or a person providing services pursuant to a contract with a provider 109 licensed by the Department of Behavioral Health and Developmental Services to assist with the 110 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 111 112 hypoglycemia, provided such employee or person providing services has been trained in the 113 administration of insulin and glucagon.

IIA 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

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118 established protocols of the Department of Health may authorize the administration of vaccines to any 119 person by a pharmacist, nurse, or designated emergency medical services provider who holds an 120 advanced life support certificate issued by the Commissioner of Health under the direction of an 121 operational medical director when the prescriber is not physically present. The emergency medical 122 services provider shall provide documentation of the vaccines to be recorded in the Virginia 123 Immunization Information System.

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

140 L. This section shall not prevent the administration of drugs by a person who has satisfactorily 141 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 142 143 administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to 144 security and record keeping, when the drugs administered would be normally self-administered by (i) an 145 individual receiving services in a program licensed by the Department of Behavioral Health and 146 Developmental Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision 147 Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the 148 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program 149 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of 150 any facility authorized or operated by a state or local government whose primary purpose is not to 151 provide health care services; (vi) a resident of a private children's residential facility, as defined in 152 § 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department 153 of Behavioral Health and Developmental Services; or (vii) a student in a school for students with 154 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.

162 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 163 164 assisted living facility licensed by the Department of Social Services. A registered medication aide shall 165 administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to 166 dosage, frequency, and manner of administration; in accordance with regulations promulgated by the 167 Board of Pharmacy relating to security and recordkeeping; in accordance with the assisted living 168 facility's Medication Management Plan; and in accordance with such other regulations governing their 169 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.

177 O. In addition, this section shall not prevent the administration of drugs by a person to (i) a child in 178 a child day program as defined in § 63.2-100 and regulated by the State Board of Social Services or a 179 local government pursuant to § 15.2-914, or (ii) a student of a private school that is accredited pursuant 180 to § 22.1-19 as administered by the Virginia Council for Private Education, provided such person (a) has 181 satisfactorily completed a training program for this purpose approved by the Board of Nursing and 182 taught by a registered nurse, licensed practical nurse, nurse practitioner, physician assistant, doctor of 183 medicine or osteopathic medicine, or pharmacist; (b) has obtained written authorization from a parent or 184 guardian; (c) administers drugs only to the child identified on the prescription label in accordance with 185 the prescriber's instructions pertaining to dosage, frequency, and manner of administration; and (d) 186 administers only those drugs that were dispensed from a pharmacy and maintained in the original, 187 labeled container that would normally be self-administered by the child or student, or administered by a 188 parent or guardian to the child or student.

189 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by 190 persons if they are authorized by the State Health Commissioner in accordance with protocols 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 191 192 193 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public 194 health emergency; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such 195 persons have received the training necessary to safely administer or dispense the needed drugs or 196 devices. Such persons shall administer or dispense all drugs or devices under the direction, control, and 197 supervision of the State Health Commissioner.

198 Q. Nothing in this title shall prohibit the administration of normally self-administered drugs by 199 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.

204 S. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care 205 technicians who are certified by an organization approved by the Board of Health Professions or persons 206 authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.), in the ordinary 207 course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, topical 208 needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for the 209 purpose of facilitating renal dialysis treatment, when such administration of medications occurs under the 210 orders of a licensed physician, nurse practitioner, or physician assistant and under the immediate and direct supervision of a licensed registered nurse. Nothing in this chapter shall be construed to prohibit a 211 212 patient care dialysis technician trainee from performing dialysis care as part of and within the scope of 213 the clinical skills instruction segment of a supervised dialysis technician training program, provided such 214 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.).

218 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 dental hygienist, or authorized agent of a doctor of medicine,
 osteopathic medicine, or dentistry may possess and administer topical fluoride varnish pursuant to an
 oral or written order or a standing protocol issued by a doctor of medicine, osteopathic medicine, or
 dentistry.

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.

X. Notwithstanding the provisions of § 54.1-3303, 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
authorizing the dispensing of naloxone or other opioid antagonist used for overdose reversal in the
absence of an oral or written order for a specific patient issued by a prescriber, and in accordance with
protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the
Department of Health, a pharmacist, a health care provider providing services in a hospital emergency

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240 department, and emergency medical services personnel, as that term is defined in § 32.1-111.1, may 241 dispense naloxone or other opioid antagonist used for overdose reversal and a person to whom naloxone or other opioid antagonist has been dispensed pursuant to this subsection may possess and administer 242 243 naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be 244 experiencing or about to experience a life-threatening opioid overdose. Law-enforcement officers as 245 defined in § 9.1-101, employees of the Department of Forensic Science, employees of the Office of the 246 Chief Medical Examiner, employees of the Department of General Services Division of Consolidated 247 Laboratory Services, employees of the Department of Corrections designated as probation and parole 248 officers or as correctional officers as defined in § 53.1-1, employees of regional jails, school nurses, 249 local health department employees that are assigned to a public school pursuant to an agreement 250 between the local health department and the school board, other school board employees or individuals 251 contracted by a school board to provide school health services, and firefighters who have completed a 252 training program may also possess and administer naloxone or other opioid antagonist used for overdose 253 reversal and may dispense naloxone or other opioid antagonist used for overdose reversal pursuant to an 254 oral, written, or standing order issued by a prescriber or a standing order issued by the Commissioner of 255 Health or his designee in accordance with protocols developed by the Board of Pharmacy in consultation 256 with the Board of Medicine and the Department of Health.

257 Y. Notwithstanding any other law or regulation to the contrary, a person who is acting on behalf of 258 an organization that provides services to individuals at risk of experiencing an opioid overdose or 259 training in the administration of naloxone for overdose reversal may dispense naloxone to a person who 260 has received instruction on the administration of naloxone for opioid overdose reversal, provided that 261 such dispensing is (i) pursuant to a standing order issued by a prescriber and (ii) in accordance with 262 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 263 264 injectable formulation with a hypodermic needle or syringe, he shall first obtain authorization from the 265 Department of Behavioral Health and Developmental Services to train individuals on the proper 266 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 267 268 charge a fee for the issuance of such controlled substance registration. The dispensing may occur at a 269 site other than that of the controlled substance registration provided the entity possessing the controlled 270 substances registration maintains records in accordance with regulations of the Board of Pharmacy. No 271 person who dispenses naloxone on behalf of an organization pursuant to this subsection shall charge a 272 fee for the dispensing of naloxone that is greater than the cost to the organization of obtaining the 273 naloxone dispensed. A person to whom naloxone has been dispensed pursuant to this subsection may 274 possess naloxone and may administer naloxone to a person who is believed to be experiencing or about 275 to experience a life-threatening opioid overdose.

276 Z. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 277 professional practice, such prescriber may authorize, with the consent of the parents as defined in 278 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in 279 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 280 as administered by the Virginia Council for Private Education who is trained in the administration of 281 injected medications for the treatment of adrenal crisis resulting from a condition causing adrenal 282 insufficiency to administer such medication to a student diagnosed with a condition causing adrenal 283 insufficiency when the student is believed to be experiencing or about to experience an adrenal crisis. 284 Such authorization shall be effective only when a licensed nurse, nurse practitioner, physician, or 285 physician assistant is not present to perform the administration of the medication.