2020 SESSION

ENROLLED

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VIRGINIA ACTS OF ASSEMBLY - CHAPTER

2 An Act to amend and reenact §§ 8.01-225 and 54.1-3408 of the Code of Virginia, relating to naloxone; 3 possession and administration.

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Approved

6 Be it enacted by the General Assembly of Virginia:

7 1. That §§ 8.01-225 and 54.1-3408 of the Code of Virginia are amended and reenacted as follows: 8 § 8.01-225. Persons rendering emergency care, obstetrical services exempt from liability. 9

A. Any person who:

10 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 11 screening or stabilization of an emergency medical condition arising from an accident, fire, or any 12 13 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 14 15 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 16 17 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 18 19 emergency 911 system, if feasible under the circumstances.

20 2. In the absence of gross negligence, renders emergency obstetrical care or assistance to a female in 21 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 22 23 available to such person shall not be liable for any civil damages for acts or omissions resulting from 24 the rendering of such emergency care or assistance. The immunity herein granted shall apply only to the 25 emergency medical care provided.

26 3. In good faith and without compensation, including any emergency medical services provider who 27 holds a valid certificate issued by the Commissioner of Health, administers epinephrine in an emergency 28 to an individual shall not be liable for any civil damages for ordinary negligence in acts or omissions 29 resulting from the rendering of such treatment if such person has reason to believe that the individual 30 receiving the injection is suffering or is about to suffer a life-threatening anaphylactic reaction.

31 4. Provides assistance upon request of any police agency, fire department, emergency medical 32 services agency, or governmental agency in the event of an accident or other emergency involving the 33 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 34 35 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. 36

37 5. Is an emergency medical services provider possessing a valid certificate issued by authority of the 38 State Board of Health who in good faith renders emergency care or assistance, whether in person or by 39 telephone or other means of communication, without compensation, to any injured or ill person, whether 40 at the scene of an accident, fire, or any other place, or while transporting such injured or ill person to, 41 from, or between any hospital, medical facility, medical clinic, doctor's office, or other similar or related 42 medical facility, shall not be liable for any civil damages for acts or omissions resulting from the 43 rendering of such emergency care, treatment, or assistance, including but in no way limited to acts or 44 omissions which involve violations of State Department of Health regulations or any other state 45 regulations in the rendering of such emergency care or assistance.

6. In good faith and without compensation, renders or administers emergency cardiopulmonary 46 resuscitation (CPR); cardiac defibrillation, including, but not limited to, the use of an automated external 47 48 defibrillator (AED); or other emergency life-sustaining or resuscitative treatments or procedures which 49 have been approved by the State Board of Health to any sick or injured person, whether at the scene of 50 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 51 treatments and procedures and shall not be liable for acts or omissions resulting from the rendering of 52 53 such emergency resuscitative treatments or procedures.

54 7. Operates an AED at the scene of an emergency, trains individuals to be operators of AEDs, or 55 orders AEDs, shall be immune from civil liability for any personal injury that results from any act or 56 omission in the use of an AED in an emergency where the person performing the defibrillation acts as

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an ordinary, reasonably prudent person would have acted under the same or similar circumstances,
unless such personal injury results from gross negligence or willful or wanton misconduct of the person
rendering such emergency care.

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

65 9. Is an employee of a school board or of a local health department approved by the local governing 66 body to provide health services pursuant to § 22.1-274 who, while on school property or at a 67 school-sponsored event, (i) renders emergency care or assistance to any sick or injured person; (ii) renders or administers emergency cardiopulmonary resuscitation (CPR); cardiac defibrillation, including, 68 but not limited to, the use of an automated external defibrillator (AED); or other emergency 69 70 life-sustaining or resuscitative treatments or procedures that have been approved by the State Board of 71 Health to any sick or injured person; (iii) operates an AED, trains individuals to be operators of AEDs, 72 or orders AEDs; or (iv) maintains an AED, shall not be liable for civil damages for ordinary negligence 73 in acts or omissions on the part of such employee while engaged in the acts described in this 74 subdivision.

75 10. Is a volunteer in good standing and certified to render emergency care by the National Ski Patrol 76 System, Inc., who, in good faith and without compensation, renders emergency care or assistance to any 77 injured or ill person, whether at the scene of a ski resort rescue, outdoor emergency rescue, or any other 78 place or while transporting such injured or ill person to a place accessible for transfer to any available 79 emergency medical system unit, or any resort owner voluntarily providing a ski patroller employed by 80 him to engage in rescue or recovery work at a resort not owned or operated by him, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care, 81 treatment, or assistance, including but not limited to acts or omissions which involve violations of any 82 state regulation or any standard of the National Ski Patrol System, Inc., in the rendering of such 83 84 emergency care or assistance, unless such act or omission was the result of gross negligence or willful 85 misconduct.

86 11. Is an employee of (i) a school board, (ii) a school for students with disabilities as defined in 87 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 88 as administered by the Virginia Council for Private Education and is authorized by a prescriber and 89 trained in the administration of insulin and glucagon, who, upon the written request of the parents as 90 defined in § 22.1-1, assists with the administration of insulin or, in the case of a school board employee, 91 with the insertion or reinsertion of an insulin pump or any of its parts pursuant to subsection B of 92 § 22.1-274.01:1 or administers glucagon to a student diagnosed as having diabetes who requires insulin 93 injections during the school day or for whom glucagon has been prescribed for the emergency treatment 94 of hypoglycemia shall not be liable for any civil damages for ordinary negligence in acts or omissions 95 resulting from the rendering of such treatment if the insulin is administered according to the child's 96 medication schedule or such employee has reason to believe that the individual receiving the glucagon is 97 suffering or is about to suffer life-threatening hypoglycemia. Whenever any such employee is covered 98 by the immunity granted herein, the school board or school employing him shall not be liable for any 99 civil damages for ordinary negligence in acts or omissions resulting from the rendering of such insulin 100 or glucagon treatment.

101 12. Is an employee of a public institution of higher education or a private institution of higher 102 education who is authorized by a prescriber and trained in the administration of insulin and glucagon, 103 who assists with the administration of insulin or administers glucagon to a student diagnosed as having 104 diabetes who requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia shall not be liable for any civil damages for ordinary negligence in acts or 105 106 omissions resulting from the rendering of such treatment if the insulin is administered according to the 107 student's medication schedule or such employee has reason to believe that the individual receiving the 108 glucagon is suffering or is about to suffer life-threatening hypoglycemia. Whenever any employee is 109 covered by the immunity granted in this subdivision, the institution shall not be liable for any civil 110 damages for ordinary negligence in acts or omissions resulting from the rendering of such insulin or 111 glucagon treatment.

112 13. Is a school nurse, an employee of a school board, an employee of a local governing body, or an 113 employee of a local health department who is authorized by a prescriber and trained in the 114 administration of epinephrine and who provides, administers, or assists in the administration of 115 epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber 116 of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions 117 resulting from the rendering of such treatment.

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118 14. Is an employee of a school for students with disabilities, as defined in § 22.1-319 and licensed by 119 the Board of Education, or an employee of a private school that is accredited pursuant to § 22.1-19 as 120 administered by the Virginia Council for Private Education who is authorized by a prescriber and trained 121 in the administration of epinephrine and who administers or assists in the administration of epinephrine 122 to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber of the 123 epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions 124 resulting from the rendering of such treatment. Whenever any employee is covered by the immunity 125 granted in this subdivision, the school shall not be liable for any civil damages for ordinary negligence 126 in acts or omissions resulting from such administration or assistance.

127 15. Is an employee of a public institution of higher education or a private institution of higher 128 education who is authorized by a prescriber and trained in the administration of epinephrine and who 129 administers or assists in the administration of epinephrine to a student believed in good faith to be 130 having an anaphylactic reaction, or is the prescriber of the epinephrine, shall not be liable for any civil 131 damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment. 132 Whenever any employee is covered by the immunity granted in this subdivision, the institution shall not 133 be liable for any civil damages for ordinary negligence in acts or omissions resulting from such 134 administration or assistance.

135 16. Is an employee of an organization providing outdoor educational experiences or programs for 136 youth who is authorized by a prescriber and trained in the administration of epinephrine and who 137 administers or assists in the administration of epinephrine to a participant in the outdoor experience or 138 program for youth believed in good faith to be having an anaphylactic reaction, or is the prescriber of 139 the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions 140 resulting from the rendering of such treatment. Whenever any employee is covered by the immunity 141 granted in this subdivision, the organization shall not be liable for any civil damages for ordinary 142 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 143 144 Developmental Services, or provides services pursuant to a contract with a provider licensed by the 145 Department of Behavioral Health and Developmental Services, who has been trained in the 146 administration of insulin and glucagon and who administers or assists with the administration of insulin 147 or administers glucagon to a person diagnosed as having diabetes who requires insulin injections or for 148 whom glucagon has been prescribed for the emergency treatment of hypoglycemia in accordance with 149 § 54.1-3408 shall not be liable for any civil damages for ordinary negligence in acts or omissions 150 resulting from the rendering of such treatment if the insulin is administered in accordance with the 151 prescriber's instructions or such person has reason to believe that the individual receiving the glucagon is 152 suffering or is about to suffer life-threatening hypoglycemia. Whenever any employee of a provider 153 licensed by the Department of Behavioral Health and Developmental Services or a person who provides 154 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 155 156 any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such 157 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.

165 19. In good faith prescribes, dispenses, or administers naloxone or other opioid antagonist used for 166 overdose reversal in an emergency to an individual who is believed to be experiencing or about to 167 experience a life-threatening opiate overdose shall not be liable for any civil damages for ordinary 168 negligence in acts or omissions resulting from the rendering of such treatment if acting in accordance 169 with the provisions of subsection X or Y of § 54.1-3408 or in his role as a member of an emergency 170 medical services agency.

171 20. In good faith administers naloxone or other opioid antagonist used for overdose reversal to a
172 person who is believed to be experiencing or about to experience a life-threatening opioid overdose in
173 accordance with the provisions of subsection Z of § 54.1-3408 shall not be liable for any civil damages,
174 absent gross negligence or willful and wanton misconduct.

175 21. Is an employee of a school board, school for students with disabilities as defined in § 22.1-319
176 licensed by the Board of Education, or private school accredited pursuant to § 22.1-19 as administered
177 by the Virginia Council for Private Education who is trained in the administration of injected
178 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.

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

191 Any person serving without compensation as a dispatcher for any licensed public or nonprofit 192 emergency medical services agency in the Commonwealth shall not be liable for any civil damages for 193 any act or omission resulting from the rendering of emergency services in good faith by the personnel 194 of such licensed agency unless such act or omission was the result of such dispatcher's gross negligence 195 or willful misconduct.

196 Any individual, certified by the State Office of Emergency Medical Services as an emergency 197 medical services instructor and pursuant to a written agreement with such office, who, in good faith and 198 in the performance of his duties, provides instruction to persons for certification or recertification as a 199 certified basic life support or advanced life support emergency medical services provider shall not be 198 liable for any civil damages for acts or omissions on his part directly relating to his activities on behalf 199 of such office unless such act or omission was the result of such emergency medical services instructor's 190 gross negligence or willful misconduct.

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

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

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

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

223 Any volunteer engaging in rescue or recovery work at a mine, or any mine operator voluntarily 224 providing personnel to engage in rescue or recovery work at a mine not owned or operated by such 225 operator, shall not be liable for civil damages for acts or omissions resulting from the rendering of such 226 rescue or recovery work in good faith unless such act or omission was the result of gross negligence or willful misconduct. For purposes of this subsection, "Voice-over-Internet Protocol service" or "VoIP 227 228 service" means any Internet protocol-enabled services utilizing a broadband connection, actually 229 originating or terminating in Internet Protocol from either or both ends of a channel of communication 230 offering real time, multidirectional voice functionality, including, but not limited to, services similar to 231 traditional telephone service.

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

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

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240 (a) owns an AED for the use at the scene of an emergency, (b) trains individuals, in courses approved 241 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 242 243 to any person providing care or assistance pursuant to this section.

244 For the purposes of this section, "emergency medical services provider" shall include a person 245 licensed or certified as such or its equivalent by any other state when he is performing services that he 246 is licensed or certified to perform by such other state in caring for a patient in transit in the 247 Commonwealth, which care originated in such other state.

248 Further, the public shall be urged to receive training on how to use CPR and an AED in order to 249 acquire the skills and confidence to respond to emergencies using both CPR and an AED. 250

§ 54.1-3408. Professional use by practitioners.

251 A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or a licensed 252 nurse practitioner pursuant to § 54.1-2957.01, a licensed physician assistant pursuant to § 54.1-2952.1, or 253 a TPA-certified optometrist pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 shall only 254 prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic 255 purposes within the course of his professional practice.

256 B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral 257 prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may 258 cause drugs or devices to be administered by: 259

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

260 2. Persons trained to administer drugs and devices to patients in state-owned or state-operated 261 hospitals or facilities licensed as hospitals by the Board of Health or psychiatric hospitals licensed by 262 the Department of Behavioral Health and Developmental Services who administer drugs under the 263 control and supervision of the prescriber or a pharmacist;

264 3. Emergency medical services personnel certified and authorized to administer drugs and devices 265 pursuant to regulations of the Board of Health who act within the scope of such certification and 266 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 267 268 substances used in inhalation or respiratory therapy.

269 C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by 270 state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may 271 authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used 272 in the diagnosis or treatment of disease.

273 D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 274 course of his professional practice, such prescriber may authorize registered nurses and licensed practical 275 nurses to possess (i) epinephrine and oxygen for administration in treatment of emergency medical 276 conditions and (ii) heparin and sterile normal saline to use for the maintenance of intravenous access 277 lines.

278 Pursuant to the regulations of the Board of Health, certain emergency medical services technicians 279 may possess and administer epinephrine in emergency cases of anaphylactic shock.

280 Pursuant to an order or standing protocol issued by the prescriber within the course of his 281 professional practice, any school nurse, school board employee, employee of a local governing body, or 282 employee of a local health department who is authorized by a prescriber and trained in the 283 administration of epinephrine may possess and administer epinephrine.

284 Pursuant to an order or a standing protocol issued by the prescriber within the course of his 285 professional practice, any employee of a school for students with disabilities, as defined in § 22.1-319 286 and licensed by the Board of Education, or any employee of a private school that is accredited pursuant 287 to § 22.1-19 as administered by the Virginia Council for Private Education who is authorized by a 288 prescriber and trained in the administration of epinephrine may possess and administer epinephrine.

289 Pursuant to an order or a standing protocol issued by the prescriber within the course of his 290 professional practice, any employee of a public institution of higher education or a private institution of 291 higher education who is authorized by a prescriber and trained in the administration of epinephrine may 292 possess and administer epinephrine.

293 Pursuant to an order or a standing protocol issued by the prescriber within the course of his 294 professional practice, any employee of an organization providing outdoor educational experiences or 295 programs for youth who is authorized by a prescriber and trained in the administration of epinephrine 296 may possess and administer epinephrine.

297 Pursuant to an order issued by the prescriber within the course of his professional practice, an 298 employee of a provider licensed by the Department of Behavioral Health and Developmental Services or 299 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 300

301 person is authorized and trained in the administration of epinephrine.

302 Pursuant to an oral or written order or standing protocol issued by the prescriber within the course of
 303 his professional practice, such prescriber may authorize pharmacists to possess epinephrine and oxygen
 304 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.

312 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the 313 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 314 licensed practical nurses under the supervision of a registered nurse to possess and administer tuberculin 315 316 purified protein derivative (PPD) in the absence of a prescriber. The Department of Health's policies and guidelines shall be consistent with applicable guidelines developed by the Centers for Disease Control 317 318 and Prevention for preventing transmission of mycobacterium tuberculosis and shall be updated to 319 incorporate any subsequently implemented standards of the Occupational Safety and Health 320 Administration and the Department of Labor and Industry to the extent that they are inconsistent with 321 the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe the 322 categories of persons to whom the tuberculin test is to be administered and shall provide for appropriate 323 medical evaluation of those in whom the test is positive. The prescriber shall ensure that the nurse 324 implementing such standing protocols has received adequate training in the practice and principles 325 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.

330 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 331 professional practice, such prescriber may authorize, with the consent of the parents as defined in 332 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in 333 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 334 as administered by the Virginia Council for Private Education who is trained in the administration of 335 insulin and glucagon to assist with the administration of insulin or administer glucagon to a student 336 diagnosed as having diabetes and who requires insulin injections during the school day or for whom 337 glucagon has been prescribed for the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed nurse, nurse practitioner, physician, or physician assistant is not 338 339 present to perform the administration of the medication.

340 Pursuant to a written order or standing protocol issued by the prescriber within the course of his 341 professional practice, such prescriber may authorize an employee of a public institution of higher 342 education or a private institution of higher education who is trained in the administration of insulin and 343 glucagon to assist with the administration of insulin or administration of glucagon to a student diagnosed 344 as having diabetes and who requires insulin injections or for whom glucagon has been prescribed for the 345 emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed nurse, 346 nurse practitioner, physician, or physician assistant is not present to perform the administration of the 347 medication.

348 Pursuant to a written order issued by the prescriber within the course of his professional practice, 349 such prescriber may authorize an employee of a provider licensed by the Department of Behavioral 350 Health and Developmental Services or a person providing services pursuant to a contract with a provider 351 licensed by the Department of Behavioral Health and Developmental Services to assist with the 352 administration of insulin or to administer glucagon to a person diagnosed as having diabetes and who 353 requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of 354 hypoglycemia, provided such employee or person providing services has been trained in the 355 administration of insulin and glucagon.

356 I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the 357 administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is 358 not physically present, by (i) licensed pharmacists, (ii) registered nurses, or (iii) licensed practical nurses 359 under the supervision of a registered nurse. A prescriber acting on behalf of and in accordance with 360 established protocols of the Department of Health may authorize the administration of vaccines to any 361 person by a pharmacist, nurse, or designated emergency medical services provider who holds an advanced life support certificate issued by the Commissioner of Health under the direction of an
operational medical director when the prescriber is not physically present. The emergency medical
services provider shall provide documentation of the vaccines to be recorded in the Virginia
Immunization Information System.

366 J. A dentist may cause Schedule VI topical drugs to be administered under his direction and 367 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.

377 K. Pursuant to an oral or written order or standing protocol issued by the prescriber within the
378 course of his professional practice, such prescriber may authorize registered professional nurses certified
379 as sexual assault nurse examiners-A (SANE-A) under his supervision and when he is not physically
380 present to possess and administer preventive medications for victims of sexual assault as recommended
381 by the Centers for Disease Control and Prevention.

382 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 383 384 such drugs in accordance with a prescriber's instructions pertaining to dosage, frequency, and manner of 385 administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to 386 security and record keeping, when the drugs administered would be normally self-administered by (i) an 387 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 388 389 Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the 390 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program 391 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of 392 any facility authorized or operated by a state or local government whose primary purpose is not to 393 provide health care services; (vi) a resident of a private children's residential facility, as defined in 394 § 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department 395 of Behavioral Health and Developmental Services; or (vii) a student in a school for students with 396 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.

404 M. Medication aides registered by the Board of Nursing pursuant to Article 7 (§ 54.1-3041 et seq.) 405 of Chapter 30 may administer drugs that would otherwise be self-administered to residents of any 406 assisted living facility licensed by the Department of Social Services. A registered medication aide shall 407 administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to 408 dosage, frequency, and manner of administration; in accordance with regulations promulgated by the 409 Board of Pharmacy relating to security and recordkeeping; in accordance with the assisted living 410 facility's Medication Management Plan; and in accordance with such other regulations governing their 411 practice promulgated by the Board of Nursing.

412 N. In addition, this section shall not prevent the administration of drugs by a person who administers 413 such drugs in accordance with a physician's instructions pertaining to dosage, frequency, and manner of 414 administration and with written authorization of a parent, and in accordance with school board 415 regulations relating to training, security and record keeping, when the drugs administered would be 416 normally self-administered by a student of a Virginia public school. Training for such persons shall be 417 accomplished through a program approved by the local school boards, in consultation with the local 418 departments of health.

419 O. In addition, this section shall not prevent the administration of drugs by a person to (i) a child in
420 a child day program as defined in § 63.2-100 and regulated by the State Board of Social Services or a
421 local government pursuant to § 15.2-914, or (ii) a student of a private school that is accredited pursuant
422 to § 22.1-19 as administered by the Virginia Council for Private Education, provided such person (a) has

423 satisfactorily completed a training program for this purpose approved by the Board of Nursing and 424 taught by a registered nurse, licensed practical nurse, nurse practitioner, physician assistant, doctor of 425 medicine or osteopathic medicine, or pharmacist; (b) has obtained written authorization from a parent or 426 guardian; (c) administers drugs only to the child identified on the prescription label in accordance with 427 the prescriber's instructions pertaining to dosage, frequency, and manner of administration; and (d) 428 administers only those drugs that were dispensed from a pharmacy and maintained in the original, 429 labeled container that would normally be self-administered by the child or student, or administered by a 430 parent or guardian to the child or student.

431 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by 432 persons if they are authorized by the State Health Commissioner in accordance with protocols 433 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 434 435 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public 436 health emergency; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such 437 persons have received the training necessary to safely administer or dispense the needed drugs or 438 devices. Such persons shall administer or dispense all drugs or devices under the direction, control, and 439 supervision of the State Health Commissioner.

440 Q. Nothing in this title shall prohibit the administration of normally self-administered drugs by 441 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.

446 S. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care 447 technicians who are certified by an organization approved by the Board of Health Professions or persons 448 authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.), in the ordinary 449 course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, topical 450 needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for the 451 purpose of facilitating renal dialysis treatment, when such administration of medications occurs under the 452 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 453 454 patient care dialysis technician trainee from performing dialysis care as part of and within the scope of 455 the clinical skills instruction segment of a supervised dialysis technician training program, provided such 456 trainee is identified as a "trainee" while working in a renal dialysis facility.

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

460 T. Persons who are otherwise authorized to administer controlled substances in hospitals shall be 461 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.

467 V. A physician assistant, nurse, or dental hygienist may possess and administer topical fluoride
468 varnish pursuant to an oral or written order or a standing protocol issued by a doctor of medicine,
469 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 475 476 issued by a prescriber or a standing order issued by the Commissioner of Health or his designee 477 authorizing the dispensing of naloxone or other opioid antagonist used for overdose reversal in the 478 absence of an oral or written order for a specific patient issued by a prescriber, and in accordance with 479 protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the 480 Department of Health, a pharmacist, a health care provider providing services in a hospital emergency **481** department, and emergency medical services personnel, as that term is defined in § 32.1-111.1, may 482 dispense naloxone or other opioid antagonist used for overdose reversal and a person to whom naloxone 483 or other opioid antagonist has been dispensed pursuant to this subsection may possess and administer

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484 naloxone or other opioid antagonist used for overdose reversal to a person who is believed to be **485** experiencing or about to experience a life-threatening opioid overdose. Law-enforcement officers as defined in § 9.1-101, employees of the Department of Forensic Science, employees of the Office of the 486 487 Chief Medical Examiner, employees of the Department of General Services Division of Consolidated 488 Laboratory Services, employees of the Department of Corrections designated as probation and parole 489 officers or as correctional officers as defined in § 53.1-1, employees of regional jails, school nurses, 490 local health department employees that are assigned to a public school pursuant to an agreement 491 between the local health department and the school board, other school board employees or individuals 492 contracted by a school board to provide school health services, and firefighters who have completed a 493 training program may also possess and administer naloxone or other opioid antagonist used for overdose 494 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 495 496 Health or his designee in accordance with protocols developed by the Board of Pharmacy in consultation 497 with the Board of Medicine and the Department of Health.

498 Y. Notwithstanding any other law or regulation to the contrary, a person who is acting on behalf of 499 an organization that provides services to individuals at risk of experiencing an opioid overdose or 500 training in the administration of naloxone for overdose reversal may dispense naloxone to a person who 501 has received instruction on the administration of naloxone for opioid overdose reversal, provided that 502 such dispensing is (i) pursuant to a standing order issued by a prescriber and (ii) in accordance with 503 protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the 504 Department of Health. If the person acting on behalf of an organization dispenses naloxone in an 505 injectable formulation with a hypodermic needle or syringe, he shall first obtain authorization from the 506 Department of Behavioral Health and Developmental Services to train individuals on the proper 507 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 508 509 charge a fee for the issuance of such controlled substance registration. The dispensing may occur at a 510 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 511 512 person who dispenses naloxone on behalf of an organization pursuant to this subsection shall charge a 513 fee for the dispensing of naloxone that is greater than the cost to the organization of obtaining the 514 naloxone dispensed. A person to whom naloxone has been dispensed pursuant to this subsection may 515 possess naloxone and may administer naloxone to a person who is believed to be experiencing or about 516 to experience a life-threatening opioid overdose.

517 Z. A person who is not otherwise authorized to administer naloxone or other opioid antagonist used 518 for overdose reversal may administer naloxone or other opioid antagonist used for overdose reversal to 519 a person who is believed to be experiencing or about to experience a life-threatening opioid overdose.

520 AA. Pursuant to a written order or standing protocol issued by the prescriber within the course of his 521 professional practice, such prescriber may authorize, with the consent of the parents as defined in 522 § 22.1-1, an employee of (i) a school board, (ii) a school for students with disabilities as defined in 523 § 22.1-319 licensed by the Board of Education, or (iii) a private school accredited pursuant to § 22.1-19 524 as administered by the Virginia Council for Private Education who is trained in the administration of 525 injected medications for the treatment of adrenal crisis resulting from a condition causing adrenal 526 insufficiency to administer such medication to a student diagnosed with a condition causing adrenal 527 insufficiency when the student is believed to be experiencing or about to experience an adrenal crisis. 528 Such authorization shall be effective only when a licensed nurse, nurse practitioner, physician, or 529 physician assistant is not present to perform the administration of the medication.