

**As Reported by the Senate Health and Human Services Committee**

**131st General Assembly**

**Regular Session**

**2015-2016**

**Sub. S. B. No. 110**

**Senator Burke**

**Cosponsors: Senators Manning, Hite, Gardner, Beagle, Jones, Lehner**

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**A BILL**

To amend sections 1.64, 2133.211, 2151.3515, 1  
2305.113, 2925.61, 3701.048, 3701.92, 3727.06, 2  
4503.44, 4723.01, 4723.06, 4723.07, 4723.18, 3  
4723.181, 4723.48, 4723.482, 4723.50, 4729.01, 4  
4730.01, 4730.02, 4730.03, 4730.04, 4730.06, 5  
4730.08, 4730.091, 4730.10, 4730.101, 4730.11, 6  
4730.12, 4730.13, 4730.14, 4730.19, 4730.21, 7  
4730.22, 4730.25, 4730.251, 4730.27, 4730.28, 8  
4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 9  
4730.41, 4730.42, 4730.43, 4730.431, 4730.49, 10  
4730.51, 4730.53, 4731.07, 4731.72, 4761.01, 11  
4761.17, 4765.01, 4765.51, and 5123.47; to 12  
amend, for the purpose of adopting new section 13  
numbers as indicated in parentheses, sections 14  
4730.091 (4730.201) and 4730.092 (4730.202); to 15  
enact new sections 4730.20 and 4730.44 and 16  
sections 4723.489, 4730.111, and 4730.203; and 17  
to repeal sections 4730.081, 4730.09, 4730.15, 18  
4730.16, 4730.17, 4730.18, 4730.20, 4730.44, 19  
4730.45, 4730.46, 4730.47, 4730.48, 4730.50, and 20  
4730.52 of the Revised Code regarding the 21  
authority of advanced practice registered nurses 22  
with prescriptive authority to delegate drug 23  
administration, advanced practice registered 24

nurse pharmacology instruction, billing for	25
anatomic pathology services performed on	26
dermatology specimens, and licensure of	27
physician assistants.	28

**BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:**

**Section 1.** That sections 1.64, 2133.211, 2151.3515, 29  
2305.113, 2925.61, 3701.048, 3701.92, 3727.06, 4503.44, 4723.01, 30  
4723.06, 4723.07, 4723.18, 4723.181, 4723.48, 4723.482, 4723.50, 31  
4729.01, 4730.01, 4730.02, 4730.03, 4730.04, 4730.06, 4730.08, 32  
4730.091, 4730.10, 4730.101, 4730.11, 4730.12, 4730.13, 4730.14, 33  
4730.19, 4730.21, 4730.22, 4730.25, 4730.251, 4730.27, 4730.28, 34  
4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 4730.41, 4730.42, 35  
4730.43, 4730.431, 4730.49, 4730.51, 4730.53, 4731.07, 4731.72, 36  
4761.01, 4761.17, 4765.01, 4765.51, and 5123.47 be amended; 37  
sections 4730.091 (4730.201) and 4730.092 (4730.202) be amended 38  
for the purpose of adopting new section numbers as shown in 39  
parentheses; and new sections 4730.20 and 4730.44 and sections 40  
4723.489, 4730.111, and 4730.203 of the Revised Code be enacted 41  
to read as follows: 42

**Sec. 1.64.** As used in the Revised Code: 43

(A) "Certified nurse-midwife" means a registered nurse who 44  
holds a valid certificate of authority issued under Chapter 45  
4723. of the Revised Code that authorizes the practice of 46  
nursing as a certified nurse-midwife in accordance with section 47  
4723.43 of the Revised Code and rules adopted by the board of 48  
nursing. 49

(B) "Certified nurse practitioner" means a registered 50

nurse who holds a valid certificate of authority issued under 51  
Chapter 4723. of the Revised Code that authorizes the practice 52  
of nursing as a certified nurse practitioner in accordance with 53  
section 4723.43 of the Revised Code and rules adopted by the 54  
board of nursing. 55

(C) "Clinical nurse specialist" means a registered nurse 56  
who holds a valid certificate of authority issued under Chapter 57  
4723. of the Revised Code that authorizes the practice of 58  
nursing as a clinical nurse specialist in accordance with 59  
section 4723.43 of the Revised Code and rules adopted by the 60  
board of nursing. 61

(D) "Physician assistant" means an individual who ~~holds a~~ 62  
~~valid certificate to practice issued~~ is licensed under Chapter 63  
4730. of the Revised Code ~~authorizing the individual to~~ provide 64  
services as a physician assistant to patients under the 65  
supervision, control, and direction of one or more physicians. 66

**Sec. 2133.211.** A person who holds a certificate of 67  
authority ~~to practice~~ as a certified nurse practitioner or 68  
clinical nurse specialist issued under ~~section 4723.42~~ Chapter  
4723. of the Revised Code may take any action that may be taken 69  
by an attending physician under sections 2133.21 to 2133.26 of 70  
the Revised Code and has the immunity provided by section 71  
2133.22 of the Revised Code if the action is taken pursuant to a 72  
standard care arrangement with a collaborating physician. 73  
74

A person who holds a ~~certificate~~ license to practice as a 75  
physician assistant issued under Chapter 4730. of the Revised 76  
Code may take any action that may be taken by an attending 77  
physician under sections 2133.21 to 2133.26 of the Revised Code 78  
and has the immunity provided by section 2133.22 of the Revised 79  
Code if the action is taken pursuant to a ~~physician supervisory~~ 80

~~plan approved pursuant to supervision agreement entered into~~ 81  
~~under section 4730.17-4730.19 of the Revised Code or,~~ 82  
~~including, if applicable,~~ the policies of a health care facility 83  
in which the physician assistant is practicing. 84

**Sec. 2151.3515.** As used in sections 2151.3515 to 2151.3530 85  
of the Revised Code: 86

(A) "Deserted child" means a child whose parent has 87  
voluntarily delivered the child to an emergency medical service 88  
worker, peace officer, or hospital employee without expressing 89  
an intent to return for the child. 90

(B) "Emergency medical service organization," "emergency 91  
medical technician-basic," "emergency medical technician- 92  
intermediate," "first responder," and "paramedic" have the same 93  
meanings as in section 4765.01 of the Revised Code. 94

(C) "Emergency medical service worker" means a first 95  
responder, emergency medical technician-basic, emergency medical 96  
technician-intermediate, or paramedic. 97

(D) "Hospital" has the same meaning as in section 3727.01 98  
of the Revised Code. 99

(E) "Hospital employee" means any of the following 100  
persons: 101

(1) A physician who has been granted privileges to 102  
practice at the hospital; 103

(2) A nurse, physician assistant, or nursing assistant 104  
employed by the hospital; 105

(3) An authorized person employed by the hospital who is 106  
acting under the direction of a physician described in division 107  
(E) (1) of this section. 108

(F) "Law enforcement agency" means an organization or 109  
entity made up of peace officers. 110

(G) "Nurse" means a person who is licensed under Chapter 111  
4723. of the Revised Code to practice as a registered nurse or 112  
licensed practical nurse. 113

(H) "Nursing assistant" means a person designated by a 114  
hospital as a nurse aide or nursing assistant whose job is to 115  
aid nurses, physicians, and physician assistants in the 116  
performance of their duties. 117

(I) "Peace officer" means a sheriff, deputy sheriff, 118  
constable, police officer of a township or joint police 119  
district, marshal, deputy marshal, municipal police officer, or 120  
a state highway patrol trooper. 121

(J) "Physician" ~~and "physician assistant" have the same~~ 122  
~~meanings as in section 4730.01 means an individual authorized~~ 123  
under Chapter 4731. of the Revised Code to practice medicine and 124  
surgery, osteopathic medicine and surgery, or podiatric medicine 125  
and surgery. 126

(K) "Physician assistant" means an individual who holds a 127  
current, valid license to practice as a physician assistant 128  
issued under Chapter 4730. of the Revised Code. 129

**Sec. 2305.113.** (A) Except as otherwise provided in this 130  
section, an action upon a medical, dental, optometric, or 131  
chiropractic claim shall be commenced within one year after the 132  
cause of action accrued. 133

(B) (1) If prior to the expiration of the one-year period 134  
specified in division (A) of this section, a claimant who 135  
allegedly possesses a medical, dental, optometric, or 136  
chiropractic claim gives to the person who is the subject of 137

that claim written notice that the claimant is considering 138  
bringing an action upon that claim, that action may be commenced 139  
against the person notified at any time within one hundred 140  
eighty days after the notice is so given. 141

(2) An insurance company shall not consider the existence 142  
or nonexistence of a written notice described in division (B) (1) 143  
of this section in setting the liability insurance premium rates 144  
that the company may charge the company's insured person who is 145  
notified by that written notice. 146

(C) Except as to persons within the age of minority or of 147  
unsound mind as provided by section 2305.16 of the Revised Code, 148  
and except as provided in division (D) of this section, both of 149  
the following apply: 150

(1) No action upon a medical, dental, optometric, or 151  
chiropractic claim shall be commenced more than four years after 152  
the occurrence of the act or omission constituting the alleged 153  
basis of the medical, dental, optometric, or chiropractic claim. 154

(2) If an action upon a medical, dental, optometric, or 155  
chiropractic claim is not commenced within four years after the 156  
occurrence of the act or omission constituting the alleged basis 157  
of the medical, dental, optometric, or chiropractic claim, then, 158  
any action upon that claim is barred. 159

(D) (1) If a person making a medical claim, dental claim, 160  
optometric claim, or chiropractic claim, in the exercise of 161  
reasonable care and diligence, could not have discovered the 162  
injury resulting from the act or omission constituting the 163  
alleged basis of the claim within three years after the 164  
occurrence of the act or omission, but, in the exercise of 165  
reasonable care and diligence, discovers the injury resulting 166

from that act or omission before the expiration of the four-year 167  
period specified in division (C) (1) of this section, the person 168  
may commence an action upon the claim not later than one year 169  
after the person discovers the injury resulting from that act or 170  
omission. 171

(2) If the alleged basis of a medical claim, dental claim, 172  
optometric claim, or chiropractic claim is the occurrence of an 173  
act or omission that involves a foreign object that is left in 174  
the body of the person making the claim, the person may commence 175  
an action upon the claim not later than one year after the 176  
person discovered the foreign object or not later than one year 177  
after the person, with reasonable care and diligence, should 178  
have discovered the foreign object. 179

(3) A person who commences an action upon a medical claim, 180  
dental claim, optometric claim, or chiropractic claim under the 181  
circumstances described in division (D) (1) or (2) of this 182  
section has the affirmative burden of proving, by clear and 183  
convincing evidence, that the person, with reasonable care and 184  
diligence, could not have discovered the injury resulting from 185  
the act or omission constituting the alleged basis of the claim 186  
within the three-year period described in division (D) (1) of 187  
this section or within the one-year period described in division 188  
(D) (2) of this section, whichever is applicable. 189

(E) As used in this section: 190

(1) "Hospital" includes any person, corporation, 191  
association, board, or authority that is responsible for the 192  
operation of any hospital licensed or registered in the state, 193  
including, but not limited to, those that are owned or operated 194  
by the state, political subdivisions, any person, any 195  
corporation, or any combination of the state, political 196

subdivisions, persons, and corporations. "Hospital" also 197  
includes any person, corporation, association, board, entity, or 198  
authority that is responsible for the operation of any clinic 199  
that employs a full-time staff of physicians practicing in more 200  
than one recognized medical specialty and rendering advice, 201  
diagnosis, care, and treatment to individuals. "Hospital" does 202  
not include any hospital operated by the government of the 203  
United States or any of its branches. 204

(2) "Physician" means a person who is licensed to practice 205  
medicine and surgery or osteopathic medicine and surgery by the 206  
state medical board or a person who otherwise is authorized to 207  
practice medicine and surgery or osteopathic medicine and 208  
surgery in this state. 209

(3) "Medical claim" means any claim that is asserted in 210  
any civil action against a physician, podiatrist, hospital, 211  
home, or residential facility, against any employee or agent of 212  
a physician, podiatrist, hospital, home, or residential 213  
facility, or against a licensed practical nurse, registered 214  
nurse, advanced practice registered nurse, physical therapist, 215  
physician assistant, emergency medical technician-basic, 216  
emergency medical technician-intermediate, or emergency medical 217  
technician-paramedic, and that arises out of the medical 218  
diagnosis, care, or treatment of any person. "Medical claim" 219  
includes the following: 220

(a) Derivative claims for relief that arise from the 221  
medical diagnosis, care, or treatment of a person; 222

(b) Claims that arise out of the medical diagnosis, care, 223  
or treatment of any person and to which either of the following 224  
applies: 225



(i) The claim results from acts or omissions in providing medical care.	226 227
(ii) The claim results from the hiring, training, supervision, retention, or termination of caregivers providing medical diagnosis, care, or treatment.	228 229 230
(c) Claims that arise out of the medical diagnosis, care, or treatment of any person and that are brought under section 3721.17 of the Revised Code.	231 232 233
(4) "Podiatrist" means any person who is licensed to practice podiatric medicine and surgery by the state medical board.	234 235 236
(5) "Dentist" means any person who is licensed to practice dentistry by the state dental board.	237 238
(6) "Dental claim" means any claim that is asserted in any civil action against a dentist, or against any employee or agent of a dentist, and that arises out of a dental operation or the dental diagnosis, care, or treatment of any person. "Dental claim" includes derivative claims for relief that arise from a dental operation or the dental diagnosis, care, or treatment of a person.	239 240 241 242 243 244 245
(7) "Derivative claims for relief" include, but are not limited to, claims of a parent, guardian, custodian, or spouse of an individual who was the subject of any medical diagnosis, care, or treatment, dental diagnosis, care, or treatment, dental operation, optometric diagnosis, care, or treatment, or chiropractic diagnosis, care, or treatment, that arise from that diagnosis, care, treatment, or operation, and that seek the recovery of damages for any of the following:	246 247 248 249 250 251 252 253
(a) Loss of society, consortium, companionship, care,	254

assistance, attention, protection, advice, guidance, counsel, 255  
instruction, training, or education, or any other intangible 256  
loss that was sustained by the parent, guardian, custodian, or 257  
spouse; 258

(b) Expenditures of the parent, guardian, custodian, or 259  
spouse for medical, dental, optometric, or chiropractic care or 260  
treatment, for rehabilitation services, or for other care, 261  
treatment, services, products, or accommodations provided to the 262  
individual who was the subject of the medical diagnosis, care, 263  
or treatment, the dental diagnosis, care, or treatment, the 264  
dental operation, the optometric diagnosis, care, or treatment, 265  
or the chiropractic diagnosis, care, or treatment. 266

(8) "Registered nurse" means any person who is licensed to 267  
practice nursing as a registered nurse by the board of nursing. 268

(9) "Chiropractic claim" means any claim that is asserted 269  
in any civil action against a chiropractor, or against any 270  
employee or agent of a chiropractor, and that arises out of the 271  
chiropractic diagnosis, care, or treatment of any person. 272  
"Chiropractic claim" includes derivative claims for relief that 273  
arise from the chiropractic diagnosis, care, or treatment of a 274  
person. 275

(10) "Chiropractor" means any person who is licensed to 276  
practice chiropractic by the state chiropractic board. 277

(11) "Optometric claim" means any claim that is asserted 278  
in any civil action against an optometrist, or against any 279  
employee or agent of an optometrist, and that arises out of the 280  
optometric diagnosis, care, or treatment of any person. 281  
"Optometric claim" includes derivative claims for relief that 282  
arise from the optometric diagnosis, care, or treatment of a 283

person.	284
(12) "Optometrist" means any person licensed to practice optometry by the state board of optometry.	285 286
(13) "Physical therapist" means any person who is licensed to practice physical therapy under Chapter 4755. of the Revised Code.	287 288 289
(14) "Home" has the same meaning as in section 3721.10 of the Revised Code.	290 291
(15) "Residential facility" means a facility licensed under section 5123.19 of the Revised Code.	292 293
(16) "Advanced practice registered nurse" means any certified nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, or certified nurse-midwife who holds a certificate of authority issued by the board of nursing under Chapter 4723. of the Revised Code.	294 295 296 297 298
(17) "Licensed practical nurse" means any person who is licensed to practice nursing as a licensed practical nurse by the board of nursing pursuant to Chapter 4723. of the Revised Code.	299 300 301 302
(18) "Physician assistant" means any person who <del>holds a valid certificate to practice issued pursuant to</del> <u>is licensed as a physician assistant under</u> Chapter 4730. of the Revised Code.	303 304 305
(19) "Emergency medical technician-basic," "emergency medical technician-intermediate," and "emergency medical technician-paramedic" means any person who is certified under Chapter 4765. of the Revised Code as an emergency medical technician-basic, emergency medical technician-intermediate, or emergency medical technician-paramedic, whichever is applicable.	306 307 308 309 310 311

<b>Sec. 2925.61.</b> (A) As used in this section:	312
(1) "Administer naloxone" means to give naloxone to a person by either of the following routes:	313 314
(a) Using a device manufactured for the intranasal administration of liquid drugs;	315 316
(b) Using an autoinjector in a manufactured dosage form.	317
(2) "Law enforcement agency" means a government entity that employs peace officers to perform law enforcement duties.	318 319
(3) "Licensed health professional" means all of the following:	320 321
(a) A physician who is authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery;	322 323 324
(b) A physician assistant who <u>is licensed under Chapter 4730. of the Revised Code,</u> holds a <del>certificate to prescribe-</del> <u>valid prescriber number</u> <del>issued under Chapter 4730. of the Revised Code by the state medical board,</del> and has been granted <u>physician-delegated prescriptive authority;</u>	325 326 327 328 329
(c) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who holds a certificate to prescribe issued under section 4723.48 of the Revised Code.	330 331 332
(4) "Peace officer" has the same meaning as in section 2921.51 of the Revised Code.	333 334
(B) A family member, friend, or other individual who is in a position to assist an individual who is apparently experiencing or at risk of experiencing an opioid-related overdose, is not subject to criminal prosecution for a violation	335 336 337 338

of section 4731.41 of the Revised Code or criminal prosecution 339  
under this chapter if the individual, acting in good faith, does 340  
all of the following: 341

(1) Obtains naloxone from a licensed health professional 342  
or a prescription for naloxone from a licensed health 343  
professional; 344

(2) Administers that naloxone to an individual who is 345  
apparently experiencing an opioid-related overdose; 346

(3) Attempts to summon emergency services either 347  
immediately before or immediately after administering the 348  
naloxone. 349

(C) Division (B) of this section does not apply to a peace 350  
officer or to an emergency medical technician-basic, emergency 351  
medical technician-intermediate, or emergency medical 352  
technician-paramedic, as defined in section 4765.01 of the 353  
Revised Code. 354

(D) A peace officer employed by a law enforcement agency 355  
is not subject to administrative action, criminal prosecution 356  
for a violation of section 4731.41 of the Revised Code, or 357  
criminal prosecution under this chapter if the peace officer, 358  
acting in good faith, obtains naloxone from the peace officer's 359  
law enforcement agency and administers the naloxone to an 360  
individual who is apparently experiencing an opioid-related 361  
overdose. 362

**Sec. 3701.048.** (A) As used in this section: 363

(1) "Board of health" means the board of health of a city 364  
or general health district or the authority having the duties of 365  
a board of health under section 3709.05 of the Revised Code. 366

(2) "Controlled substance" has the same meaning as in section 3719.01 of the Revised Code.	367 368
(3) "Drug," "dangerous drug," and "licensed health professional authorized to prescribe drugs" have the same meanings as in section 4729.01 of the Revised Code.	369 370 371
(4) "Registered volunteer" has the same meaning as in section 5502.281 of the Revised Code.	372 373
(B) In consultation with the appropriate professional regulatory boards of this state, the director of health shall develop one or more protocols that authorize the following individuals to administer, deliver, or distribute drugs, other than schedule II and III controlled substances, during a period of time described in division (E) of this section, notwithstanding any statute or rule that otherwise prohibits or restricts the administration, delivery, or distribution of drugs by those individuals:	374 375 376 377 378 379 380 381 382
(1) A physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery;	383 384 385
(2) A physician assistant <del>who holds a certificate to practice issued</del> <u>licensed</u> under Chapter 4730. of the Revised Code;	386 387 388
(3) A dentist or dental hygienist licensed under Chapter 4715. of the Revised Code;	389 390
(4) A registered nurse licensed under Chapter 4723. of the Revised Code, including an advanced practice registered nurse, as defined in section 4723.01 of the Revised Code;	391 392 393
(5) A licensed practical nurse licensed under Chapter	394

4723. of the Revised Code;	395
(6) An optometrist licensed under Chapter 4725. of the Revised Code;	396 397
(7) A pharmacist or pharmacy intern licensed under Chapter 4729. of the Revised Code;	398 399
(8) A respiratory care professional licensed under Chapter 4761. of the Revised Code;	400 401
(9) An emergency medical technician-basic, emergency medical technician-intermediate, or emergency medical technician-paramedic who holds a certificate to practice issued under Chapter 4765. of the Revised Code;	402 403 404 405
(10) A veterinarian licensed under Chapter 4741. of the Revised Code.	406 407
(C) In consultation with the executive director of the emergency management agency, the director of health shall develop one or more protocols that authorize employees of boards of health and registered volunteers to deliver or distribute drugs, other than schedule II and III controlled substances, during a period of time described in division (E) of this section, notwithstanding any statute or rule that otherwise prohibits or restricts the delivery or distribution of drugs by those individuals.	408 409 410 411 412 413 414 415 416
(D) In consultation with the state board of pharmacy, the director of health shall develop one or more protocols that authorize pharmacists and pharmacy interns to dispense, during a period of time described in division (E) of this section, limited quantities of dangerous drugs, other than schedule II and III controlled substances, without a written, oral, or electronic prescription from a licensed health professional	417 418 419 420 421 422 423

authorized to prescribe drugs or without a record of a 424  
prescription, notwithstanding any statute or rule that otherwise 425  
prohibits or restricts the dispensing of drugs without a 426  
prescription or record of a prescription. 427

(E) On the governor's declaration of an emergency that 428  
affects the public health, the director of health may issue an 429  
order to implement one or more of the protocols developed 430  
pursuant to division (B), (C), or (D) of this section. At a 431  
minimum, the director's order shall identify the one or more 432  
protocols to be implemented and the period of time during which 433  
the one or more protocols are to be effective. 434

(F) (1) An individual who administers, delivers, 435  
distributes, or dispenses a drug or dangerous drug in accordance 436  
with one or more of the protocols implemented under division (E) 437  
of this section is not liable for damages in any civil action 438  
unless the individual's acts or omissions in performing those 439  
activities constitute willful or wanton misconduct. 440

(2) An individual who administers, delivers, distributes, 441  
or dispenses a drug or dangerous drug in accordance with one or 442  
more of the protocols implemented under division (E) of this 443  
section is not subject to criminal prosecution or professional 444  
disciplinary action under any chapter in Title XLVII of the 445  
Revised Code. 446

**Sec. 3701.92.** As used in sections 3701.921 to 3701.929 of 447  
the Revised Code: 448

(A) "Advanced practice registered nurse" has the same 449  
meaning as in section 4723.01 of the Revised Code. 450

(B) "Patient centered medical home education advisory 451  
group" means the entity established under section 3701.924 of 452



the Revised Code. 453

(C) "Patient centered medical home education program" 454  
means the program established under section 3701.921 of the 455  
Revised Code and any pilot projects operated pursuant to that 456  
section. 457

(D) "Patient centered medical home education pilot 458  
project" means the pilot project established under section 459  
3701.923 of the Revised Code. 460

(E) "Physician assistant" ~~has the same meaning as in~~ 461  
~~section 4730.01 means a person who is licensed as a physician~~ 462  
assistant under Chapter 4730. of the Revised Code. 463

**Sec. 3727.06.** (A) As used in this section: 464

(1) "Doctor" means an individual authorized to practice 465  
medicine and surgery or osteopathic medicine and surgery. 466

(2) "Podiatrist" means an individual authorized to 467  
practice podiatric medicine and surgery. 468

(B) (1) Only the following may admit a patient to a 469  
hospital: 470

(a) A doctor who is a member of the hospital's medical 471  
staff; 472

(b) A dentist who is a member of the hospital's medical 473  
staff; 474

(c) A podiatrist who is a member of the hospital's medical 475  
staff; 476

(d) A clinical nurse specialist, certified nurse-midwife, 477  
or certified nurse practitioner if all of the following 478  
conditions are met: 479

(i) The clinical nurse specialist, certified nurse- 480  
midwife, or certified nurse practitioner has a standard care 481  
arrangement entered into pursuant to section 4723.431 of the 482  
Revised Code with a collaborating doctor or podiatrist who is a 483  
member of the medical staff; 484

(ii) The patient will be under the medical supervision of 485  
the collaborating doctor or podiatrist; 486

(iii) The hospital has granted the clinical nurse 487  
specialist, certified nurse-midwife, or certified nurse 488  
practitioner admitting privileges and appropriate credentials. 489

(e) A physician assistant if all of the following 490  
conditions are met: 491

(i) The physician assistant is listed on a supervision 492  
agreement ~~approved~~entered into under section 4730.19 of the 493  
Revised Code for a doctor or podiatrist who is a member of the 494  
hospital's medical staff. 495

(ii) The patient will be under the medical supervision of 496  
the supervising doctor or podiatrist. 497

(iii) The hospital has granted the physician assistant 498  
admitting privileges and appropriate credentials. 499

(2) Prior to admitting a patient, a clinical nurse 500  
specialist, certified nurse-midwife, certified nurse 501  
practitioner, or physician assistant shall notify the 502  
collaborating or supervising doctor or podiatrist of the planned 503  
admission. 504

(C) All hospital patients shall be under the medical 505  
supervision of a doctor, except that services that may be 506  
rendered by a licensed dentist pursuant to Chapter 4715. of the 507

Revised Code provided to patients admitted solely for the 508  
purpose of receiving such services shall be under the 509  
supervision of the admitting dentist and that services that may 510  
be rendered by a podiatrist pursuant to section 4731.51 of the 511  
Revised Code provided to patients admitted solely for the 512  
purpose of receiving such services shall be under the 513  
supervision of the admitting podiatrist. If treatment not within 514  
the scope of Chapter 4715. or section 4731.51 of the Revised 515  
Code is required at the time of admission by a dentist or 516  
podiatrist, or becomes necessary during the course of hospital 517  
treatment by a dentist or podiatrist, such treatment shall be 518  
under the supervision of a doctor who is a member of the medical 519  
staff. It shall be the responsibility of the admitting dentist 520  
or podiatrist to make arrangements with a doctor who is a member 521  
of the medical staff to be responsible for the patient's 522  
treatment outside the scope of Chapter 4715. or section 4731.51 523  
of the Revised Code when necessary during the patient's stay in 524  
the hospital. 525

**Sec. 4503.44.** (A) As used in this section and in section 526  
4511.69 of the Revised Code: 527

(1) "Person with a disability that limits or impairs the 528  
ability to walk" means any person who, as determined by a health 529  
care provider, meets any of the following criteria: 530

(a) Cannot walk two hundred feet without stopping to rest; 531

(b) Cannot walk without the use of, or assistance from, a 532  
brace, cane, crutch, another person, prosthetic device, 533  
wheelchair, or other assistive device; 534

(c) Is restricted by a lung disease to such an extent that 535  
the person's forced (respiratory) expiratory volume for one 536

second, when measured by spirometry, is less than one liter, or 537  
the arterial oxygen tension is less than sixty millimeters of 538  
mercury on room air at rest; 539

(d) Uses portable oxygen; 540

(e) Has a cardiac condition to the extent that the 541  
person's functional limitations are classified in severity as 542  
class III or class IV according to standards set by the American 543  
heart association; 544

(f) Is severely limited in the ability to walk due to an 545  
arthritic, neurological, or orthopedic condition; 546

(g) Is blind, legally blind, or severely visually 547  
impaired. 548

(2) "Organization" means any private organization or 549  
corporation, or any governmental board, agency, department, 550  
division, or office, that, as part of its business or program, 551  
transports persons with disabilities that limit or impair the 552  
ability to walk on a regular basis in a motor vehicle that has 553  
not been altered for the purpose of providing it with special 554  
equipment for use by persons with disabilities. This definition 555  
does not apply to division (I) of this section. 556

(3) "Health care provider" means a physician, physician 557  
assistant, advanced practice registered nurse, optometrist, or 558  
chiropractor as defined in this section except that an 559  
optometrist shall only make determinations as to division (A) (1) 560  
(g) of this section. 561

(4) "Physician" means a person licensed to practice 562  
medicine or surgery or osteopathic medicine and surgery under 563  
Chapter 4731. of the Revised Code. 564

(5) "Chiropractor" means a person licensed to practice  
chiropractic under Chapter 4734. of the Revised Code.

(6) "Advanced practice registered nurse" means a certified  
nurse practitioner, clinical nurse specialist, certified  
registered nurse anesthetist, or certified nurse-midwife who  
holds a certificate of authority issued by the board of nursing  
under Chapter 4723. of the Revised Code.

(7) "Physician assistant" means a person who ~~holds a~~  
~~certificate to practice as a physician assistant issued is~~  
licensed as a physician assistant under Chapter 4730. of the  
Revised Code.

(8) "Optometrist" means a person licensed to engage in the  
practice of optometry under Chapter 4725. of the Revised Code.

(B) (1) An organization, or a person with a disability that  
limits or impairs the ability to walk, may apply for the  
registration of any motor vehicle the organization or person  
owns or leases. When a motor vehicle has been altered for the  
purpose of providing it with special equipment for a person with  
a disability that limits or impairs the ability to walk, but is  
owned or leased by someone other than such a person, the owner  
or lessee may apply to the registrar or a deputy registrar for  
registration under this section. The application for  
registration of a motor vehicle owned or leased by a person with  
a disability that limits or impairs the ability to walk shall be  
accompanied by a signed statement from the applicant's health  
care provider certifying that the applicant meets at least one  
of the criteria contained in division (A) (1) of this section and  
that the disability is expected to continue for more than six  
consecutive months. The application for registration of a motor  
vehicle that has been altered for the purpose of providing it

with special equipment for a person with a disability that 595  
limits or impairs the ability to walk but is owned by someone 596  
other than such a person shall be accompanied by such 597  
documentary evidence of vehicle alterations as the registrar may 598  
require by rule. 599

(2) When an organization, a person with a disability that 600  
limits or impairs the ability to walk, or a person who does not 601  
have a disability that limits or impairs the ability to walk but 602  
owns a motor vehicle that has been altered for the purpose of 603  
providing it with special equipment for a person with a 604  
disability that limits or impairs the ability to walk first 605  
submits an application for registration of a motor vehicle under 606  
this section and every fifth year thereafter, the organization 607  
or person shall submit a signed statement from the applicant's 608  
health care provider, a completed application, and any required 609  
documentary evidence of vehicle alterations as provided in 610  
division (B)(1) of this section, and also a power of attorney 611  
from the owner of the motor vehicle if the applicant leases the 612  
vehicle. Upon submission of these items, the registrar or deputy 613  
registrar shall issue to the applicant appropriate vehicle 614  
registration and a set of license plates and validation 615  
stickers, or validation stickers alone when required by section 616  
4503.191 of the Revised Code. In addition to the letters and 617  
numbers ordinarily inscribed thereon, the license plates shall 618  
be imprinted with the international symbol of access. The 619  
license plates and validation stickers shall be issued upon 620  
payment of the regular license fee as prescribed under section 621  
4503.04 of the Revised Code and any motor vehicle tax levied 622  
under Chapter 4504. of the Revised Code, and the payment of a 623  
service fee equal to the amount specified in division (D) or (G) 624  
of section 4503.10 of the Revised Code. 625

(C) (1) A person with a disability that limits or impairs the ability to walk may apply to the registrar of motor vehicles for a removable windshield placard by completing and signing an application provided by the registrar. The person shall include with the application a prescription from the person's health care provider prescribing such a placard for the person based upon a determination that the person meets at least one of the criteria contained in division (A) (1) of this section. The health care provider shall state on the prescription the length of time the health care provider expects the applicant to have the disability that limits or impairs the person's ability to walk.

In addition to one placard or one or more sets of license plates, a person with a disability that limits or impairs the ability to walk is entitled to one additional placard, but only if the person applies separately for the additional placard, states the reasons why the additional placard is needed, and the registrar, in the registrar's discretion determines that good and justifiable cause exists to approve the request for the additional placard.

(2) An organization may apply to the registrar of motor vehicles for a removable windshield placard by completing and signing an application provided by the registrar. The organization shall comply with any procedures the registrar establishes by rule. The organization shall include with the application documentary evidence that the registrar requires by rule showing that the organization regularly transports persons with disabilities that limit or impair the ability to walk.

(3) Upon receipt of a completed and signed application for a removable windshield placard, the accompanying documents

required under division (C) (1) or (2) of this section, and 656  
payment of a service fee equal to the amount specified in 657  
division (D) or (G) of section 4503.10 of the Revised Code, the 658  
registrar or deputy registrar shall issue to the applicant a 659  
removable windshield placard, which shall bear the date of 660  
expiration on both sides of the placard and shall be valid until 661  
expired, revoked, or surrendered. Every removable windshield 662  
placard expires as described in division (C) (4) of this section, 663  
but in no case shall a removable windshield placard be valid for 664  
a period of less than sixty days. Removable windshield placards 665  
shall be renewable upon application as provided in division (C) 666  
(1) or (2) of this section and upon payment of a service fee 667  
equal to the amount specified in division (D) or (G) of section 668  
4503.10 of the Revised Code for the renewal of a removable 669  
windshield placard. The registrar shall provide the application 670  
form and shall determine the information to be included thereon. 671  
The registrar also shall determine the form and size of the 672  
removable windshield placard, the material of which it is to be 673  
made, and any other information to be included thereon, and 674  
shall adopt rules relating to the issuance, expiration, 675  
revocation, surrender, and proper display of such placards. Any 676  
placard issued after October 14, 1999, shall be manufactured in 677  
a manner that allows the expiration date of the placard to be 678  
indicated on it through the punching, drilling, boring, or 679  
creation by any other means of holes in the placard. 680

(4) At the time a removable windshield placard is issued 681  
to a person with a disability that limits or impairs the ability 682  
to walk, the registrar or deputy registrar shall enter into the 683  
records of the bureau of motor vehicles the last date on which 684  
the person will have that disability, as indicated on the 685  
accompanying prescription. Not less than thirty days prior to 686



that date and all removable windshield placard renewal dates, 687  
the bureau shall send a renewal notice to that person at the 688  
person's last known address as shown in the records of the 689  
bureau, informing the person that the person's removable 690  
windshield placard will expire on the indicated date not to 691  
exceed five years from the date of issuance, and that the person 692  
is required to renew the placard by submitting to the registrar 693  
or a deputy registrar another prescription, as described in 694  
division (C) (1) or (2) of this section, and by complying with 695  
the renewal provisions prescribed in division (C) (3) of this 696  
section. If such a prescription is not received by the registrar 697  
or a deputy registrar by that date, the placard issued to that 698  
person expires and no longer is valid, and this fact shall be 699  
recorded in the records of the bureau. 700

(5) At least once every year, on a date determined by the 701  
registrar, the bureau shall examine the records of the office of 702  
vital statistics, located within the department of health, that 703  
pertain to deceased persons, and also the bureau's records of 704  
all persons who have been issued removable windshield placards 705  
and temporary removable windshield placards. If the records of 706  
the office of vital statistics indicate that a person to whom a 707  
removable windshield placard or temporary removable windshield 708  
placard has been issued is deceased, the bureau shall cancel 709  
that placard, and note the cancellation in its records. 710

The office of vital statistics shall make available to the 711  
bureau all information necessary to enable the bureau to comply 712  
with division (C) (5) of this section. 713

(6) Nothing in this section shall be construed to require 714  
a person or organization to apply for a removable windshield 715  
placard or special license plates if the special license plates 716

issued to the person or organization under prior law have not 717  
expired or been surrendered or revoked. 718

(D) (1) (a) A person with a disability that limits or 719  
impairs the ability to walk may apply to the registrar or a 720  
deputy registrar for a temporary removable windshield placard. 721  
The application for a temporary removable windshield placard 722  
shall be accompanied by a prescription from the applicant's 723  
health care provider prescribing such a placard for the 724  
applicant, provided that the applicant meets at least one of the 725  
criteria contained in division (A) (1) of this section and that 726  
the disability is expected to continue for six consecutive 727  
months or less. The health care provider shall state on the 728  
prescription the length of time the health care provider expects 729  
the applicant to have the disability that limits or impairs the 730  
applicant's ability to walk, which cannot exceed six months from 731  
the date of the prescription. Upon receipt of an application for 732  
a temporary removable windshield placard, presentation of the 733  
prescription from the applicant's health care provider, and 734  
payment of a service fee equal to the amount specified in 735  
division (D) or (G) of section 4503.10 of the Revised Code, the 736  
registrar or deputy registrar shall issue to the applicant a 737  
temporary removable windshield placard. 738

(b) Any active-duty member of the armed forces of the 739  
United States, including the reserve components of the armed 740  
forces and the national guard, who has an illness or injury that 741  
limits or impairs the ability to walk may apply to the registrar 742  
or a deputy registrar for a temporary removable windshield 743  
placard. With the application, the person shall present evidence 744  
of the person's active-duty status and the illness or injury. 745  
Evidence of the illness or injury may include a current 746  
department of defense convalescent leave statement, any 747

department of defense document indicating that the person 748  
currently has an ill or injured casualty status or has limited 749  
duties, or a prescription from any health care provider 750  
prescribing the placard for the applicant. Upon receipt of the 751  
application and the necessary evidence, the registrar or deputy 752  
registrar shall issue the applicant the temporary removable 753  
windshield placard without the payment of any service fee. 754

(2) The temporary removable windshield placard shall be of 755  
the same size and form as the removable windshield placard, 756  
shall be printed in white on a red-colored background, and shall 757  
bear the word "temporary" in letters of such size as the 758  
registrar shall prescribe. A temporary removable windshield 759  
placard also shall bear the date of expiration on the front and 760  
back of the placard, and shall be valid until expired, 761  
surrendered, or revoked, but in no case shall such a placard be 762  
valid for a period of less than sixty days. The registrar shall 763  
provide the application form and shall determine the information 764  
to be included on it, provided that the registrar shall not 765  
require a health care provider's prescription or certification 766  
for a person applying under division (D)(1)(b) of this section. 767  
The registrar also shall determine the material of which the 768  
temporary removable windshield placard is to be made and any 769  
other information to be included on the placard and shall adopt 770  
rules relating to the issuance, expiration, surrender, 771  
revocation, and proper display of those placards. Any temporary 772  
removable windshield placard issued after October 14, 1999, 773  
shall be manufactured in a manner that allows for the expiration 774  
date of the placard to be indicated on it through the punching, 775  
drilling, boring, or creation by any other means of holes in the 776  
placard. 777

(E) If an applicant for a removable windshield placard is 778

a veteran of the armed forces of the United States whose 779  
disability, as defined in division (A) (1) of this section, is 780  
service-connected, the registrar or deputy registrar, upon 781  
receipt of the application, presentation of a signed statement 782  
from the applicant's health care provider certifying the 783  
applicant's disability, and presentation of such documentary 784  
evidence from the department of veterans affairs that the 785  
disability of the applicant meets at least one of the criteria 786  
identified in division (A) (1) of this section and is service- 787  
connected as the registrar may require by rule, but without the 788  
payment of any service fee, shall issue the applicant a 789  
removable windshield placard that is valid until expired, 790  
surrendered, or revoked. 791

(F) Upon a conviction of a violation of division (H) or 792  
(I) of this section, the court shall report the conviction, and 793  
send the placard, if available, to the registrar, who thereupon 794  
shall revoke the privilege of using the placard and send notice 795  
in writing to the placardholder at that holder's last known 796  
address as shown in the records of the bureau, and the 797  
placardholder shall return the placard if not previously 798  
surrendered to the court, to the registrar within ten days 799  
following mailing of the notice. 800

Whenever a person to whom a removable windshield placard 801  
has been issued moves to another state, the person shall 802  
surrender the placard to the registrar; and whenever an 803  
organization to which a placard has been issued changes its 804  
place of operation to another state, the organization shall 805  
surrender the placard to the registrar. 806

(G) Subject to division (F) of section 4511.69 of the 807  
Revised Code, the operator of a motor vehicle displaying a 808

removable windshield placard, temporary removable windshield placard, or the special license plates authorized by this section is entitled to park the motor vehicle in any special parking location reserved for persons with disabilities that limit or impair the ability to walk, also known as handicapped parking spaces or disability parking spaces.

(H) No person or organization that is not eligible for the issuance of license plates or any placard under this section shall willfully and falsely represent that the person or organization is so eligible.

No person or organization shall display license plates issued under this section unless the license plates have been issued for the vehicle on which they are displayed and are valid.

(I) No person or organization to which a removable windshield placard or temporary removable windshield placard is issued shall do either of the following:

(1) Display or permit the display of the placard on any motor vehicle when having reasonable cause to believe the motor vehicle is being used in connection with an activity that does not include providing transportation for persons with disabilities that limit or impair the ability to walk;

(2) Refuse to return or surrender the placard, when required.

(J) If a removable windshield placard, temporary removable windshield placard, or parking card is lost, destroyed, or mutilated, the placardholder or cardholder may obtain a duplicate by doing both of the following:

(1) Furnishing suitable proof of the loss, destruction, or

mutilation to the registrar; 838

(2) Paying a service fee equal to the amount specified in 839  
division (D) or (G) of section 4503.10 of the Revised Code. 840

Any placardholder or cardholder who loses a placard or 841  
card and, after obtaining a duplicate, finds the original, 842  
immediately shall surrender the original placard or card to the 843  
registrar. 844

(K) (1) The registrar shall pay all fees received under 845  
this section for the issuance of removable windshield placards 846  
or temporary removable windshield placards or duplicate 847  
removable windshield placards or cards into the state treasury 848  
to the credit of the state bureau of motor vehicles fund created 849  
in section 4501.25 of the Revised Code. 850

(2) In addition to the fees collected under this section, 851  
the registrar or deputy registrar shall ask each person applying 852  
for a removable windshield placard or temporary removable 853  
windshield placard or duplicate removable windshield placard or 854  
license plate issued under this section, whether the person 855  
wishes to make a two-dollar voluntary contribution to support 856  
rehabilitation employment services. The registrar shall transmit 857  
the contributions received under this division to the treasurer 858  
of state for deposit into the rehabilitation employment fund, 859  
which is hereby created in the state treasury. A deputy 860  
registrar shall transmit the contributions received under this 861  
division to the registrar in the time and manner prescribed by 862  
the registrar. The contributions in the fund shall be used by 863  
the opportunities for Ohioans with disabilities agency to 864  
purchase services related to vocational evaluation, work 865  
adjustment, personal adjustment, job placement, job coaching, 866  
and community-based assessment from accredited community 867

rehabilitation program facilities. 868

(L) For purposes of enforcing this section, every peace 869  
officer is deemed to be an agent of the registrar. Any peace 870  
officer or any authorized employee of the bureau of motor 871  
vehicles who, in the performance of duties authorized by law, 872  
becomes aware of a person whose placard or parking card has been 873  
revoked pursuant to this section, may confiscate that placard or 874  
parking card and return it to the registrar. The registrar shall 875  
prescribe any forms used by law enforcement agencies in 876  
administering this section. 877

No peace officer, law enforcement agency employing a peace 878  
officer, or political subdivision or governmental agency 879  
employing a peace officer, and no employee of the bureau is 880  
liable in a civil action for damages or loss to persons arising 881  
out of the performance of any duty required or authorized by 882  
this section. As used in this division, "peace officer" has the 883  
same meaning as in division (B) of section 2935.01 of the 884  
Revised Code. 885

(M) All applications for registration of motor vehicles, 886  
removable windshield placards, and temporary removable 887  
windshield placards issued under this section, all renewal 888  
notices for such items, and all other publications issued by the 889  
bureau that relate to this section shall set forth the criminal 890  
penalties that may be imposed upon a person who violates any 891  
provision relating to special license plates issued under this 892  
section, the parking of vehicles displaying such license plates, 893  
and the issuance, procurement, use, and display of removable 894  
windshield placards and temporary removable windshield placards 895  
issued under this section. 896

(N) Whoever violates this section is guilty of a 897

misdemeanor of the fourth degree. 898

**Sec. 4723.01.** As used in this chapter: 899

(A) "Registered nurse" means an individual who holds a 900  
current, valid license issued under this chapter that authorizes 901  
the practice of nursing as a registered nurse. 902

(B) "Practice of nursing as a registered nurse" means 903  
providing to individuals and groups nursing care requiring 904  
specialized knowledge, judgment, and skill derived from the 905  
principles of biological, physical, behavioral, social, and 906  
nursing sciences. Such nursing care includes: 907

(1) Identifying patterns of human responses to actual or 908  
potential health problems amenable to a nursing regimen; 909

(2) Executing a nursing regimen through the selection, 910  
performance, management, and evaluation of nursing actions; 911

(3) Assessing health status for the purpose of providing 912  
nursing care; 913

(4) Providing health counseling and health teaching; 914

(5) Administering medications, treatments, and executing 915  
regimens authorized by an individual who is authorized to 916  
practice in this state and is acting within the course of the 917  
individual's professional practice; 918

(6) Teaching, administering, supervising, delegating, and 919  
evaluating nursing practice. 920

(C) "Nursing regimen" may include preventative, 921  
restorative, and health-promotion activities. 922

(D) "Assessing health status" means the collection of data 923  
through nursing assessment techniques, which may include 924



interviews, observation, and physical evaluations for the 925  
purpose of providing nursing care. 926

(E) "Licensed practical nurse" means an individual who 927  
holds a current, valid license issued under this chapter that 928  
authorizes the practice of nursing as a licensed practical 929  
nurse. 930

(F) "The practice of nursing as a licensed practical 931  
nurse" means providing to individuals and groups nursing care 932  
requiring the application of basic knowledge of the biological, 933  
physical, behavioral, social, and nursing sciences at the 934  
direction of a registered nurse or any of the following who is 935  
authorized to practice in this state: a ~~licensed~~ physician, 936  
physician assistant, dentist, podiatrist, optometrist, or 937  
chiropractor, ~~or registered nurse~~. Such nursing care includes: 938

(1) Observation, patient teaching, and care in a diversity 939  
of health care settings; 940

(2) Contributions to the planning, implementation, and 941  
evaluation of nursing; 942

(3) Administration of medications and treatments 943  
authorized by an individual who is authorized to practice in 944  
this state and is acting within the course of the individual's 945  
professional practice on the condition that the licensed 946  
practical nurse is authorized under section 4723.17 of the 947  
Revised Code to administer medications; 948

(4) Administration to an adult of intravenous therapy 949  
authorized by an individual who is authorized to practice in 950  
this state and is acting within the course of the individual's 951  
professional practice, on the condition that the licensed 952  
practical nurse is authorized under section 4723.18 or 4723.181 953

of the Revised Code to perform intravenous therapy and performs 954  
intravenous therapy only in accordance with those sections; 955

(5) Delegation of nursing tasks as directed by a 956  
registered nurse; 957

(6) Teaching nursing tasks to licensed practical nurses 958  
and individuals to whom the licensed practical nurse is 959  
authorized to delegate nursing tasks as directed by a registered 960  
nurse. 961

(G) "Certified registered nurse anesthetist" means a 962  
registered nurse who holds a valid certificate of authority 963  
issued under this chapter that authorizes the practice of 964  
nursing as a certified registered nurse anesthetist in 965  
accordance with section 4723.43 of the Revised Code and rules 966  
adopted by the board of nursing. 967

(H) "Clinical nurse specialist" means a registered nurse 968  
who holds a valid certificate of authority issued under this 969  
chapter that authorizes the practice of nursing as a clinical 970  
nurse specialist in accordance with section 4723.43 of the 971  
Revised Code and rules adopted by the board of nursing. 972

(I) "Certified nurse-midwife" means a registered nurse who 973  
holds a valid certificate of authority issued under this chapter 974  
that authorizes the practice of nursing as a certified nurse- 975  
midwife in accordance with section 4723.43 of the Revised Code 976  
and rules adopted by the board of nursing. 977

(J) "Certified nurse practitioner" means a registered 978  
nurse who holds a valid certificate of authority issued under 979  
this chapter that authorizes the practice of nursing as a 980  
certified nurse practitioner in accordance with section 4723.43 981  
of the Revised Code and rules adopted by the board of nursing. 982

(K) "Physician" means an individual authorized under 983  
Chapter 4731. of the Revised Code to practice medicine and 984  
surgery or osteopathic medicine and surgery. 985

(L) "Collaboration" or "collaborating" means the 986  
following: 987

(1) In the case of a clinical nurse specialist, except as 988  
provided in division (L) (3) of this section, or a certified 989  
nurse practitioner, that one or more podiatrists acting within 990  
the scope of practice of podiatry in accordance with section 991  
4731.51 of the Revised Code and with whom the nurse has entered 992  
into a standard care arrangement or one or more physicians with 993  
whom the nurse has entered into a standard care arrangement are 994  
continuously available to communicate with the clinical nurse 995  
specialist or certified nurse practitioner either in person or 996  
by radio, telephone, or other form of telecommunication; 997

(2) In the case of a certified nurse-midwife, that one or 998  
more physicians with whom the certified nurse-midwife has 999  
entered into a standard care arrangement are continuously 1000  
available to communicate with the certified nurse-midwife either 1001  
in person or by radio, telephone, or other form of 1002  
telecommunication; 1003

(3) In the case of a clinical nurse specialist who 1004  
practices the nursing specialty of mental health or psychiatric 1005  
mental health without being authorized to prescribe drugs and 1006  
therapeutic devices, that one or more physicians are 1007  
continuously available to communicate with the nurse either in 1008  
person or by radio, telephone, or other form of 1009  
telecommunication. 1010

(M) "Supervision," as it pertains to a certified 1011

registered nurse anesthetist, means that the certified 1012  
registered nurse anesthetist is under the direction of a 1013  
podiatrist acting within the podiatrist's scope of practice in 1014  
accordance with section 4731.51 of the Revised Code, a dentist 1015  
acting within the dentist's scope of practice in accordance with 1016  
Chapter 4715. of the Revised Code, or a physician, and, when 1017  
administering anesthesia, the certified registered nurse 1018  
anesthetist is in the immediate presence of the podiatrist, 1019  
dentist, or physician. 1020

(N) "Standard care arrangement" means a written, formal 1021  
guide for planning and evaluating a patient's health care that 1022  
is developed by one or more collaborating physicians or 1023  
podiatrists and a clinical nurse specialist, certified nurse- 1024  
midwife, or certified nurse practitioner and meets the 1025  
requirements of section 4723.431 of the Revised Code. 1026

(O) "Advanced practice registered nurse" means a certified 1027  
registered nurse anesthetist, clinical nurse specialist, 1028  
certified nurse-midwife, or certified nurse practitioner. 1029

(P) "Dialysis care" means the care and procedures that a 1030  
dialysis technician or dialysis technician intern is authorized 1031  
to provide and perform, as specified in section 4723.72 of the 1032  
Revised Code. 1033

(Q) "Dialysis technician" means an individual who holds a 1034  
current, valid certificate to practice as a dialysis technician 1035  
issued under section 4723.75 of the Revised Code. 1036

(R) "Dialysis technician intern" means an individual who 1037  
holds a current, valid certificate to practice as a dialysis 1038  
technician intern issued under section 4723.75 of the Revised 1039  
Code. 1040

(S) "Certified community health worker" means an 1041  
individual who holds a current, valid certificate as a community 1042  
health worker issued under section 4723.85 of the Revised Code. 1043

(T) "Medication aide" means an individual who holds a 1044  
current, valid certificate issued under this chapter that 1045  
authorizes the individual to administer medication in accordance 1046  
with section 4723.67 of the Revised Code. 1047

**Sec. 4723.06.** (A) The board of nursing shall: 1048

(1) Administer and enforce the provisions of this chapter, 1049  
including the taking of disciplinary action for violations of 1050  
section 4723.28 of the Revised Code, any other provisions of 1051  
this chapter, or rules adopted under this chapter; 1052

(2) Develop criteria that an applicant must meet to be 1053  
eligible to sit for the examination for licensure to practice as 1054  
a registered nurse or as a licensed practical nurse; 1055

(3) Issue and renew nursing licenses, dialysis technician 1056  
certificates, and community health worker certificates, as 1057  
provided in this chapter; 1058

(4) Define the minimum standards for educational programs 1059  
of the schools of registered nursing and schools of practical 1060  
nursing in this state; 1061

(5) Survey, inspect, and grant full approval to 1062  
prelicensure nursing education programs in this state that meet 1063  
the standards established by rules adopted under section 4723.07 1064  
of the Revised Code. Prelicensure nursing education programs 1065  
include, but are not limited to, diploma, associate degree, 1066  
baccalaureate degree, master's degree, and doctor of nursing 1067  
programs leading to initial licensure to practice nursing as a 1068  
registered nurse and practical nurse programs leading to initial 1069

licensure to practice nursing as a licensed practical nurse. 1070

(6) Grant conditional approval, by a vote of a quorum of 1071  
the board, to a new prelicensure nursing education program or a 1072  
program that is being reestablished after having ceased to 1073  
operate, if the program meets and maintains the minimum 1074  
standards of the board established by rules adopted under 1075  
section 4723.07 of the Revised Code. If the board does not grant 1076  
conditional approval, it shall hold an adjudication under 1077  
Chapter 119. of the Revised Code to consider conditional 1078  
approval of the program. If the board grants conditional 1079  
approval, at the first meeting following completion of the 1080  
survey process required by division (A)(5) of this section, the 1081  
board shall determine whether to grant full approval to the 1082  
program. If the board does not grant full approval or if it 1083  
appears that the program has failed to meet and maintain 1084  
standards established by rules adopted under section 4723.07 of 1085  
the Revised Code, the board shall hold an adjudication under 1086  
Chapter 119. of the Revised Code to consider the program. Based 1087  
on results of the adjudication, the board may continue or 1088  
withdraw conditional approval, or grant full approval. 1089

(7) Place on provisional approval, for a period of time 1090  
specified by the board, a program that has ceased to meet and 1091  
maintain the minimum standards of the board established by rules 1092  
adopted under section 4723.07 of the Revised Code. Prior to or 1093  
at the end of the period, the board shall reconsider whether the 1094  
program meets the standards and shall grant full approval if it 1095  
does. If it does not, the board may withdraw approval, pursuant 1096  
to an adjudication under Chapter 119. of the Revised Code. 1097

(8) Approve continuing education programs and courses 1098  
under standards established in rules adopted under sections 1099

4723.07, 4723.69, 4723.79, and 4723.88 of the Revised Code;	1100
(9) Establish a program for monitoring chemical dependency	1101
in accordance with section 4723.35 of the Revised Code;	1102
(10) Establish the practice intervention and improvement	1103
program in accordance with section 4723.282 of the Revised Code;	1104
(11) Issue and renew certificates of authority to practice	1105
nursing as a certified registered nurse anesthetist, clinical	1106
nurse specialist, certified nurse-midwife, or certified nurse	1107
practitioner;	1108
(12) Approve under section 4723.46 of the Revised Code	1109
national certifying organizations for examination and	1110
certification of certified registered nurse anesthetists,	1111
clinical nurse specialists, certified nurse-midwives, or	1112
certified nurse practitioners;	1113
(13) Issue and renew certificates to prescribe in	1114
accordance with sections 4723.48 and 4723.486 of the Revised	1115
Code;	1116
(14) Grant approval to the <del>planned classroom and clinical</del>	1117
<u>course of study in advanced pharmacology and related topics</u>	1118
required by section 4723.482 of the Revised Code to be eligible	1119
for a certificate to prescribe;	1120
(15) Make an annual edition of the formulary established	1121
in rules adopted under section 4723.50 of the Revised Code	1122
available to the public either in printed form or by electronic	1123
means and, as soon as possible after any revision of the	1124
formulary becomes effective, make the revision available to the	1125
public in printed form or by electronic means;	1126
(16) Provide guidance and make recommendations to the	1127

general assembly, the governor, state agencies, and the federal 1128  
government with respect to the regulation of the practice of 1129  
nursing and the enforcement of this chapter; 1130

(17) Make an annual report to the governor, which shall be 1131  
open for public inspection; 1132

(18) Maintain and have open for public inspection the 1133  
following records: 1134

(a) A record of all its meetings and proceedings; 1135

(b) A record of all applicants for, and holders of, 1136  
licenses and certificates issued by the board under this chapter 1137  
or in accordance with rules adopted under this chapter. The 1138  
record shall be maintained in a format determined by the board. 1139

(c) A list of education and training programs approved by 1140  
the board. 1141

(19) Deny approval to a person who submits or causes to be 1142  
submitted false, misleading, or deceptive statements, 1143  
information, or documentation to the board in the process of 1144  
applying for approval of a new education or training program. If 1145  
the board proposes to deny approval of a new education or 1146  
training program, it shall do so pursuant to an adjudication 1147  
conducted under Chapter 119. of the Revised Code. 1148

(B) The board may fulfill the requirement of division (A) 1149  
(8) of this section by authorizing persons who meet the 1150  
standards established in rules adopted under section 4723.07 of 1151  
the Revised Code to approve continuing education programs and 1152  
courses. Persons so authorized shall approve continuing 1153  
education programs and courses in accordance with standards 1154  
established in rules adopted under section 4723.07 of the 1155  
Revised Code. 1156



Persons seeking authorization to approve continuing education programs and courses shall apply to the board and pay the appropriate fee established under section 4723.08 of the Revised Code. Authorizations to approve continuing education programs and courses shall expire, and may be renewed according to the schedule established in rules adopted under section 4723.07 of the Revised Code.

In addition to approving continuing education programs under division (A) (8) of this section, the board may sponsor continuing education activities that are directly related to the statutes and rules the board enforces.

**Sec. 4723.07.** In accordance with Chapter 119. of the Revised Code, the board of nursing shall adopt and may amend and rescind rules that establish all of the following:

(A) Provisions for the board's government and control of its actions and business affairs;

(B) Minimum standards for nursing education programs that prepare graduates to be licensed under this chapter and procedures for granting, renewing, and withdrawing approval of those programs;

(C) Criteria that applicants for licensure must meet to be eligible to take examinations for licensure;

(D) Standards and procedures for renewal of the licenses and certificates issued by the board;

(E) Standards for approval of continuing nursing education programs and courses for registered nurses, licensed practical nurses, certified registered nurse anesthetists, clinical nurse specialists, certified nurse-midwives, and certified nurse practitioners. The standards may provide for approval of

continuing nursing education programs and courses that have been 1186  
approved by other state boards of nursing or by national 1187  
accreditation systems for nursing, including, but not limited 1188  
to, the American nurses' credentialing center and the national 1189  
association for practical nurse education and service. 1190

(F) Standards that persons must meet to be authorized by 1191  
the board to approve continuing education programs and courses 1192  
and a schedule by which that authorization expires and may be 1193  
renewed; 1194

(G) Requirements, including continuing education 1195  
requirements, for reactivating inactive licenses or 1196  
certificates, and for reinstating licenses or certificates that 1197  
have lapsed; 1198

(H) Conditions that may be imposed for reinstatement of a 1199  
license or certificate following action taken under section 1200  
3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised 1201  
Code resulting in a license or certificate suspension; 1202

(I) Requirements for board approval of courses in 1203  
medication administration by licensed practical nurses; 1204

(J) Criteria for evaluating the qualifications of an 1205  
applicant for a license to practice nursing as a registered 1206  
nurse, a license to practice nursing as a licensed practical 1207  
nurse, or a certificate of authority issued under division (B) 1208  
of section 4723.41 of the Revised Code for the purpose of 1209  
issuing the license or certificate by the board's endorsement of 1210  
the applicant's authority to practice issued by the licensing 1211  
agency of another state; 1212

(K) Universal and standard precautions that shall be used 1213  
by each licensee or certificate holder. The rules shall define 1214

and establish requirements for universal and standard	1215
precautions that include the following:	1216
(1) Appropriate use of hand washing;	1217
(2) Disinfection and sterilization of equipment;	1218
(3) Handling and disposal of needles and other sharp instruments;	1219 1220
(4) Wearing and disposal of gloves and other protective garments and devices.	1221 1222
(L) Standards and procedures for approving certificates of authority to practice nursing as a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner, and for renewal of those certificates;	1223 1224 1225 1226 1227
(M) Quality assurance standards for certified registered nurse anesthetists, clinical nurse specialists, certified nurse- midwives, or certified nurse practitioners;	1228 1229 1230
(N) Additional criteria for the standard care arrangement required by section 4723.431 of the Revised Code entered into by a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and the nurse's collaborating physician or podiatrist;	1231 1232 1233 1234 1235
(O) Continuing education standards for clinical nurse specialists who were issued a certificate of authority to practice as a clinical nurse specialist under division (C) of section 4723.41 of the Revised Code as that division existed at any time before <del>the effective date of this amendment</del> <u>March 20,</u> <u>2013</u> ;	1236 1237 1238 1239 1240 1241
(P) For purposes of division (B) (31) of section 4723.28 of	1242

the Revised Code, the actions, omissions, or other circumstances 1243  
that constitute failure to establish and maintain professional 1244  
boundaries with a patient; 1245

(Q) Standards and procedures for delegation under division 1246  
(C) of section 4723.48 of the Revised Code of the authority to 1247  
administer drugs. 1248

The board may adopt other rules necessary to carry out the 1249  
provisions of this chapter. The rules shall be adopted in 1250  
accordance with Chapter 119. of the Revised Code. 1251

**Sec. 4723.18.** (A) The board of nursing shall authorize a 1252  
licensed practical nurse to administer to an adult intravenous 1253  
therapy if the nurse supplies evidence satisfactory to the board 1254  
that all of the following are the case: 1255

(1) The nurse holds a current, valid license issued under 1256  
this chapter to practice nursing as a licensed practical nurse. 1257

(2) The nurse has been authorized under section ~~4723.18-~~ 1258  
4723.17 of the Revised Code to administer medications. 1259

(3) The nurse successfully completed a course of study in 1260  
the safe performance of intravenous therapy approved by the 1261  
board pursuant to section 4723.19 of the Revised Code or by an 1262  
agency in another jurisdiction that regulates the practice of 1263  
nursing and has requirements for intravenous therapy course 1264  
approval that are substantially similar to the requirements in 1265  
division (B) of section 4723.19 of the Revised Code, as 1266  
determined by the board. 1267

(4) The nurse has successfully completed a minimum of 1268  
forty hours of training that includes all of the following: 1269

(a) The curriculum established by rules adopted by the 1270

board;	1271
(b) Training in the anatomy and physiology of the	1272
cardiovascular system, signs and symptoms of local and systemic	1273
complications in the administration of fluids and antibiotic	1274
additives, and guidelines for management of these complications;	1275
(c) Any other training or instruction the board considers	1276
appropriate;	1277
(d) A testing component that requires the nurse to perform	1278
a successful demonstration of the intravenous procedures,	1279
including all skills needed to perform them safely.	1280
(B) Except as provided in section 4723.181 of the Revised	1281
Code and subject to the restrictions in division (D) of this	1282
section, a licensed practical nurse may perform intravenous	1283
therapy on an adult patient only if authorized by the board	1284
pursuant to division (A) of this section and only at the	1285
direction of one of the following:	1286
(1) A <del>licensed</del> physician, <u>physician assistant</u> , dentist,	1287
optometrist, or podiatrist who <u>is authorized to practice in this</u>	1288
<u>state and</u> , except as provided in division (C) (2) of this	1289
section, is present and readily available at the facility where	1290
the intravenous therapy procedure is performed;	1291
(2) A registered nurse in accordance with division (C) of	1292
this section.	1293
(C) (1) Except as provided in division (C) (2) of this	1294
section and section 4723.181 of the Revised Code, when a	1295
licensed practical nurse authorized by the board to perform	1296
intravenous therapy performs an intravenous therapy procedure at	1297
the direction of a registered nurse, the registered nurse or	1298
another registered nurse shall be readily available at the site	1299

where the intravenous therapy is performed, and before the 1300  
licensed practical nurse initiates the intravenous therapy, the 1301  
registered nurse shall personally perform an on-site assessment 1302  
of the adult patient who is to receive the intravenous therapy. 1303

(2) When a licensed practical nurse authorized by the 1304  
board to perform intravenous therapy performs an intravenous 1305  
therapy procedure in a home as defined in section 3721.10 of the 1306  
Revised Code, or in an intermediate care facility for 1307  
individuals with intellectual disabilities as defined in section 1308  
5124.01 of the Revised Code, at the direction of a registered 1309  
nurse or ~~licensed~~ a physician, physician assistant, dentist, 1310  
optometrist, or podiatrist who is authorized to practice in this 1311  
state, a registered nurse shall be on the premises of the home 1312  
or facility or accessible by some form of telecommunication. 1313

(D) No licensed practical nurse shall perform any of the 1314  
following intravenous therapy procedures: 1315

(1) Initiating or maintaining any of the following: 1316

(a) Blood or blood components; 1317

(b) Solutions for total parenteral nutrition; 1318

(c) Any cancer therapeutic medication including, but not 1319  
limited to, cancer chemotherapy or an anti-neoplastic agent; 1320

(d) Solutions administered through any central venous line 1321  
or arterial line or any other line that does not terminate in a 1322  
peripheral vein, except that a licensed practical nurse 1323  
authorized by the board to perform intravenous therapy may 1324  
maintain the solutions specified in division (D) (6) (a) of this 1325  
section that are being administered through a central venous 1326  
line or peripherally inserted central catheter; 1327

(e) Any investigational or experimental medication.	1328
(2) Initiating intravenous therapy in any vein, except that a licensed practical nurse authorized by the board to perform intravenous therapy may initiate intravenous therapy in accordance with this section in a vein of the hand, forearm, or antecubital fossa;	1329 1330 1331 1332 1333
(3) Discontinuing a central venous, arterial, or any other line that does not terminate in a peripheral vein;	1334 1335
(4) Initiating or discontinuing a peripherally inserted central catheter;	1336 1337
(5) Mixing, preparing, or reconstituting any medication for intravenous therapy, except that a licensed practical nurse authorized by the board to perform intravenous therapy may prepare or reconstitute an antibiotic additive;	1338 1339 1340 1341
(6) Administering medication via the intravenous route, including all of the following activities:	1342 1343
(a) Adding medication to an intravenous solution or to an existing infusion, except that a licensed practical nurse authorized by the board to perform intravenous therapy may do any of the following:	1344 1345 1346 1347
(i) Initiate an intravenous infusion containing one or more of the following elements: dextrose 5%, normal saline, lactated ringers, sodium chloride .45%, sodium chloride 0.2%, sterile water;	1348 1349 1350 1351
(ii) Hang subsequent containers of the intravenous solutions specified in division (D) (6) (a) (i) of this section that contain vitamins or electrolytes, if a registered nurse initiated the infusion of that same intravenous solution;	1352 1353 1354 1355

(iii) Initiate or maintain an intravenous infusion containing an antibiotic additive.	1356 1357
(b) Injecting medication via a direct intravenous route, except that a licensed practical nurse authorized by the board to perform intravenous therapy may inject heparin or normal saline to flush an intermittent infusion device or heparin lock including, but not limited to, bolus or push.	1358 1359 1360 1361 1362
(7) Changing tubing on any line including, but not limited to, an arterial line or a central venous line, except that a licensed practical nurse authorized by the board to perform intravenous therapy may change tubing on an intravenous line that terminates in a peripheral vein;	1363 1364 1365 1366 1367
(8) Programming or setting any function of a patient controlled infusion pump.	1368 1369
(E) Notwithstanding divisions (A) and (D) of this section, at the direction of a physician or a registered nurse, a licensed practical nurse authorized by the board to perform intravenous therapy may perform the following activities for the purpose of performing dialysis:	1370 1371 1372 1373 1374
(1) The routine administration and regulation of saline solution for the purpose of maintaining an established fluid plan;	1375 1376 1377
(2) The administration of a heparin dose intravenously;	1378
(3) The administration of a heparin dose peripherally via a fistula needle;	1379 1380
(4) The loading and activation of a constant infusion pump;	1381 1382
(5) The intermittent injection of a dose of medication	1383



that is administered via the hemodialysis blood circuit and 1384  
through the patient's venous access. 1385

(F) No person shall employ or direct a licensed practical 1386  
nurse to perform an intravenous therapy procedure without first 1387  
verifying that the licensed practical nurse is authorized by the 1388  
board to perform intravenous therapy. 1389

**Sec. 4723.181.** (A) A licensed practical nurse may perform 1390  
on any person any of the intravenous therapy procedures 1391  
specified in division (B) of this section without receiving 1392  
authorization to perform intravenous therapy from the board of 1393  
nursing under section 4723.18 of the Revised Code, if both of 1394  
the following apply: 1395

(1) The licensed practical nurse acts at the direction of 1396  
a registered nurse or a ~~licensed physician,~~ physician assistant, 1397  
dentist, optometrist, or podiatrist who is authorized to 1398  
practice in this state and the registered nurse, physician, 1399  
physician assistant, dentist, optometrist, or podiatrist is on 1400  
the premises where the procedure is to be performed or 1401  
accessible by some form of telecommunication. 1402

(2) The licensed practical nurse can demonstrate the 1403  
knowledge, skills, and ability to perform the procedure safely. 1404

(B) The intravenous therapy procedures that a licensed 1405  
practical nurse may perform pursuant to division (A) of this 1406  
section are limited to the following: 1407

(1) Verification of the type of peripheral intravenous 1408  
solution being administered; 1409

(2) Examination of a peripheral infusion site and the 1410  
extremity for possible infiltration; 1411

(3) Regulation of a peripheral intravenous infusion 1412  
according to the prescribed flow rate; 1413

(4) Discontinuation of a peripheral intravenous device at 1414  
the appropriate time; 1415

(5) Performance of routine dressing changes at the 1416  
insertion site of a peripheral venous or arterial infusion, 1417  
peripherally inserted central catheter infusion, or central 1418  
venous pressure subclavian infusion. 1419

**Sec. 4723.48.** (A) A clinical nurse specialist, certified 1420  
nurse-midwife, or certified nurse practitioner seeking authority 1421  
to prescribe drugs and therapeutic devices shall file with the 1422  
board of nursing a written application for a certificate to 1423  
prescribe. The board of nursing shall issue a certificate to 1424  
prescribe to each applicant who meets the requirements specified 1425  
in section 4723.482 or 4723.485 of the Revised Code. 1426

Except as provided in division (B) of this section, the 1427  
initial certificate to prescribe that the board issues to an 1428  
applicant shall be issued as an externship certificate. Under an 1429  
externship certificate, the nurse may obtain experience in 1430  
prescribing drugs and therapeutic devices by participating in an 1431  
externship that evaluates the nurse's competence, knowledge, and 1432  
skill in pharmacokinetic principles and their clinical 1433  
application to the specialty being practiced. During the 1434  
externship, the nurse may prescribe drugs and therapeutic 1435  
devices only when one or more physicians are providing 1436  
supervision in accordance with rules adopted under section 1437  
4723.50 of the Revised Code. 1438

After completing the externship, the holder of an 1439  
externship certificate may apply for a new certificate to 1440

prescribe. On receipt of the new certificate, the nurse may 1441  
prescribe drugs and therapeutic devices in collaboration with 1442  
one or more physicians or podiatrists. 1443

(B) In the case of an applicant who meets the requirements 1444  
of division (C) of section 4723.482 of the Revised Code, the 1445  
initial certificate to prescribe that the board issues to the 1446  
applicant under this section shall not be an externship 1447  
certificate. The applicant shall be issued a certificate to 1448  
prescribe that permits the recipient to prescribe drugs and 1449  
therapeutic devices in collaboration with one or more physicians 1450  
or podiatrists. 1451

(C) (1) The holder of a certificate issued under this 1452  
section may delegate to a person not otherwise authorized to 1453  
administer drugs the authority to administer to a specified 1454  
patient a drug, other than a controlled substance, listed in the 1455  
formulary established in rules adopted under section 4723.50 of 1456  
the Revised Code. The delegation shall be in accordance with 1457  
division (C) (2) of this section and standards and procedures 1458  
established in rules adopted under division (Q) of section 1459  
4723.07 of the Revised Code. 1460

(2) Prior to delegating the authority, the certificate 1461  
holder shall do both of the following: 1462

(a) Assess the patient and determine that the drug is 1463  
appropriate for the patient; 1464

(b) Determine that the person to whom the authority will 1465  
be delegated has met the conditions specified in division (D) of 1466  
section 4723.489 of the Revised Code. 1467

**Sec. 4723.482.** (A) Except as provided in divisions (C) and 1468  
(D) of this section, an applicant shall include with the 1469

application submitted under section 4723.48 of the Revised Code	1470
all of the following:	1471
(1) Evidence of holding a current, valid certificate of	1472
authority to practice as a clinical nurse specialist, certified	1473
nurse-midwife, or certified nurse practitioner that was issued	1474
by meeting the requirements of division (A) of section 4723.41	1475
of the Revised Code;	1476
(2) Evidence of successfully completing the course of	1477
study in advanced pharmacology and related topics in accordance	1478
with the requirements specified in division (B) of this section;	1479
(3) The fee required by section 4723.08 of the Revised	1480
Code for a certificate to prescribe;	1481
(4) Any additional information the board of nursing	1482
requires pursuant to rules adopted under section 4723.50 of the	1483
Revised Code.	1484
(B) With respect to the course of study in advanced	1485
pharmacology and related topics that must be successfully	1486
completed to obtain a certificate to prescribe, all of the	1487
following requirements apply:	1488
(1) The course of study shall be completed not longer than	1489
three years before the application for the certificate to	1490
prescribe is filed.	1491
(2) <del>Except as provided in division (E) of this section,</del>	1492
<del>the course of study shall consist of planned classroom and</del>	1493
<del>clinical instruction. The total length of the course of study</del>	1494
shall be not less than forty-five contact hours.	1495
(3) The course of study shall meet the requirements to be	1496
approved by the board in accordance with standards established	1497

in rules adopted under section 4723.50 of the Revised Code.	1498
(4) The content of the course of study shall be specific to the applicant's nursing specialty.	1499 1500
(5) The instruction provided in the course of study shall include all of the following:	1501 1502
(a) A minimum of thirty-six contact hours of instruction in advanced pharmacology that includes pharmacokinetic principles and clinical application and the use of drugs and therapeutic devices in the prevention of illness and maintenance of health;	1503 1504 1505 1506 1507
(b) Instruction in the fiscal and ethical implications of prescribing drugs and therapeutic devices;	1508 1509
(c) Instruction in the state and federal laws that apply to the authority to prescribe;	1510 1511
(d) Instruction that is specific to schedule II controlled substances, including instruction in all of the following:	1512 1513
(i) Indications for the use of schedule II controlled substances in drug therapies;	1514 1515
(ii) The most recent guidelines for pain management therapies, as established by state and national organizations such as the Ohio pain initiative and the American pain society;	1516 1517 1518
(iii) Fiscal and ethical implications of prescribing schedule II controlled substances;	1519 1520
(iv) State and federal laws that apply to the authority to prescribe schedule II controlled substances;	1521 1522
(v) Prevention of abuse and diversion of schedule II controlled substances, including identification of the risk of	1523 1524

abuse and diversion, recognition of abuse and diversion, types 1525  
of assistance available for prevention of abuse and diversion, 1526  
and methods of establishing safeguards against abuse and 1527  
diversion. 1528

(e) Any additional instruction required pursuant to rules 1529  
adopted under section 4723.50 of the Revised Code. 1530

(C) An applicant who practiced or is practicing as a 1531  
clinical nurse specialist, certified nurse-midwife, or certified 1532  
nurse practitioner in another jurisdiction or as an employee of 1533  
the United States government, and is not seeking authority to 1534  
prescribe drugs and therapeutic devices by meeting the 1535  
requirements of division (A) or (D) of this section, shall 1536  
include with the application submitted under section 4723.48 of 1537  
the Revised Code all of the following: 1538

(1) Evidence of holding a current, valid certificate of 1539  
authority issued under this chapter to practice as a clinical 1540  
nurse specialist, certified nurse-midwife, or certified nurse 1541  
practitioner; 1542

(2) The fee required by section 4723.08 of the Revised 1543  
Code for a certificate to prescribe; 1544

(3) Either of the following: 1545

(a) Evidence of having held, for a continuous period of at 1546  
least one year during the three years immediately preceding the 1547  
date of application, valid authority issued by another 1548  
jurisdiction to prescribe therapeutic devices and drugs, 1549  
including at least some controlled substances; 1550

(b) Evidence of having been employed by the United States 1551  
government and authorized, for a continuous period of at least 1552  
one year during the three years immediately preceding the date 1553

of application, to prescribe therapeutic devices and drugs, 1554  
including at least some controlled substances, in conjunction 1555  
with that employment. 1556

(4) Evidence of having completed a two-hour course of 1557  
instruction approved by the board in the laws of this state that 1558  
govern drugs and prescriptive authority; 1559

(5) Any additional information the board requires pursuant 1560  
to rules adopted under section 4723.50 of the Revised Code. 1561

(D) An applicant who practiced or is practicing as a 1562  
clinical nurse specialist, certified nurse-midwife, or certified 1563  
nurse practitioner in another jurisdiction or as an employee of 1564  
the United States government, and is not seeking authority to 1565  
prescribe drugs and therapeutic devices by meeting the 1566  
requirements of division (A) or (C) of this section, shall 1567  
include with the application submitted under section 4723.48 of 1568  
the Revised Code all of the following: 1569

(1) Evidence of holding a current, valid certificate of 1570  
authority issued under this chapter to practice as a clinical 1571  
nurse specialist, certified nurse-midwife, or certified nurse 1572  
practitioner; 1573

(2) The fee required by section 4723.08 of the Revised 1574  
Code for a certificate to prescribe; 1575

(3) Either of the following: 1576

(a) Evidence of having held, for a continuous period of at 1577  
least one year during the three years immediately preceding the 1578  
date of application, valid authority issued by another 1579  
jurisdiction to prescribe therapeutic devices and drugs, 1580  
excluding controlled substances; 1581

(b) Evidence of having been employed by the United States government and authorized, for a continuous period of at least one year during the three years immediately preceding the date of application, to prescribe therapeutic devices and drugs, excluding controlled substances, in conjunction with that employment.

(4) Any additional information the board requires pursuant to rules adopted under section 4723.50 of the Revised Code.

~~(E) In the case of an applicant who meets the requirements of division (C) or (D) of this section other than the requirements of division (C) (3) or (D) (3) of this section and is seeking authority to prescribe drugs and therapeutic devices by meeting the requirements of division (A) of this section, the applicant may complete the instruction that is specific to schedule II controlled substances, as required by division (B) (5) (d) of this section, through an internet based course of study in lieu of completing the instruction through a course of study consisting of planned classroom and clinical instruction.~~

Sec. 4723.489. A person not otherwise authorized to administer drugs may administer a drug to a specified patient if all of the following conditions are met:

(A) The authority to administer the drug is delegated to the person by an advanced practice registered nurse who is a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and holds a certificate to prescribe issued under section 4723.48 of the Revised Code.

(B) The drug is listed in the formulary established in rules adopted under section 4723.50 of the Revised Code but is not a controlled substance and is not to be administered



intravenously. 1611

(C) The drug is to be administered at a location other 1612  
than a hospital inpatient care unit, as defined in section 1613  
3727.50 of the Revised Code; a hospital emergency department or 1614  
a freestanding emergency department; or an ambulatory surgical 1615  
facility, as defined in section 3702.30 of the Revised Code. 1616

(D) The person has successfully completed education based 1617  
on a recognized body of knowledge concerning drug administration 1618  
and demonstrates to the person's employer the knowledge, skills, 1619  
and ability to administer the drug safely. 1620

(E) The person's employer has given the advanced practice 1621  
registered nurse access to documentation, in written or 1622  
electronic form, showing that the person has met the conditions 1623  
specified in division (D) of this section. 1624

(F) The advanced practice registered nurse is physically 1625  
present at the location where the drug is administered. 1626

**Sec. 4723.50.** (A) In accordance with Chapter 119. of the 1627  
Revised Code, the board of nursing shall adopt rules as 1628  
necessary to implement the provisions of this chapter pertaining 1629  
to the authority of clinical nurse specialists, certified nurse- 1630  
midwives, and certified nurse practitioners to prescribe drugs 1631  
and therapeutic devices and the issuance and renewal of 1632  
certificates to prescribe. 1633

The board shall adopt rules that are consistent with the 1634  
recommendations the board receives from the committee on 1635  
prescriptive governance pursuant to section 4723.492 of the 1636  
Revised Code. After reviewing a recommendation submitted by the 1637  
committee, the board may either adopt the recommendation as a 1638  
rule or ask the committee to reconsider and resubmit the 1639

recommendation. The board shall not adopt any rule that does not 1640  
conform to a recommendation made by the committee. 1641

(B) The board shall adopt rules under this section that do 1642  
all of the following: 1643

(1) Establish a formulary listing the types of drugs and 1644  
therapeutic devices that may be prescribed by a clinical nurse 1645  
specialist, certified nurse-midwife, or certified nurse 1646  
practitioner. The formulary may include controlled substances, 1647  
as defined in section 3719.01 of the Revised Code. The formulary 1648  
shall not permit the prescribing of any drug or device to 1649  
perform or induce an abortion. 1650

(2) Establish safety standards to be followed by a 1651  
clinical nurse specialist, certified nurse-midwife, or certified 1652  
nurse practitioner when personally furnishing to patients 1653  
complete or partial supplies of antibiotics, antifungals, 1654  
scabicides, contraceptives, prenatal vitamins, 1655  
antihypertensives, drugs and devices used in the treatment of 1656  
diabetes, drugs and devices used in the treatment of asthma, and 1657  
drugs used in the treatment of dyslipidemia; 1658

(3) Establish criteria for the components of the standard 1659  
care arrangements described in section 4723.431 of the Revised 1660  
Code that apply to the authority to prescribe, including the 1661  
components that apply to the authority to prescribe schedule II 1662  
controlled substances. The rules shall be consistent with that 1663  
section and include all of the following: 1664

(a) Quality assurance standards; 1665

(b) Standards for periodic review by a collaborating 1666  
physician or podiatrist of the records of patients treated by 1667  
the clinical nurse specialist, certified nurse-midwife, or 1668

certified nurse practitioner; 1669

(c) Acceptable travel time between the location at which 1670  
the clinical nurse specialist, certified nurse-midwife, or 1671  
certified nurse practitioner is engaging in the prescribing 1672  
components of the nurse's practice and the location of the 1673  
nurse's collaborating physician or podiatrist; 1674

(d) Any other criteria recommended by the committee on 1675  
prescriptive governance. 1676

(4) Establish standards and procedures for issuance and 1677  
renewal of a certificate to prescribe, including specification 1678  
of any additional information the board may require under 1679  
division (A) (4), (C) (5), or (D) ~~(5)~~ (4) of section 4723.482 ~~or,~~ 1680  
division (B) (3) of section 4723.485, or division (B) (3) of 1681  
section 4723.486 of the Revised Code; 1682

(5) Establish standards for board approval of the course 1683  
of study in advanced pharmacology and related topics required by 1684  
section 4723.482 of the Revised Code; 1685

(6) Establish requirements for board approval of the two- 1686  
hour course of instruction in the laws of this state as required 1687  
under division (C) (4) of section 4723.482 of the Revised Code 1688  
and division (B) (2) of section 4723.484 of the Revised Code; 1689

(7) Establish standards and procedures for the appropriate 1690  
conduct of an externship as described in section 4723.484 of the 1691  
Revised Code, including the following: 1692

(a) Standards and procedures to be used in evaluating an 1693  
individual's participation in an externship; 1694

(b) Standards and procedures for the supervision that a 1695  
physician must provide during an externship, including 1696

supervision provided by working with the participant and 1697  
supervision provided by making timely reviews of the records of 1698  
patients treated by the participant. The manner in which 1699  
supervision must be provided may vary according to the location 1700  
where the participant is practicing and with the participant's 1701  
level of experience. 1702

**Sec. 4729.01.** As used in this chapter: 1703

(A) "Pharmacy," except when used in a context that refers 1704  
to the practice of pharmacy, means any area, room, rooms, place 1705  
of business, department, or portion of any of the foregoing 1706  
where the practice of pharmacy is conducted. 1707

(B) "Practice of pharmacy" means providing pharmacist care 1708  
requiring specialized knowledge, judgment, and skill derived 1709  
from the principles of biological, chemical, behavioral, social, 1710  
pharmaceutical, and clinical sciences. As used in this division, 1711  
"pharmacist care" includes the following: 1712

(1) Interpreting prescriptions; 1713

(2) Dispensing drugs and drug therapy related devices; 1714

(3) Compounding drugs; 1715

(4) Counseling individuals with regard to their drug 1716  
therapy, recommending drug therapy related devices, and 1717  
assisting in the selection of drugs and appliances for treatment 1718  
of common diseases and injuries and providing instruction in the 1719  
proper use of the drugs and appliances; 1720

(5) Performing drug regimen reviews with individuals by 1721  
discussing all of the drugs that the individual is taking and 1722  
explaining the interactions of the drugs; 1723

(6) Performing drug utilization reviews with licensed 1724

health professionals authorized to prescribe drugs when the 1725  
pharmacist determines that an individual with a prescription has 1726  
a drug regimen that warrants additional discussion with the 1727  
prescriber; 1728

(7) Advising an individual and the health care 1729  
professionals treating an individual with regard to the 1730  
individual's drug therapy; 1731

(8) Acting pursuant to a consult agreement with a 1732  
physician authorized under Chapter 4731. of the Revised Code to 1733  
practice medicine and surgery or osteopathic medicine and 1734  
surgery, if an agreement has been established with the 1735  
physician; 1736

(9) Engaging in the administration of immunizations to the 1737  
extent authorized by section 4729.41 of the Revised Code. 1738

(C) "Compounding" means the preparation, mixing, 1739  
assembling, packaging, and labeling of one or more drugs in any 1740  
of the following circumstances: 1741

(1) Pursuant to a prescription issued by a licensed health 1742  
professional authorized to prescribe drugs; 1743

(2) Pursuant to the modification of a prescription made in 1744  
accordance with a consult agreement; 1745

(3) As an incident to research, teaching activities, or 1746  
chemical analysis; 1747

(4) In anticipation of orders for drugs pursuant to 1748  
prescriptions, based on routine, regularly observed dispensing 1749  
patterns; 1750

(5) Pursuant to a request made by a licensed health 1751  
professional authorized to prescribe drugs for a drug that is to 1752

be used by the professional for the purpose of direct 1753  
administration to patients in the course of the professional's 1754  
practice, if all of the following apply: 1755

(a) At the time the request is made, the drug is not 1756  
commercially available regardless of the reason that the drug is 1757  
not available, including the absence of a manufacturer for the 1758  
drug or the lack of a readily available supply of the drug from 1759  
a manufacturer. 1760

(b) A limited quantity of the drug is compounded and 1761  
provided to the professional. 1762

(c) The drug is compounded and provided to the 1763  
professional as an occasional exception to the normal practice 1764  
of dispensing drugs pursuant to patient-specific prescriptions. 1765

(D) "Consult agreement" means an agreement to manage an 1766  
individual's drug therapy that has been entered into by a 1767  
pharmacist and a physician authorized under Chapter 4731. of the 1768  
Revised Code to practice medicine and surgery or osteopathic 1769  
medicine and surgery. 1770

(E) "Drug" means: 1771

(1) Any article recognized in the United States 1772  
pharmacopoeia and national formulary, or any supplement to them, 1773  
intended for use in the diagnosis, cure, mitigation, treatment, 1774  
or prevention of disease in humans or animals; 1775

(2) Any other article intended for use in the diagnosis, 1776  
cure, mitigation, treatment, or prevention of disease in humans 1777  
or animals; 1778

(3) Any article, other than food, intended to affect the 1779  
structure or any function of the body of humans or animals; 1780

(4) Any article intended for use as a component of any	1781
article specified in division (E) (1), (2), or (3) of this	1782
section; but does not include devices or their components,	1783
parts, or accessories.	1784
(F) "Dangerous drug" means any of the following:	1785
(1) Any drug to which either of the following applies:	1786
(a) Under the "Federal Food, Drug, and Cosmetic Act," 52	1787
Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is	1788
required to bear a label containing the legend "Caution: Federal	1789
law prohibits dispensing without prescription" or "Caution:	1790
Federal law restricts this drug to use by or on the order of a	1791
licensed veterinarian" or any similar restrictive statement, or	1792
the drug may be dispensed only upon a prescription;	1793
(b) Under Chapter 3715. or 3719. of the Revised Code, the	1794
drug may be dispensed only upon a prescription.	1795
(2) Any drug that contains a schedule V controlled	1796
substance and that is exempt from Chapter 3719. of the Revised	1797
Code or to which that chapter does not apply;	1798
(3) Any drug intended for administration by injection into	1799
the human body other than through a natural orifice of the human	1800
body.	1801
(G) "Federal drug abuse control laws" has the same meaning	1802
as in section 3719.01 of the Revised Code.	1803
(H) "Prescription" means a written, electronic, or oral	1804
order for drugs or combinations or mixtures of drugs to be used	1805
by a particular individual or for treating a particular animal,	1806
issued by a licensed health professional authorized to prescribe	1807
drugs.	1808

(I) "Licensed health professional authorized to prescribe drugs" or "prescriber" means an individual who is authorized by law to prescribe drugs or dangerous drugs or drug therapy related devices in the course of the individual's professional practice, including only the following:

(1) A dentist licensed under Chapter 4715. of the Revised Code;

(2) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who holds a certificate to prescribe issued under section 4723.48 of the Revised Code;

(3) An optometrist licensed under Chapter 4725. of the Revised Code to practice optometry under a therapeutic pharmaceutical agents certificate;

(4) A physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery;

(5) A physician assistant who holds a ~~certificate to prescribe~~ license to practice as a physician assistant issued under Chapter 4730. of the Revised Code, holds a valid prescriber number issued by the state medical board, and has been granted physician-delegated prescriptive authority;

(6) A veterinarian licensed under Chapter 4741. of the Revised Code.

(J) "Sale" and "sell" include delivery, transfer, barter, exchange, or gift, or offer therefor, and each such transaction made by any person, whether as principal proprietor, agent, or employee.

(K) "Wholesale sale" and "sale at wholesale" mean any sale



in which the purpose of the purchaser is to resell the article 1837  
purchased or received by the purchaser. 1838

(L) "Retail sale" and "sale at retail" mean any sale other 1839  
than a wholesale sale or sale at wholesale. 1840

(M) "Retail seller" means any person that sells any 1841  
dangerous drug to consumers without assuming control over and 1842  
responsibility for its administration. Mere advice or 1843  
instructions regarding administration do not constitute control 1844  
or establish responsibility. 1845

(N) "Price information" means the price charged for a 1846  
prescription for a particular drug product and, in an easily 1847  
understandable manner, all of the following: 1848

(1) The proprietary name of the drug product; 1849

(2) The established (generic) name of the drug product; 1850

(3) The strength of the drug product if the product 1851  
contains a single active ingredient or if the drug product 1852  
contains more than one active ingredient and a relevant strength 1853  
can be associated with the product without indicating each 1854  
active ingredient. The established name and quantity of each 1855  
active ingredient are required if such a relevant strength 1856  
cannot be so associated with a drug product containing more than 1857  
one ingredient. 1858

(4) The dosage form; 1859

(5) The price charged for a specific quantity of the drug 1860  
product. The stated price shall include all charges to the 1861  
consumer, including, but not limited to, the cost of the drug 1862  
product, professional fees, handling fees, if any, and a 1863  
statement identifying professional services routinely furnished 1864

by the pharmacy. Any mailing fees and delivery fees may be 1865  
stated separately without repetition. The information shall not 1866  
be false or misleading. 1867

(O) "Wholesale distributor of dangerous drugs" means a 1868  
person engaged in the sale of dangerous drugs at wholesale and 1869  
includes any agent or employee of such a person authorized by 1870  
the person to engage in the sale of dangerous drugs at 1871  
wholesale. 1872

(P) "Manufacturer of dangerous drugs" means a person, 1873  
other than a pharmacist, who manufactures dangerous drugs and 1874  
who is engaged in the sale of those dangerous drugs within this 1875  
state. 1876

(Q) "Terminal distributor of dangerous drugs" means a 1877  
person who is engaged in the sale of dangerous drugs at retail, 1878  
or any person, other than a wholesale distributor or a 1879  
pharmacist, who has possession, custody, or control of dangerous 1880  
drugs for any purpose other than for that person's own use and 1881  
consumption, and includes pharmacies, hospitals, nursing homes, 1882  
and laboratories and all other persons who procure dangerous 1883  
drugs for sale or other distribution by or under the supervision 1884  
of a pharmacist or licensed health professional authorized to 1885  
prescribe drugs. 1886

(R) "Promote to the public" means disseminating a 1887  
representation to the public in any manner or by any means, 1888  
other than by labeling, for the purpose of inducing, or that is 1889  
likely to induce, directly or indirectly, the purchase of a 1890  
dangerous drug at retail. 1891

(S) "Person" includes any individual, partnership, 1892  
association, limited liability company, or corporation, the 1893

state, any political subdivision of the state, and any district, 1894  
department, or agency of the state or its political 1895  
subdivisions. 1896

(T) "Finished dosage form" has the same meaning as in 1897  
section 3715.01 of the Revised Code. 1898

(U) "Generically equivalent drug" has the same meaning as 1899  
in section 3715.01 of the Revised Code. 1900

(V) "Animal shelter" means a facility operated by a humane 1901  
society or any society organized under Chapter 1717. of the 1902  
Revised Code or a dog pound operated pursuant to Chapter 955. of 1903  
the Revised Code. 1904

(W) "Food" has the same meaning as in section 3715.01 of 1905  
the Revised Code. 1906

(X) "Pain management clinic" has the same meaning as in 1907  
section 4731.054 of the Revised Code. 1908

**Sec. 4730.01.** As used in this chapter: 1909

~~(A) "Physician assistant" means a skilled person qualified-~~ 1910  
~~by academic and clinical training to provide services to~~ 1911  
~~patients as a physician assistant under the supervision,~~ 1912  
~~control, and direction of one or more physicians who are~~ 1913  
~~responsible for the physician assistant's performance.~~ 1914

~~(B)~~ "Physician" means an individual who is authorized 1915  
under Chapter 4731. of the Revised Code to practice medicine and 1916  
surgery, osteopathic medicine and surgery, or podiatric medicine 1917  
and surgery. 1918

~~(C)~~ (B) "Health care facility" means any of the following: 1919

(1) A hospital registered with the department of health 1920

under section 3701.07 of the Revised Code; 1921

(2) A health care facility licensed by the department of health under section 3702.30 of the Revised Code; 1922  
1923

(3) Any other facility designated by the state medical board in rules adopted pursuant to division (B) ~~(2)~~ of section 4730.08 of the Revised Code. 1924  
1925  
1926

~~(D) "Special services" means the health care services that a physician assistant may be authorized to provide under the special services portion of a physician supervisory plan approved under section 4730.17 of the Revised Code~~ (C) "Service" means a medical activity that requires training in the diagnosis, treatment, or prevention of disease. 1927  
1928  
1929  
1930  
1931  
1932

**Sec. 4730.02.** (A) No person shall hold that person out as being able to function as a physician assistant, or use any words or letters indicating or implying that the person is a physician assistant, without a current, valid ~~certificate~~ license to practice as a physician assistant issued pursuant to this chapter. 1933  
1934  
1935  
1936  
1937  
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(B) No person shall practice as a physician assistant without the supervision, control, and direction of a physician. 1939  
1940

~~(C) No person shall act as the supervising physician of a physician assistant without having received the state medical board's approval of a supervision agreement entered into with the physician assistant.~~ 1941  
1942  
1943  
1944

~~(D)~~ No person shall practice as a physician assistant without having entered into a supervision agreement ~~that has been approved by the state medical board~~ with a supervising physician under section 4730.19 of the Revised Code. 1945  
1946  
1947  
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~~(E)~~ (D) No person acting as the supervising physician of a physician assistant shall authorize the physician assistant to perform services if either of the following is the case:

(1) The services are not within the physician's normal course of practice and expertise;

(2) The services are inconsistent with the ~~physician supervisory plan approved by the state medical board for the supervising physician or supervision agreement under which the physician assistant is being supervised, including, if applicable,~~ the policies of the health care facility in which the physician and physician assistant are practicing.

~~(F) No person shall practice as a physician assistant in a manner that is inconsistent with the physician supervisory plan approved for the physician who is responsible for supervising the physician assistant or the policies of the health care facility in which the physician assistant is practicing.~~

~~(G)~~ (E) No person practicing as a physician assistant shall prescribe any drug or device to perform or induce an abortion, or otherwise perform or induce an abortion.

~~(H)~~ (F) No person shall advertise to provide services as a physician assistant, except for the purpose of seeking employment.

~~(I)~~ (G) No person practicing as a physician assistant shall fail to wear at all times when on duty a placard, plate, or other device identifying that person as a "physician assistant."

**Sec. 4730.03.** Nothing in this chapter shall:

(A) Be construed to affect or interfere with the

performance of duties of any medical personnel who are either of	1977
the following:	1978
(1) In active service in the army, navy, coast guard,	1979
marine corps, air force, public health service, or marine	1980
hospital service of the United States while so serving;	1981
(2) Employed by the veterans administration of the United	1982
States while so employed <del>+</del> .	1983
(B) Prevent any person from performing any of the services	1984
a physician assistant may be authorized to perform, if the	1985
person's professional scope of practice established under any	1986
other chapter of the Revised Code authorizes the person to	1987
perform the services;	1988
(C) Prohibit a physician from delegating responsibilities	1989
to any nurse or other qualified person who does not hold a	1990
<del>certificate</del> - <u>license</u> to practice as a physician assistant,	1991
provided that the individual does not hold the individual out to	1992
be a physician assistant;	1993
(D) Be construed as authorizing a physician assistant	1994
independently to order or direct the execution of procedures or	1995
techniques by a registered nurse or licensed practical nurse in	1996
the care and treatment of a person in any setting, except to the	1997
extent that the physician assistant is authorized to do so by	1998
<del>the physician supervisory plan approved under section 4730.17 of</del>	1999
<del>the Revised Code for the</del> a physician who is responsible for	2000
supervising the physician assistant <del>or</del> - <u>and, if applicable,</u> the	2001
policies of the health care facility in which the physician	2002
assistant is practicing;	2003
(E) Authorize a physician assistant to engage in the	2004
practice of optometry, except to the extent that the physician	2005

assistant is authorized by a supervising physician acting in 2006  
accordance with this chapter to perform routine visual 2007  
screening, provide medical care prior to or following eye 2008  
surgery, or assist in the care of diseases of the eye; 2009

(F) Be construed as authorizing a physician assistant to 2010  
prescribe any drug or device to perform or induce an abortion, 2011  
or as otherwise authorizing a physician assistant to perform or 2012  
induce an abortion. 2013

**Sec. 4730.04.** (A) As used in this section: 2014

(1) "Disaster" means any imminent threat or actual 2015  
occurrence of widespread or severe damage to or loss of 2016  
property, personal hardship or injury, or loss of life that 2017  
results from any natural phenomenon or act of a human. 2018

(2) "Emergency" means an occurrence or event that poses an 2019  
imminent threat to the health or life of a human. 2020

(B) Nothing in this chapter prohibits any of the following 2021  
individuals from providing medical care, to the extent the 2022  
individual is able, in response to a need for medical care 2023  
precipitated by a disaster or emergency: 2024

(1) An individual who holds a ~~certificate~~license to 2025  
practice as a physician assistant issued under this chapter; 2026

(2) An individual licensed or authorized to practice as a 2027  
physician assistant in another state; 2028

(3) An individual credentialed or employed as a physician 2029  
assistant by an agency, office, or other instrumentality of the 2030  
federal government. 2031

(C) For purposes of the medical care provided by a 2032  
physician assistant pursuant to division (B) (1) of this section, 2033

both of the following apply notwithstanding any supervision 2034  
requirement of this chapter to the contrary: 2035

(1) The physician who supervises the physician assistant 2036  
pursuant to a ~~physician supervisory plan approved by the state~~ 2037  
~~medical board supervision agreement entered into~~ under section 2038  
~~4730.17-4730.19~~ of the Revised Code is not required to meet the 2039  
supervision requirements established under this chapter. 2040

(2) The physician designated as the medical director of 2041  
the disaster or emergency may supervise the medical care 2042  
provided by the physician assistant. 2043

**Sec. 4730.06.** (A) The physician assistant policy committee 2044  
of the state medical board shall review, and shall submit to the 2045  
board recommendations concerning, all of the following: 2046

(1) Requirements for ~~issuance of certificates~~ issuing a 2047  
license to practice as a physician assistant, including the 2048  
educational requirements that must be met to receive a ~~a~~ 2049  
~~certificate to practice~~ the license; 2050

(2) Existing and proposed rules pertaining to the practice 2051  
of physician assistants, the supervisory relationship between 2052  
physician assistants and supervising physicians, and the 2053  
administration and enforcement of this chapter; 2054

(3) In accordance with section 4730.38 of the Revised 2055  
Code, physician-delegated prescriptive authority for physician 2056  
assistants and proposed changes to the physician assistant 2057  
formulary the board adopts pursuant to division (A) (1) of 2058  
section 4730.39 of the Revised Code; 2059

(4) Application procedures and forms for ~~certificates a~~ 2060  
license to practice as a physician assistant, ~~physician~~ 2061  
~~supervisory plans, and supervision agreements~~; 2062



(5) Fees required by this chapter for issuance and renewal of <del>certificates</del> <u>a license</u> to practice as a physician assistant;	2063 2064
(6) <del>Criteria to be included in applications submitted to the board for approval of physician supervisory plans, including criteria to be included in applications for approval to delegate to physician assistants the performance of special services;</del>	2065 2066 2067 2068
<del>(7) Criteria to be included in supervision agreements submitted to the board for approval and renewal of the board's approval;</del>	2069 2070 2071
<del>(8) Any issue the board asks the committee to consider.</del>	2072
(B) In addition to the matters that are required to be reviewed under division (A) of this section, the committee may review, and may submit to the board recommendations concerning, <del>either or both of the following:</del>	2073 2074 2075 2076
<del>(1) Quality <u>quality</u> assurance activities to be performed by a supervising physician and physician assistant under a quality assurance system established pursuant to division (F) of section 4730.21 of the Revised Code;</del>	2077 2078 2079 2080
<del>(2) The development and approval of one or more model physician supervisory plans and one or more models for a special services portion of the one or more model physician supervisory plans. The committee may submit recommendations for model plans that reflect various medical specialties.</del>	2081 2082 2083 2084 2085
(C) The board shall take into consideration all recommendations submitted by the committee. Not later than ninety days after receiving a recommendation from the committee, the board shall approve or disapprove the recommendation and notify the committee of its decision. If a recommendation is disapproved, the board shall inform the committee of its reasons	2086 2087 2088 2089 2090 2091

for making that decision. The committee may resubmit the 2092  
recommendation after addressing the concerns expressed by the 2093  
board and modifying the disapproved recommendation accordingly. 2094  
Not later than ninety days after receiving a resubmitted 2095  
recommendation, the board shall approve or disapprove the 2096  
recommendation. There is no limit on the number of times the 2097  
committee may resubmit a recommendation for consideration by the 2098  
board. 2099

(D) (1) Except as provided in division (D) (2) of this 2100  
section, the board may not take action regarding a matter that 2101  
is subject to the committee's review under division (A) or (B) 2102  
of this section unless the committee has made a recommendation 2103  
to the board concerning the matter. 2104

(2) If the board submits to the committee a request for a 2105  
recommendation regarding a matter that is subject to the 2106  
committee's review under division (A) or (B) of this section, 2107  
and the committee does not provide a recommendation before the 2108  
sixty-first day after the request is submitted, the board may 2109  
take action regarding the matter without a recommendation. 2110

**Sec. 4730.08.** (A) A ~~certificate~~-license to practice as a 2111  
physician assistant issued under this chapter authorizes the 2112  
holder to practice as a physician assistant, ~~subject to all of~~ 2113  
~~the following~~ as follows: 2114

(1) The physician assistant shall practice only under the 2115  
supervision, control, and direction of a physician with whom the 2116  
physician assistant has entered into a supervision agreement 2117  
~~approved by the state medical board~~ under section ~~4730.17~~ 2118  
4730.19 of the Revised Code. 2119

(2) ~~When the physician assistant practices outside a~~ 2120

~~health care facility, the~~ The physician assistant shall practice 2121  
in accordance with the ~~physician supervisory plan approved under~~ 2122  
~~section 4730.17 of the Revised Code for supervision agreement~~ 2123  
entered into with the physician who is responsible for 2124  
supervising the physician assistant. 2125

~~(3) When the physician assistant practices within a health-~~ 2126  
~~care facility, the physician assistant shall practice in-~~ 2127  
~~accordance with, including, if applicable, the policies of the~~ 2128  
health care facility in which the physician assistant is 2129  
practicing. 2130

(B) ~~For purposes of division (A) of this section and all~~ 2131  
~~other provisions of this chapter pertaining to the practice of a~~ 2132  
~~physician assistant under the policies of a health care~~ 2133  
~~facility, both of the following apply:~~ 2134

~~(1) A physician who is supervising a physician assistant~~ 2135  
~~within a health care facility may impose limitations on the~~ 2136  
~~physician assistant's practice that are in addition to any~~ 2137  
~~limitations applicable under the policies of the facility.~~ 2138

~~(2) The state medical board may, subject to division (D)~~ 2139  
of section 4730.06 of the Revised Code, adopt rules designating 2140  
facilities to be included as health care facilities that are in 2141  
addition to the facilities specified in divisions ~~(C)~~ (B)(1) and 2142  
(2) of section 4730.01 of the Revised Code. ~~The~~ Any rules 2143  
adopted shall be adopted in accordance with Chapter 119. of the 2144  
Revised Code. 2145

**Sec. 4730.10.** (A) An individual seeking a ~~certificate~~ 2146  
license to practice as a physician assistant shall file with the 2147  
state medical board a written application on a form prescribed 2148  
and supplied by the board. The application shall include all of 2149

the following: 2150

(1) The applicant's name, residential address, business 2151  
address, if any, and social security number; 2152

(2) Satisfactory proof that the applicant meets the age 2153  
and moral character requirements specified in divisions (A) (1) 2154  
and (2) of section 4730.11 of the Revised Code; 2155

(3) Satisfactory proof that the applicant meets either the 2156  
educational requirements specified in division (B) (1) or (2) of 2157  
section 4730.11 of the Revised Code or the educational or other 2158  
applicable requirements specified in division (C) (1), (2), or 2159  
(3) of that section; 2160

(4) Any other information the board requires. 2161

(B) At the time of making application for a ~~certificate-~~ 2162  
license to practice, the applicant shall pay the board a fee of 2163  
~~two-five~~ hundred dollars, no part of which shall be returned. 2164  
The fees shall be deposited in accordance with section 4731.24 2165  
of the Revised Code. 2166

**Sec. 4730.101.** In addition to any other eligibility 2167  
requirement set forth in this chapter, each applicant for a 2168  
~~certificate-~~license to practice as a physician assistant shall 2169  
comply with sections 4776.01 to 4776.04 of the Revised Code. The 2170  
state medical board shall not grant to an applicant a 2171  
~~certificate-~~license to practice as a physician assistant unless 2172  
the board, in its discretion, decides that the results of the 2173  
criminal records check do not make the applicant ineligible for 2174  
a ~~certificate-~~license issued pursuant to section 4730.12 of the 2175  
Revised Code. 2176

**Sec. 4730.11.** (A) To be eligible to receive a ~~certificate-~~ 2177  
license to practice as a physician assistant, all of the 2178

following apply to an applicant:	2179
(1) The applicant shall be at least eighteen years of age.	2180
(2) The applicant shall be of good moral character.	2181
(3) The applicant shall hold current certification by the national commission on certification of physician assistants or a successor organization that is recognized by the state medical board.	2182 2183 2184 2185
(4) The applicant shall meet either of the following requirements:	2186 2187
(a) The educational requirements specified in division (B) (1) or (2) of this section;	2188 2189
(b) The educational or other applicable requirements specified in division (C) (1), (2), or (3) of this section.	2190 2191
(B) <del>Effective January 1, 2008, for</del> <u>For</u> purposes of division (A) (4) (a) of this section, an applicant shall meet either of the following educational requirements:	2192 2193 2194
(1) The applicant shall hold a master's or higher degree obtained from a program accredited by the accreditation review commission on education for the physician assistant or a predecessor or successor organization recognized by the board.	2195 2196 2197 2198
(2) The applicant shall hold both of the following degrees:	2199 2200
(a) A degree other than a master's or higher degree obtained from a program accredited by the accreditation review commission on education for the physician assistant or a predecessor or successor organization recognized by the board;	2201 2202 2203 2204
(b) A master's or higher degree in a course of study with	2205

clinical relevance to the practice of physician assistants and 2206  
obtained from a program accredited by a regional or specialized 2207  
and professional accrediting agency recognized by the council 2208  
for higher education accreditation. 2209

(C) For purposes of division (A) (4) (b) of this section, an 2210  
applicant shall present evidence satisfactory to the board of 2211  
meeting one of the following requirements in lieu of meeting the 2212  
educational requirements specified in division (B) (1) or (2) of 2213  
this section: 2214

(1) The applicant shall hold a current, valid license or 2215  
other form of authority to practice as a physician assistant 2216  
issued by another jurisdiction ~~prior to January 1, 2008~~ and have 2217  
been in active practice in any jurisdiction throughout the 2218  
three-year period immediately preceding the date of application. 2219

(2) The applicant shall hold a degree obtained as a result 2220  
of being enrolled on January 1, 2008, in a program in this state 2221  
that was accredited by the accreditation review commission on 2222  
education for the physician assistant but did not grant a 2223  
master's or higher degree to individuals enrolled in the program 2224  
on that date, and completing the program on or before December 2225  
31, 2009. 2226

(3) The applicant shall ~~meet both of the following~~ 2227  
~~educational and military experience requirements:~~ 2228

~~(a) Hold~~ hold a degree obtained from a program accredited 2229  
by the accreditation review commission on education for the 2230  
physician assistant, ~~and~~ and meet either of the following experience 2231  
requirements: 2232

~~(b)~~ (a) Have experience practicing as a physician 2233  
assistant for at least three consecutive years while on active 2234

duty, with evidence of service under honorable conditions, in 2235  
any of the armed forces of the United States or the national 2236  
guard of any state, including any experience attained while 2237  
practicing as a physician assistant at a health care facility or 2238  
clinic operated by the United States department of veterans 2239  
affairs; 2240

(b) Have experience practicing as a physician assistant 2241  
for at least three consecutive years while on active duty in the 2242  
United States public health service commissioned corps. 2243

(D) Unless the applicant had prescriptive authority while 2244  
practicing as a physician assistant in another jurisdiction, in 2245  
the military, or in the public health service, the license 2246  
issued to an applicant who does not hold a master's or higher 2247  
degree described in division (B) of this section does not 2248  
authorize the holder to exercise physician-delegated 2249  
prescriptive authority and the state medical board shall not 2250  
issue a prescriber number. 2251

(E) (1) This section does not require an individual to 2252  
obtain a master's or higher degree as a condition of retaining 2253  
or renewing a ~~certificate~~ license to practice as a physician 2254  
assistant if the individual received the ~~certificate~~ license 2255  
without holding a master's or higher degree as provided in 2256  
either of the following: 2257

~~(1)~~ (a) Before the educational requirements specified in 2258  
division (B) (1) or (2) of this section became effective January 2259  
1, 2008; 2260

~~(2)~~ (b) By meeting the educational or other applicable 2261  
requirements specified in division (C) (1), (2), or (3) of this 2262  
section. 2263

(2) A license described in division (E) (1) of this section 2264  
authorizes the license holder to exercise physician-delegated 2265  
prescriptive authority if, on the effective date of this 2266  
amendment, the license holder held a valid certificate to 2267  
prescribe issued under former section 4730.44 of the Revised 2268  
Code, as it existed immediately prior to the effective date of 2269  
this amendment. 2270

(3) On application of an individual who received a license 2271  
without having first obtained a master's or higher degree and is 2272  
not authorized under division (E) (2) of this section to exercise 2273  
physician-delegated prescriptive authority, the board shall 2274  
grant the individual the authority to exercise physician- 2275  
delegated prescriptive authority if the individual provides 2276  
evidence satisfactory to the board of having obtained a master's 2277  
or higher degree from either of the following: 2278

(a) A program accredited by the accreditation review 2279  
commission on education for the physician assistant or a 2280  
predecessor or successor organization recognized by the board; 2281

(b) A program accredited by a regional or specialized and 2282  
professional accrediting agency recognized by the council for 2283  
higher education accreditation, if the degree is in a course of 2284  
study with clinical relevance to the practice of physician 2285  
assistants. 2286

**Sec. 4730.111.** A physician assistant whose certification 2287  
by the national commission on certification of physician 2288  
assistants or a successor organization recognized by the state 2289  
medical board is suspended or revoked shall give notice of that 2290  
occurrence to the board not later than fourteen days after the 2291  
physician assistant receives notice of the change in 2292  
certification status. A physician assistant who fails to renew 2293



the certification shall notify the board not later than fourteen 2294  
days after the certification expires. 2295

**Sec. 4730.12.** (A) The state medical board shall review ~~all~~ 2296  
~~applications~~ each application received under section 4730.10 of 2297  
the Revised Code for ~~certificates~~ a license to practice as a 2298  
physician assistant. Not later than sixty days after receiving a 2299  
complete application, the board shall determine whether ~~an~~ the 2300  
applicant meets the requirements to receive ~~a certificate to~~ 2301  
~~practice~~ the license, as specified in section 4730.11 of the 2302  
Revised Code. An affirmative vote of not fewer than six members 2303  
of the board is required to determine that an applicant meets 2304  
the requirements to receive a ~~certificate~~ license to practice as 2305  
a physician assistant. 2306

(B) If the board determines that an applicant meets the 2307  
requirements to receive the ~~certificate~~ license, the secretary of 2308  
the board shall register the applicant as a physician assistant 2309  
and issue to the applicant a ~~certificate~~ license to practice as 2310  
a physician assistant. 2311

**Sec. 4730.13.** Upon application by the holder of a 2312  
~~certificate~~ license to practice as a physician assistant, the 2313  
state medical board shall issue a duplicate ~~certificate~~ license 2314  
to replace one that is missing or damaged, to reflect a name 2315  
change, or for any other reasonable cause. The fee for a 2316  
duplicate ~~certificate~~ license shall be thirty-five dollars. All 2317  
fees collected under this section shall be deposited in 2318  
accordance with section 4731.24 of the Revised Code. 2319

**Sec. 4730.14.** (A) A ~~certificate~~ license to practice as a 2320  
physician assistant shall expire biennially and may be renewed 2321  
in accordance with this section. A person seeking to renew a 2322  
~~certificate~~ license to practice as a physician assistant shall, 2323

on or before the thirty-first day of January of each even- 2324  
numbered year, apply for renewal of the ~~certificate~~license. The 2325  
state medical board shall send renewal notices at least one 2326  
month prior to the expiration date. 2327

Applications shall be submitted to the board on forms the 2328  
board shall prescribe and furnish. Each application shall be 2329  
accompanied by a biennial renewal fee of ~~one~~two hundred 2330  
dollars. The board shall deposit the fees in accordance with 2331  
section 4731.24 of the Revised Code. 2332

The applicant shall report any criminal offense that 2333  
constitutes grounds for refusing to issue a ~~certificate~~license 2334  
to practice under section 4730.25 of the Revised Code to which 2335  
the applicant has pleaded guilty, of which the applicant has 2336  
been found guilty, or for which the applicant has been found 2337  
eligible for intervention in lieu of conviction, since last 2338  
signing an application for a ~~certificate~~license to practice as 2339  
a physician assistant. 2340

(B) To be eligible for renewal of a license, a ~~physician-~~ 2341  
~~assistant shall certify an applicant is subject to the board-~~ 2342  
~~both~~all of the following: 2343

(1) ~~That the physician assistant~~The applicant must 2344  
certify to the board that the applicant has maintained 2345  
certification by the national commission on certification of 2346  
physician assistants or a successor organization that is 2347  
recognized by the board by meeting the standards to hold current 2348  
certification from the commission or its successor, including 2349  
completion of continuing medical education requirements and 2350  
passing periodic recertification examinations; 2351

(2) Except as provided in division (F) of this section and 2352

section 5903.12 of the Revised Code, the applicant must certify 2353  
to the board that the ~~physician assistant~~ applicant has 2354  
completed during the current certification-licensure period not 2355  
less than one hundred hours of continuing medical education 2356  
acceptable to the board. 2357

(3) The applicant must comply with the renewal eligibility 2358  
requirements established under section 4730.49 of the Revised 2359  
Code that pertain to the applicant. 2360

(C) The board shall adopt rules in accordance with Chapter 2361  
119. of the Revised Code specifying the types of continuing 2362  
medical education that must be completed to fulfill the board's 2363  
requirements under division (B) (2) of this section. Except when 2364  
additional continuing medical education is required ~~to renew a~~ 2365  
~~certificate to prescribe~~, as specified in section 4730.49 of the 2366  
Revised Code, the board shall not adopt rules that require a 2367  
physician assistant to complete in any certification-licensure 2368  
period more than one hundred hours of continuing medical 2369  
education acceptable to the board. In fulfilling the board's 2370  
requirements, a physician assistant may use continuing medical 2371  
education courses or programs completed to maintain 2372  
certification by the national commission on certification of 2373  
physician assistants or a successor organization that is 2374  
recognized by the board if the standards for acceptable courses 2375  
and programs of the commission or its successor are at least 2376  
equivalent to the standards established by the board. 2377

(D) If an applicant submits a complete renewal application 2378  
and qualifies for renewal pursuant to division (B) of this 2379  
section, the board shall issue to the applicant a renewed 2380  
certificate-~~license~~ to practice as a physician assistant. 2381

(E) The board may require a random sample of physician 2382

assistants to submit materials documenting certification by the 2383  
national commission on certification of physician assistants or 2384  
a successor organization that is recognized by the board and 2385  
completion of the required number of hours of continuing medical 2386  
education. 2387

(F) The board shall provide for pro rata reductions by 2388  
month of the number of hours of continuing education that must 2389  
be completed for individuals who are in their first 2390  
~~certification-licensure~~ period, who have been disabled due to 2391  
illness or accident, or who have been absent from the country. 2392  
The board shall adopt rules, in accordance with Chapter 119. of 2393  
the Revised Code, as necessary to implement this division. 2394

(G) (1) A ~~certificate-license~~ to practice that is not 2395  
renewed on or before its expiration date is automatically 2396  
suspended on its expiration date. Continued practice after 2397  
suspension of the ~~certificate-license~~ shall be considered as 2398  
practicing in violation of division (A) of section 4730.02 of 2399  
the Revised Code. 2400

(2) If a ~~certificate-license~~ has been suspended pursuant 2401  
to division (G) (1) of this section for two years or less, it may 2402  
be reinstated. The board shall reinstate a ~~certificate-license~~ 2403  
suspended for failure to renew upon an applicant's submission of 2404  
a renewal application, the biennial renewal fee, and any 2405  
applicable monetary penalty. 2406

If a ~~certificate-license~~ has been suspended pursuant to 2407  
division (G) (1) of this ~~division~~section for more than two years, 2408  
it may be restored. In accordance with section 4730.28 of the 2409  
Revised Code, the board may restore a ~~certificate-license~~ 2410  
suspended for failure to renew upon an applicant's submission of 2411  
a restoration application, the biennial renewal fee, and any 2412

applicable monetary penalty and compliance with sections 4776.01 2413  
to 4776.04 of the Revised Code. The board shall not restore to 2414  
an applicant a ~~certificate~~-license to practice as a physician 2415  
assistant unless the board, in its discretion, decides that the 2416  
results of the criminal records check do not make the applicant 2417  
ineligible for a ~~certificate~~-license issued pursuant to section 2418  
4730.12 of the Revised Code. 2419

The penalty for reinstatement shall be fifty dollars and 2420  
the penalty for restoration shall be one hundred dollars. The 2421  
board shall deposit penalties in accordance with section 4731.24 2422  
of the Revised Code. 2423

(H) If an individual certifies that the individual has 2424  
completed the number of hours and type of continuing medical 2425  
education required for renewal or reinstatement of a ~~certificate~~- 2426  
license to practice as a physician assistant, and the board 2427  
finds through a random sample conducted under division (E) of 2428  
this section or through any other means that the individual did 2429  
not complete the requisite continuing medical education, the 2430  
board may impose a civil penalty of not more than five thousand 2431  
dollars. The board's finding shall be made pursuant to an 2432  
adjudication under Chapter 119. of the Revised Code and by an 2433  
affirmative vote of not fewer than six members. 2434

A civil penalty imposed under this division may be in 2435  
addition to or in lieu of any other action the board may take 2436  
under section 4730.25 of the Revised Code. The board shall 2437  
deposit civil penalties in accordance with section 4731.24 of 2438  
the Revised Code. 2439

**Sec. 4730.19.** (A) ~~For a supervision agreement to be~~ 2440  
~~approved by the board, all of the following apply:~~ 2441

~~(1) Before initiating supervision of one or more physician assistants licensed under this chapter, a physician shall enter into a supervision agreement with each physician assistant who will be supervised. A supervision agreement may apply to one or more physician assistants, but, except as provided in division (B)(2)(e) of this section, may apply to not more than one physician. The supervision agreement shall specify that the physician agrees to supervise the physician assistant and the physician assistant agrees to practice in accordance with the conditions specified in the physician supervisory plan approved for that physician or the policies of the health care facility in which the supervising physician and physician assistant are practicing under that physician's supervision.~~ 2442  
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~~(2) The agreement shall clearly state that the supervising physician is legally responsible and assumes legal liability for the services provided by the physician assistant. The agreement shall be signed by the physician and the physician assistant.~~ 2455  
2456  
2457  
2458

~~(3) The physician assistant shall hold a current certificate to practice as a physician assistant.~~ 2459  
2460

~~(4) If a physician supervisory plan applies to the physician assistant's practice, the physician shall hold an approved physician supervisory plan.~~ 2461  
2462  
2463

~~(5) If the physician intends to grant physician-delegated prescriptive authority to a physician assistant, the physician assistant shall hold a certificate to prescribe issued under this chapter.~~ 2464  
2465  
2466  
2467

~~(6) If the physician holds approval of more than one physician supervisory plan, the agreement shall specify the plan under which the physician assistant will practice.~~ 2468  
2469  
2470

~~(B) The board shall review each application received. If the board finds that the requirements specified in division (A) of this section have been met and the applicant has paid the fee specified in section 4730.18 of the Revised Code, the board shall approve the supervision agreement and notify the supervising physician of the board's approval. If physician-delegated prescriptive authority will be granted to more than one physician assistant under the supervision agreement, the board shall specify in the notice that its approval is specific to each physician assistant. The board shall provide notice of its approval of a supervision agreement not later than thirty days after the board receives a complete application for approval. A supervision agreement shall include either or both of the following:~~

(1) If a physician assistant will practice within a health care facility, the agreement shall include terms that require the physician assistant to practice in accordance with the policies of the health care facility.

(2) If a physician assistant will practice outside a health care facility, the agreement shall include terms that specify all of the following:

(a) The responsibilities to be fulfilled by the physician in supervising the physician assistant;

(b) The responsibilities to be fulfilled by the physician assistant when performing services under the physician's supervision;

(c) Any limitations on the responsibilities to be fulfilled by the physician assistant;

(d) The circumstances under which the physician assistant

is required to refer a patient to the supervising physician; 2500

(e) If the supervising physician chooses to designate 2501  
physicians to act as alternate supervising physicians, the 2502  
names, business addresses, and business telephone numbers of the 2503  
physicians who have agreed to act in that capacity. 2504

~~After a supervision agreement is approved, a physician may~~ 2505  
~~apply to the board for approval to initiate supervision of a~~ 2506  
~~physician assistant who is not listed on the agreement. There is~~ 2507  
~~no fee for applying for the addition of a physician assistant to~~ 2508  
~~a supervision agreement.~~ 2509

~~To receive the board's approval of the addition to the~~ 2510  
~~supervision agreement, the physician assistant shall hold a~~ 2511  
~~current certificate to practice as a physician assistant. If the~~ 2512  
~~physician intends to grant physician-delegated prescriptive~~ 2513  
~~authority to the physician assistant, the physician assistant~~ 2514  
~~shall hold a current certificate to prescribe. If these~~ 2515  
~~requirements are met, the board shall notify the physician of~~ 2516  
~~its approval of the addition to the supervision agreement. The~~ 2517  
~~board shall provide notice of its approval not later than thirty~~ 2518  
~~days after the board receives a complete application for~~ 2519  
~~approval.~~(C) (1) The supervising physician shall submit a copy of 2520  
each supervision agreement to the board. The board may review 2521  
the supervision agreement at any time for compliance with this 2522  
section and for verification of licensure of the supervising 2523  
physician and the physician assistant. All of the following 2524  
apply to the submission and review process: 2525

(a) If the board reviews a supervision agreement, the 2526  
board shall notify the supervising physician of any way that the 2527  
agreement fails to comply with this section. 2528



(b) A supervision agreement becomes effective at the end 2529  
of the fifth business day after the day the board receives the 2530  
agreement unless the board notifies the supervising physician 2531  
that the agreement fails to comply with this section. 2532

(c) If a physician receives a notice under division (C) (1) 2533  
(a) of this section, the physician may revise the supervision 2534  
agreement and resubmit the agreement to the board. The board may 2535  
review the agreement as provided in division (C) (1) of this 2536  
section. 2537

(2) A supervision agreement expires two years after the 2538  
day it takes effect. The agreement may be renewed by submitting 2539  
a copy of it to the board. 2540

Before expiration, a supervision agreement may be amended 2541  
by including one or more additional physician assistants. An 2542  
amendment to a supervision agreement shall be submitted to the 2543  
board for review in the manner provided for review of an initial 2544  
agreement under division (C) (1) of this section. The amendment 2545  
does not alter the agreement's expiration date. 2546

(D) A supervision agreement shall be kept in the records 2547  
maintained by the supervising physician who entered into the 2548  
agreement. 2549

(E) (1) The board may impose a civil penalty of not more 2550  
than one thousand dollars if it finds through a review conducted 2551  
under this section or through any other means either of the 2552  
following: 2553

(a) That a physician assistant has practiced in a manner 2554  
that departs from, or fails to conform to, the terms of a 2555  
supervision agreement entered into under this section; 2556

(b) That a physician has supervised a physician assistant 2557

in a manner that departs from, or fails to conform to, the terms 2558  
of a supervision agreement entered into under this section. 2559

(2) The board's finding under division (A)(1) of this 2560  
section shall be made pursuant to an adjudication conducted 2561  
under Chapter 119. of the Revised Code. A civil penalty imposed 2562  
under that division may be in addition to or in lieu of any 2563  
other action the board may take under section 4730.25 or 4731.22 2564  
of the Revised Code. 2565  
2566

**Sec. 4730.20.** (A) A physician assistant licensed under 2567  
this chapter may perform any of the following services 2568  
authorized by the supervising physician that are part of the 2569  
supervising physician's normal course of practice and expertise: 2570

(1) Ordering diagnostic, therapeutic, and other medical 2571  
services; 2572

(2) Prescribing physical therapy or referring a patient to 2573  
a physical therapist for physical therapy; 2574

(3) Ordering occupational therapy or referring a patient 2575  
to an occupational therapist for occupational therapy; 2576

(4) Taking any action that may be taken by an attending 2577  
physician under sections 2133.21 to 2133.26 of the Revised Code, 2578  
as specified in section 2133.211 of the Revised Code; 2579

(5) Determining and pronouncing death in accordance with 2580  
section 4730.202 of the Revised Code; 2581

(6) Assisting in surgery; 2582

(7) If the physician assistant holds a valid prescriber 2583  
number issued by the state medical board and has been granted 2584  
physician-delegated prescriptive authority, ordering, 2585

prescribing, personally furnishing, and administering drugs and 2586  
medical devices; 2587

(8) Any other services that are part of the supervising 2588  
physician's normal course of practice and expertise. 2589

(B) The services a physician assistant may provide under 2590  
the policies of a health care facility are limited to the 2591  
services the facility authorizes the physician assistant to 2592  
provide for the facility. A facility shall not authorize a 2593  
physician assistant to perform a service that is prohibited 2594  
under this chapter. A physician who is supervising a physician 2595  
assistant within a health care facility may impose limitations 2596  
on the physician assistant's practice that are in addition to 2597  
any limitations applicable under the policies of the facility. 2598

**Sec. ~~4730.091~~ 4730.201.** (A) As used in this section, 2599  
"local anesthesia" means the injection of a drug or combination 2600  
of drugs to stop or prevent a painful sensation in a 2601  
circumscribed area of the body where a painful procedure is to 2602  
be performed. "Local anesthesia" includes only local 2603  
infiltration anesthesia, digital blocks, and pudendal blocks. 2604

(B) A physician assistant may administer, monitor, or 2605  
maintain local anesthesia as a component of a procedure the 2606  
physician assistant is performing or as a separate service when 2607  
the procedure requiring local anesthesia is to be performed by 2608  
the physician assistant's supervising physician or another 2609  
person. A physician assistant shall not administer, monitor, or 2610  
maintain any other form of anesthesia, including regional 2611  
anesthesia or any systemic sedation, ~~regardless of whether the~~ 2612  
~~physician assistant is practicing under a physician supervisory~~ 2613  
~~plan or the policies of a health care facility.~~ 2614

**Sec. ~~4730.092~~—4730.202.** (A) A physician assistant may 2615  
determine and pronounce an individual's death, but only if the 2616  
individual's respiratory and circulatory functions are not being 2617  
artificially sustained and, at the time the determination and 2618  
pronouncement of death is made, either or both of the following 2619  
apply: 2620

(1) The individual was receiving care in one of the 2621  
following: 2622

(a) A nursing home licensed under section 3721.02 of the 2623  
Revised Code or by a political subdivision under section 3721.09 2624  
of the Revised Code; 2625

(b) A residential care facility or home for the aging 2626  
licensed under Chapter 3721. of the Revised Code; 2627

(c) A county home or district home operated pursuant to 2628  
Chapter 5155. of the Revised Code; 2629

(d) A residential facility licensed under section 5123.19 2630  
of the Revised Code. 2631

(2) The physician assistant is providing or supervising 2632  
the individual's care through a hospice care program licensed 2633  
under Chapter 3712. of the Revised Code or any other entity that 2634  
provides palliative care. 2635

(B) If a physician assistant determines and pronounces an 2636  
individual's death, the physician assistant shall comply with 2637  
both of the following: 2638

(1) The physician assistant shall not complete any portion 2639  
of the individual's death certificate. 2640

(2) The physician assistant shall notify the individual's 2641  
attending physician of the determination and pronouncement of 2642

death in order for the physician to fulfill the physician's 2643  
duties under section 3705.16 of the Revised Code. The physician 2644  
assistant shall provide the notification within a period of time 2645  
that is reasonable but not later than twenty-four hours 2646  
following the determination and pronouncement of the 2647  
individual's death. 2648

Sec. 4730.203. (A) Acting pursuant to a supervision 2649  
agreement, a physician assistant may delegate performance of a 2650  
task to implement a patient's plan of care or, if the conditions 2651  
in division (C) of this section are met, may delegate 2652  
administration of a drug. Subject to division (D) of section 2653  
4730.03 of the Revised Code, delegation may be to any person. 2654  
The physician assistant must be physically present at the 2655  
location where the task is performed or the drug administered. 2656

(B) Prior to delegating a task or administration of a 2657  
drug, a physician assistant shall determine that the task or 2658  
drug is appropriate for the patient and the person to whom the 2659  
delegation is to be made may safely perform the task or 2660  
administer the drug. 2661

(C) A physician assistant may delegate administration of a 2662  
drug only if all of the following conditions are met: 2663

(1) The physician assistant has been granted physician- 2664  
delegated prescriptive authority. 2665

(2) The drug is included in the formulary established 2666  
under division (A) of section 4730.39 of the Revised Code. 2667

(3) The drug is not a controlled substance. 2668

(4) The drug will not be administered intravenously. 2669

(5) The drug will not be administered in a hospital 2670

inpatient care unit, as defined in section 3727.50 of the 2671  
Revised Code; a hospital emergency department; a freestanding 2672  
emergency department; or an ambulatory surgical facility 2673  
licensed under section 3702.30 of the Revised Code. 2674

(D) A person not otherwise authorized to administer a drug 2675  
or perform a specific task may do so in accordance with a 2676  
physician assistant's delegation under this section. 2677

**Sec. 4730.21.** (A) The supervising physician of a physician 2678  
assistant exercises supervision, control, and direction of the 2679  
physician assistant. ~~In~~A physician assistant may practice in 2680  
any setting within which the supervising physician has 2681  
supervision, control, and direction of the physician assistant. 2682

In supervising a physician assistant, all of the following 2683  
apply: 2684

(1) ~~Except when the on-site supervision requirements~~ 2685  
~~specified in section 4730.45 of the Revised Code are applicable,~~ 2686  
~~the~~The supervising physician shall be continuously available 2687  
for direct communication with the physician assistant by either 2688  
of the following means: 2689

(a) Being physically present at the location where the 2690  
physician assistant is practicing; 2691

(b) Being readily available to the physician assistant 2692  
through some means of telecommunication and being in a location 2693  
~~that under normal conditions is not more than sixty minutes~~ 2694  
~~travel time away a distance~~ from the location where the 2695  
physician assistant is practicing that reasonably allows the 2696  
physician to assure proper care of patients. 2697

(2) The supervising physician shall personally and 2698  
actively review the physician assistant's professional 2699

activities. 2700

~~(3) The supervising physician shall regularly review the condition of the patients treated by the physician assistant.~~ 2701  
2702

~~(4)~~The supervising physician shall ensure that the 2703  
quality assurance system established pursuant to division (F) of 2704  
this section is implemented and maintained. 2705

~~(5)~~(4) The supervising physician shall regularly perform 2706  
any other reviews of the physician assistant that the 2707  
supervising physician considers necessary. 2708

(B) A physician may enter into supervision agreements with 2709  
any number of physician assistants, but the physician may not 2710  
supervise more than ~~two~~ three physician assistants at any one 2711  
time. A physician assistant may enter into supervision 2712  
agreements with any number of supervising physicians, ~~but when~~ 2713  
~~practicing under the supervision of a particular physician, the~~ 2714  
~~physician assistant's scope of practice is subject to the~~ 2715  
~~limitations of the physician supervisory plan that has been~~ 2716  
~~approved under section 4730.17 of the Revised Code for that~~ 2717  
~~physician or the policies of the health care facility in which~~ 2718  
~~the physician and physician assistant are practicing.~~ 2719

(C) ~~A supervising physician may authorize a physician~~ 2720  
~~assistant to perform a service only if the service is authorized~~ 2721  
~~under the physician supervisory plan approved for that physician~~ 2722  
~~or the policies of the health care facility in which the~~ 2723  
~~physician and physician assistant are practicing.~~ A supervising 2724  
physician may authorize a physician assistant to perform a 2725  
service only if the physician is satisfied that the physician 2726  
assistant is capable of competently performing the service. A 2727  
supervising physician shall not authorize a physician assistant 2728

to perform any service that is beyond the physician's or the 2729  
physician assistant's normal course of practice and expertise. 2730

~~(D) (1) A supervising physician may authorize a physician- 2731  
assistant to practice in any setting within which the 2732  
supervising physician routinely practices. 2733~~

~~(2) In the case of a health care facility with an 2734  
emergency department, if the supervising physician routinely 2735  
practices in the facility's emergency department, the 2736  
supervising physician shall provide on-site supervision of the 2737  
physician assistant when the physician assistant practices in 2738  
the emergency department. If the supervising physician does not 2739  
routinely practice in the facility's emergency department, the 2740  
supervising physician may, on occasion, send the physician 2741  
assistant to the facility's emergency department to assess and 2742  
manage a patient. In supervising the physician assistant's 2743  
assessment and management of the patient, the supervising 2744  
physician shall determine the appropriate level of supervision 2745  
in compliance with the requirements of divisions (A) to (C) of 2746  
this section, except that the supervising physician must be 2747  
available to go to the emergency department to personally 2748  
evaluate the patient and, at the request of an emergency 2749  
department physician, the supervising physician shall go to the 2750  
emergency department to personally evaluate the patient. 2751~~

(E) Each time a physician assistant writes a medical 2752  
order, including prescriptions written in the exercise of 2753  
physician-delegated prescriptive authority, the physician 2754  
assistant shall sign the form on which the order is written and 2755  
record on the form the time and date that the order is written. 2756  
~~When writing a medical order, the physician assistant shall 2757  
clearly identify the physician under whose supervision the 2758~~



<del>physician assistant is authorized to write the order.</del>	2759
(F) (1) The supervising physician of a physician assistant shall establish a quality assurance system to be used in supervising the physician assistant. All or part of the system may be applied to other physician assistants who are supervised by the supervising physician. The system shall be developed in consultation with each physician assistant to be supervised by the physician.	2760 2761 2762 2763 2764 2765 2766
(2) In establishing the quality assurance system, the supervising physician shall describe a process to be used for all of the following:	2767 2768 2769
(a) Routine review by the physician of selected patient record entries made by the physician assistant and selected medical orders issued by the physician assistant;	2770 2771 2772
(b) Discussion of complex cases;	2773
(c) Discussion of new medical developments relevant to the practice of the physician and physician assistant;	2774 2775
(d) Performance of any quality assurance activities required in rules adopted by state medical board pursuant to any recommendations made by the physician assistant policy committee under section 4730.06 of the Revised Code;	2776 2777 2778 2779
(e) Performance of any other quality assurance activities that the supervising physician considers to be appropriate.	2780 2781
(3) The supervising physician and physician assistant shall keep records of their quality assurance activities. On request, the records shall be made available to the board <del>and any health care professional working with the supervising physician and physician assistant.</del>	2782 2783 2784 2785 2786

**Sec. 4730.22.** (A) ~~A~~ When performing authorized services, a 2787  
physician assistant acts as the agent of the 2788  
physician 2789  
assistant's supervising physician. The supervising physician is 2789  
legally responsible and assumes legal liability for the services 2790  
provided by the physician assistant. 2791

The physician is not responsible or liable for any 2792  
services provided by the physician assistant after their 2793  
supervision agreement expires or is terminated. 2794

(B) When a health care facility permits physician 2795  
assistants to practice within that facility or any other health 2796  
care facility under its control, the health care facility shall 2797  
make reasonable efforts to explain to each individual who may 2798  
work with a particular physician assistant the scope of that 2799  
physician assistant's practice within the facility. The 2800  
appropriate credentialing body within the health care facility 2801  
shall provide, on request of an individual practicing in the 2802  
facility with a physician assistant, a copy of the facility's 2803  
policies on the practice of physician assistants within the 2804  
facility and a copy of each ~~physician supervisory plan and~~ 2805  
supervision agreement applicable to the physician assistant. 2806

An individual who follows the orders of a physician 2807  
assistant practicing in a health care facility is not subject to 2808  
disciplinary action by any administrative agency that governs 2809  
that individual's conduct and is not liable in damages in a 2810  
civil action for injury, death, or loss to person or property 2811  
resulting from the individual's acts or omissions in the 2812  
performance of any procedure, treatment, or other health care 2813  
service if the individual reasonably believed that the physician 2814  
assistant was acting within the proper scope of practice or was 2815  
relaying medical orders from a supervising physician, unless the 2816

act or omission constitutes willful or wanton misconduct. 2817

**Sec. 4730.25.** (A) The state medical board, by an 2818  
affirmative vote of not fewer than six members, may revoke or 2819  
may refuse to grant a ~~certificate~~ license to practice as a 2820  
physician assistant ~~or a certificate to prescribe~~ to a person 2821  
found by the board to have committed fraud, misrepresentation, 2822  
or deception in applying for or securing the ~~certificate~~ 2823  
license. 2824

(B) The board, by an affirmative vote of not fewer than 2825  
six members, shall, to the extent permitted by law, limit, 2826  
revoke, or suspend an individual's ~~certificate~~ license to 2827  
practice as a physician assistant ~~or certificate to prescribe~~ 2828  
prescriber number, refuse to issue a ~~certificate~~ license to an 2829  
applicant, refuse to reinstate a ~~certificate~~ license, or 2830  
reprimand or place on probation the holder of a ~~certificate~~ 2831  
license for any of the following reasons: 2832

(1) Failure to practice in accordance with the ~~conditions~~ 2833  
~~under which the supervising physician's supervision agreement~~ 2834  
with the physician assistant ~~was approved, including the~~ 2835  
~~requirement that when practicing under a particular supervising~~ 2836  
~~physician, the physician assistant must practice only according~~ 2837  
~~to the physician supervisory plan the board approved for that~~ 2838  
~~physician or, including, if applicable,~~ the policies of the 2839  
health care facility in which the supervising physician and 2840  
physician assistant are practicing; 2841

(2) Failure to comply with the requirements of this 2842  
chapter, Chapter 4731. of the Revised Code, or any rules adopted 2843  
by the board; 2844

(3) Violating or attempting to violate, directly or 2845

indirectly, or assisting in or abetting the violation of, or 2846  
conspiring to violate, any provision of this chapter, Chapter 2847  
4731. of the Revised Code, or the rules adopted by the board; 2848

(4) Inability to practice according to acceptable and 2849  
prevailing standards of care by reason of mental illness or 2850  
physical illness, including physical deterioration that 2851  
adversely affects cognitive, motor, or perceptive skills; 2852

(5) Impairment of ability to practice according to 2853  
acceptable and prevailing standards of care because of habitual 2854  
or excessive use or abuse of drugs, alcohol, or other substances 2855  
that impair ability to practice; 2856

(6) Administering drugs for purposes other than those 2857  
authorized under this chapter; 2858

(7) Willfully betraying a professional confidence; 2859

(8) Making a false, fraudulent, deceptive, or misleading 2860  
statement in soliciting or advertising for employment as a 2861  
physician assistant; in connection with any solicitation or 2862  
advertisement for patients; in relation to the practice of 2863  
medicine as it pertains to physician assistants; or in securing 2864  
or attempting to secure a ~~certificate~~license to practice as a 2865  
physician assistant, ~~a certificate to prescribe, or approval of~~ 2866  
~~a supervision agreement.~~ 2867

As used in this division, "false, fraudulent, deceptive, 2868  
or misleading statement" means a statement that includes a 2869  
misrepresentation of fact, is likely to mislead or deceive 2870  
because of a failure to disclose material facts, is intended or 2871  
is likely to create false or unjustified expectations of 2872  
favorable results, or includes representations or implications 2873  
that in reasonable probability will cause an ordinarily prudent 2874

person to misunderstand or be deceived.	2875
(9) Representing, with the purpose of obtaining	2876
compensation or other advantage personally or for any other	2877
person, that an incurable disease or injury, or other incurable	2878
condition, can be permanently cured;	2879
(10) The obtaining of, or attempting to obtain, money or	2880
anything of value by fraudulent misrepresentations in the course	2881
of practice;	2882
(11) A plea of guilty to, a judicial finding of guilt of,	2883
or a judicial finding of eligibility for intervention in lieu of	2884
conviction for, a felony;	2885
(12) Commission of an act that constitutes a felony in	2886
this state, regardless of the jurisdiction in which the act was	2887
committed;	2888
(13) A plea of guilty to, a judicial finding of guilt of,	2889
or a judicial finding of eligibility for intervention in lieu of	2890
conviction for, a misdemeanor committed in the course of	2891
practice;	2892
(14) A plea of guilty to, a judicial finding of guilt of,	2893
or a judicial finding of eligibility for intervention in lieu of	2894
conviction for, a misdemeanor involving moral turpitude;	2895
(15) Commission of an act in the course of practice that	2896
constitutes a misdemeanor in this state, regardless of the	2897
jurisdiction in which the act was committed;	2898
(16) Commission of an act involving moral turpitude that	2899
constitutes a misdemeanor in this state, regardless of the	2900
jurisdiction in which the act was committed;	2901
(17) A plea of guilty to, a judicial finding of guilt of,	2902

or a judicial finding of eligibility for intervention in lieu of 2903  
conviction for violating any state or federal law regulating the 2904  
possession, distribution, or use of any drug, including 2905  
trafficking in drugs; 2906

(18) Any of the following actions taken by the state 2907  
agency responsible for regulating the practice of physician 2908  
assistants in another state, for any reason other than the 2909  
nonpayment of fees: the limitation, revocation, or suspension of 2910  
an individual's license to practice; acceptance of an 2911  
individual's license surrender; denial of a license; refusal to 2912  
renew or reinstate a license; imposition of probation; or 2913  
issuance of an order of censure or other reprimand; 2914

(19) A departure from, or failure to conform to, minimal 2915  
standards of care of similar physician assistants under the same 2916  
or similar circumstances, regardless of whether actual injury to 2917  
a patient is established; 2918

(20) Violation of the conditions placed by the board on a 2919  
~~certificate~~ license to practice as a physician assistant, ~~a~~ 2920  
~~certificate to prescribe, a physician supervisory plan, or~~ 2921  
~~supervision agreement;~~ 2922

(21) Failure to use universal blood and body fluid 2923  
precautions established by rules adopted under section 4731.051 2924  
of the Revised Code; 2925

(22) Failure to cooperate in an investigation conducted by 2926  
the board under section 4730.26 of the Revised Code, including 2927  
failure to comply with a subpoena or order issued by the board 2928  
or failure to answer truthfully a question presented by the 2929  
board at a deposition or in written interrogatories, except that 2930  
failure to cooperate with an investigation shall not constitute 2931

grounds for discipline under this section if a court of 2932  
competent jurisdiction has issued an order that either quashes a 2933  
subpoena or permits the individual to withhold the testimony or 2934  
evidence in issue; 2935

(23) Assisting suicide, as defined in section 3795.01 of 2936  
the Revised Code; 2937

(24) Prescribing any drug or device to perform or induce 2938  
an abortion, or otherwise performing or inducing an abortion; 2939

(25) Failure to comply with section 4730.53 of the Revised 2940  
Code, unless the board no longer maintains a drug database 2941  
pursuant to section 4729.75 of the Revised Code; 2942

~~(25)~~ (26) Failure to comply with the requirements in 2943  
section 3719.061 of the Revised Code before issuing to a minor a 2944  
prescription for a controlled substance containing an opioid; 2945

(27) Having certification by the national commission on 2946  
certification of physician assistants or a successor 2947  
organization expire, lapse, or be suspended or revoked; 2948

(28) The revocation, suspension, restriction, reduction, 2949  
or termination of clinical privileges by the United States 2950  
department of defense or department of veterans affairs or the 2951  
termination or suspension of a certificate of registration to 2952  
prescribe drugs by the drug enforcement administration of the 2953  
United States department of justice. 2954

(C) Disciplinary actions taken by the board under 2955  
divisions (A) and (B) of this section shall be taken pursuant to 2956  
an adjudication under Chapter 119. of the Revised Code, except 2957  
that in lieu of an adjudication, the board may enter into a 2958  
consent agreement with a physician assistant or applicant to 2959  
resolve an allegation of a violation of this chapter or any rule 2960

adopted under it. A consent agreement, when ratified by an 2961  
affirmative vote of not fewer than six members of the board, 2962  
shall constitute the findings and order of the board with 2963  
respect to the matter addressed in the agreement. If the board 2964  
refuses to ratify a consent agreement, the admissions and 2965  
findings contained in the consent agreement shall be of no force 2966  
or effect. 2967

(D) For purposes of divisions (B) (12), (15), and (16) of 2968  
this section, the commission of the act may be established by a 2969  
finding by the board, pursuant to an adjudication under Chapter 2970  
119. of the Revised Code, that the applicant or ~~certificate~~ 2971  
license holder committed the act in question. The board shall 2972  
have no jurisdiction under these divisions in cases where the 2973  
trial court renders a final judgment in the ~~certificate~~license 2974  
holder's favor and that judgment is based upon an adjudication 2975  
on the merits. The board shall have jurisdiction under these 2976  
divisions in cases where the trial court issues an order of 2977  
dismissal upon technical or procedural grounds. 2978

(E) The sealing of conviction records by any court shall 2979  
have no effect upon a prior board order entered under the 2980  
provisions of this section or upon the board's jurisdiction to 2981  
take action under the provisions of this section if, based upon 2982  
a plea of guilty, a judicial finding of guilt, or a judicial 2983  
finding of eligibility for intervention in lieu of conviction, 2984  
the board issued a notice of opportunity for a hearing prior to 2985  
the court's order to seal the records. The board shall not be 2986  
required to seal, destroy, redact, or otherwise modify its 2987  
records to reflect the court's sealing of conviction records. 2988

(F) For purposes of this division, any individual who 2989  
holds a ~~certificate~~license issued under this chapter, or 2990



applies for a ~~certificate~~-license issued under this chapter, 2991  
shall be deemed to have given consent to submit to a mental or 2992  
physical examination when directed to do so in writing by the 2993  
board and to have waived all objections to the admissibility of 2994  
testimony or examination reports that constitute a privileged 2995  
communication. 2996

(1) In enforcing division (B) (4) of this section, the 2997  
board, upon a showing of a possible violation, may compel any 2998  
individual who holds a ~~certificate~~-license issued under this 2999  
chapter or who has applied for a ~~certificate~~-license pursuant to 3000  
this chapter to submit to a mental examination, physical 3001  
examination, including an HIV test, or both a mental and 3002  
physical examination. The expense of the examination is the 3003  
responsibility of the individual compelled to be examined. 3004  
Failure to submit to a mental or physical examination or consent 3005  
to an HIV test ordered by the board constitutes an admission of 3006  
the allegations against the individual unless the failure is due 3007  
to circumstances beyond the individual's control, and a default 3008  
and final order may be entered without the taking of testimony 3009  
or presentation of evidence. If the board finds a physician 3010  
assistant unable to practice because of the reasons set forth in 3011  
division (B) (4) of this section, the board shall require the 3012  
physician assistant to submit to care, counseling, or treatment 3013  
by physicians approved or designated by the board, as a 3014  
condition for an initial, continued, reinstated, or renewed 3015  
~~certificate~~-license. An individual affected under this division 3016  
shall be afforded an opportunity to demonstrate to the board the 3017  
ability to resume practicing in compliance with acceptable and 3018  
prevailing standards of care. 3019

(2) For purposes of division (B) (5) of this section, if 3020  
the board has reason to believe that any individual who holds a 3021

~~certificate-license~~ issued under this chapter or any applicant 3022  
for a ~~certificate-license~~ suffers such impairment, the board may 3023  
compel the individual to submit to a mental or physical 3024  
examination, or both. The expense of the examination is the 3025  
responsibility of the individual compelled to be examined. Any 3026  
mental or physical examination required under this division 3027  
shall be undertaken by a treatment provider or physician 3028  
qualified to conduct such examination and chosen by the board. 3029

Failure to submit to a mental or physical examination 3030  
ordered by the board constitutes an admission of the allegations 3031  
against the individual unless the failure is due to 3032  
circumstances beyond the individual's control, and a default and 3033  
final order may be entered without the taking of testimony or 3034  
presentation of evidence. If the board determines that the 3035  
individual's ability to practice is impaired, the board shall 3036  
suspend the individual's ~~certificate-license~~ or deny the 3037  
individual's application and shall require the individual, as a 3038  
condition for initial, continued, reinstated, or renewed 3039  
~~certification to practice or prescribe licensure~~, to submit to 3040  
treatment. 3041

Before being eligible to apply for reinstatement of a 3042  
~~certificate-license~~ suspended under this division, the physician 3043  
assistant shall demonstrate to the board the ability to resume 3044  
practice or prescribing in compliance with acceptable and 3045  
prevailing standards of care. The demonstration shall include 3046  
the following: 3047

(a) Certification from a treatment provider approved under 3048  
section 4731.25 of the Revised Code that the individual has 3049  
successfully completed any required inpatient treatment; 3050

(b) Evidence of continuing full compliance with an 3051

aftercare contract or consent agreement; 3052

(c) Two written reports indicating that the individual's 3053  
ability to practice has been assessed and that the individual 3054  
has been found capable of practicing according to acceptable and 3055  
prevailing standards of care. The reports shall be made by 3056  
individuals or providers approved by the board for making such 3057  
assessments and shall describe the basis for their 3058  
determination. 3059

The board may reinstate a ~~certificate~~ license suspended 3060  
under this division after such demonstration and after the 3061  
individual has entered into a written consent agreement. 3062

When the impaired physician assistant resumes practice or 3063  
prescribing, the board shall require continued monitoring of the 3064  
physician assistant. The monitoring shall include compliance 3065  
with the written consent agreement entered into before 3066  
reinstatement or with conditions imposed by board order after a 3067  
hearing, and, upon termination of the consent agreement, 3068  
submission to the board for at least two years of annual written 3069  
progress reports made under penalty of falsification stating 3070  
whether the physician assistant has maintained sobriety. 3071

(G) If the secretary and supervising member determine that 3072  
there is clear and convincing evidence that a physician 3073  
assistant has violated division (B) of this section and that the 3074  
individual's continued practice or prescribing presents a danger 3075  
of immediate and serious harm to the public, they may recommend 3076  
that the board suspend the individual's ~~certificate to practice~~ 3077  
~~or prescribe~~ license without a prior hearing. Written 3078  
allegations shall be prepared for consideration by the board. 3079

The board, upon review of those allegations and by an 3080

affirmative vote of not fewer than six of its members, excluding 3081  
the secretary and supervising member, may suspend a ~~certificate-~~ 3082  
license without a prior hearing. A telephone conference call may 3083  
be utilized for reviewing the allegations and taking the vote on 3084  
the summary suspension. 3085

The board shall issue a written order of suspension by 3086  
certified mail or in person in accordance with section 119.07 of 3087  
the Revised Code. The order shall not be subject to suspension 3088  
by the court during pendency of any appeal filed under section 3089  
119.12 of the Revised Code. If the physician assistant requests 3090  
an adjudicatory hearing by the board, the date set for the 3091  
hearing shall be within fifteen days, but not earlier than seven 3092  
days, after the physician assistant requests the hearing, unless 3093  
otherwise agreed to by both the board and the ~~certificate-~~ 3094  
license holder. 3095

A summary suspension imposed under this division shall 3096  
remain in effect, unless reversed on appeal, until a final 3097  
adjudicative order issued by the board pursuant to this section 3098  
and Chapter 119. of the Revised Code becomes effective. The 3099  
board shall issue its final adjudicative order within sixty days 3100  
after completion of its hearing. Failure to issue the order 3101  
within sixty days shall result in dissolution of the summary 3102  
suspension order, but shall not invalidate any subsequent, final 3103  
adjudicative order. 3104

(H) If the board takes action under division (B) (11), 3105  
(13), or (14) of this section, and the judicial finding of 3106  
guilt, guilty plea, or judicial finding of eligibility for 3107  
intervention in lieu of conviction is overturned on appeal, upon 3108  
exhaustion of the criminal appeal, a petition for 3109  
reconsideration of the order may be filed with the board along 3110

with appropriate court documents. Upon receipt of a petition and 3111  
supporting court documents, the board shall reinstate the 3112  
~~certificate to practice or prescribe~~ individual's license. The 3113  
board may then hold an adjudication under Chapter 119. of the 3114  
Revised Code to determine whether the individual committed the 3115  
act in question. Notice of opportunity for hearing shall be 3116  
given in accordance with Chapter 119. of the Revised Code. If 3117  
the board finds, pursuant to an adjudication held under this 3118  
division, that the individual committed the act, or if no 3119  
hearing is requested, it may order any of the sanctions 3120  
identified under division (B) of this section. 3121

(I) The ~~certificate~~ license to practice issued to a 3122  
physician assistant and the physician assistant's practice in 3123  
this state are automatically suspended as of the date the 3124  
physician assistant pleads guilty to, is found by a judge or 3125  
jury to be guilty of, or is subject to a judicial finding of 3126  
eligibility for intervention in lieu of conviction in this state 3127  
or treatment or intervention in lieu of conviction in another 3128  
state for any of the following criminal offenses in this state 3129  
or a substantially equivalent criminal offense in another 3130  
jurisdiction: aggravated murder, murder, voluntary manslaughter, 3131  
felonious assault, kidnapping, rape, sexual battery, gross 3132  
sexual imposition, aggravated arson, aggravated robbery, or 3133  
aggravated burglary. Continued practice after the suspension 3134  
shall be considered practicing without a ~~certificate~~ license. 3135

The board shall notify the individual subject to the 3136  
suspension by certified mail or in person in accordance with 3137  
section 119.07 of the Revised Code. If an individual whose 3138  
~~certificate~~ license is suspended under this division fails to 3139  
make a timely request for an adjudication under Chapter 119. of 3140  
the Revised Code, the board shall enter a final order 3141

permanently revoking the individual's ~~certificate~~license to 3142  
practice. 3143

(J) In any instance in which the board is required by 3144  
Chapter 119. of the Revised Code to give notice of opportunity 3145  
for hearing and the individual subject to the notice does not 3146  
timely request a hearing in accordance with section 119.07 of 3147  
the Revised Code, the board is not required to hold a hearing, 3148  
but may adopt, by an affirmative vote of not fewer than six of 3149  
its members, a final order that contains the board's findings. 3150  
In that final order, the board may order any of the sanctions 3151  
identified under division (A) or (B) of this section. 3152

(K) Any action taken by the board under division (B) of 3153  
this section resulting in a suspension shall be accompanied by a 3154  
written statement of the conditions under which the physician 3155  
assistant's ~~certificate~~license may be reinstated. The board 3156  
shall adopt rules in accordance with Chapter 119. of the Revised 3157  
Code governing conditions to be imposed for reinstatement. 3158  
Reinstatement of a ~~certificate~~license suspended pursuant to 3159  
division (B) of this section requires an affirmative vote of not 3160  
fewer than six members of the board. 3161

(L) When the board refuses to grant to an applicant a 3162  
~~certificate~~license to practice as a physician assistant ~~or a~~ 3163  
~~certificate to prescribe~~, revokes an individual's ~~certificate~~ 3164  
license, refuses to issue a ~~certificate~~license, or refuses to 3165  
reinstatement an individual's ~~certificate~~license, the board may 3166  
specify that its action is permanent. An individual subject to a 3167  
permanent action taken by the board is forever thereafter 3168  
ineligible to hold the ~~certificate~~license and the board shall 3169  
not accept an application for reinstatement of the ~~certificate~~ 3170  
license or for issuance of a new ~~certificate~~license. 3171

(M) Notwithstanding any other provision of the Revised Code, all of the following apply:	3172 3173
(1) The surrender of a <del>certificate</del> <u>license</u> issued under this chapter is not effective unless or until accepted by the board. Reinstatement of a <del>certificate</del> <u>license</u> surrendered to the board requires an affirmative vote of not fewer than six members of the board.	3174 3175 3176 3177 3178
(2) An application made under this chapter for a <del>certificate, approval of a physician supervisory plan, or approval of a supervision agreement</del> <u>license</u> may not be withdrawn without approval of the board.	3179 3180 3181 3182
(3) Failure by an individual to renew a <del>certificate</del> <u>license</u> in accordance with section 4730.14 <del>or section 4730.48</del> of the Revised Code shall not remove or limit the board's jurisdiction to take disciplinary action under this section against the individual.	3183 3184 3185 3186 3187
<b>Sec. 4730.251.</b> On receipt of a notice pursuant to section 3123.43 of the Revised Code, the state medical board shall comply with sections 3123.41 to 3123.50 of the Revised Code and any applicable rules adopted under section 3123.63 of the Revised Code with respect to a <del>certificate</del> <u>license to practice as a physician assistant</u> issued pursuant to this chapter.	3188 3189 3190 3191 3192 3193
<b>Sec. 4730.27.</b> If the state medical board has reason to believe that any person who has been granted a <del>certificate</del> <u>license</u> under this chapter <u>to practice as a physician assistant</u> is mentally ill or mentally incompetent, it may file in the probate court of the county in which such person has a legal residence an affidavit in the form prescribed in section 5122.11 of the Revised Code and signed by the board secretary or a	3194 3195 3196 3197 3198 3199 3200

member of the secretary's staff, whereupon the same proceedings 3201  
shall be had as provided in Chapter 5122. of the Revised Code. 3202  
The attorney general may represent the board in any proceeding 3203  
commenced under this section. 3204

If a physician assistant is adjudged by a probate court to 3205  
be mentally ill or mentally incompetent, the individual's 3206  
~~certificate-license~~ shall be automatically suspended until the 3207  
individual has filed with the board a certified copy of an 3208  
adjudication by a probate court of being restored to competency 3209  
or has submitted to the board proof, satisfactory to the board, 3210  
of having been discharged as being restored to competency in the 3211  
manner and form provided in section 5122.38 of the Revised Code. 3212  
The judge of the court shall immediately notify the board of an 3213  
adjudication of incompetence and note any suspension of a 3214  
~~certificate-license~~ in the margin of the court's record of the 3215  
~~certificate license~~. 3216

**Sec. 4730.28.** (A) An individual whose ~~certificate-license~~ 3217  
to practice as a physician assistant issued under this chapter 3218  
has been suspended or is in an inactive state for any cause for 3219  
more than two years may apply to the state medical board to have 3220  
the ~~certificate-license~~ restored. 3221

(B) (1) The board shall not restore a ~~certificate-license~~ 3222  
under this section unless the applicant complies with sections 3223  
4776.01 to 4776.04 of the Revised Code. The board shall 3224  
determine the applicant's present fitness to resume practice. 3225  
The board shall consider the moral background and the activities 3226  
of the applicant during the period of suspension or inactivity. 3227

(2) When restoring a ~~certificate license~~, the board may 3228  
impose terms and conditions, including the following: 3229



(a) Requiring the applicant to obtain additional training	3230
and pass an examination upon completion of the training;	3231
(b) Restricting or limiting the extent, scope, or type of	3232
practice as a physician assistant that the individual may	3233
resume.	3234
<b>Sec. 4730.31.</b> (A) As used in this section, "prosecutor"	3235
has the same meaning as in section 2935.01 of the Revised Code.	3236
(B) Whenever any person holding a valid <del>certificate</del>	3237
<u>license to practice as a physician assistant</u> issued pursuant to	3238
this chapter pleads guilty to, is subject to a judicial finding	3239
of guilt of, or is subject to a judicial finding of eligibility	3240
for intervention in lieu of conviction for a violation of	3241
Chapter 2907., 2925., or 3719. of the Revised Code or of any	3242
substantively comparable ordinance of a municipal corporation in	3243
connection with practicing as a physician assistant, the	3244
prosecutor in the case shall, on forms prescribed and provided	3245
by the state medical board, promptly notify the board of the	3246
conviction. Within thirty days of receipt of such information,	3247
the board shall initiate action in accordance with Chapter 119.	3248
of the Revised Code to determine whether to suspend or revoke	3249
the <del>certificate</del> <u>license</u> under section 4730.25 of the Revised	3250
Code.	3251
(C) The prosecutor in any case against any person holding	3252
a valid <del>certificate</del> <u>license</u> issued pursuant to this chapter	3253
shall, on forms prescribed and provided by the state medical	3254
board, notify the board of any of the following:	3255
(1) A plea of guilty to, a judicial finding of guilt of,	3256
or judicial finding of eligibility for intervention in lieu of	3257
conviction for a felony, or a case where the trial court issues	3258

an order of dismissal upon technical or procedural grounds of a 3259  
felony charge; 3260

(2) A plea of guilty to, a judicial finding of guilt of, 3261  
or judicial finding or eligibility for intervention in lieu of 3262  
conviction for a misdemeanor committed in the course of 3263  
practice, or a case where the trial court issues an order of 3264  
dismissal upon technical or procedural grounds of a charge of a 3265  
misdemeanor, if the alleged act was committed in the course of 3266  
practice; 3267

(3) A plea of guilty to, a judicial finding of guilt of, 3268  
or judicial finding of eligibility for intervention in lieu of 3269  
conviction for a misdemeanor involving moral turpitude, or a 3270  
case where the trial court issues an order of dismissal upon 3271  
technical or procedural grounds of a charge of a misdemeanor 3272  
involving moral turpitude. 3273

The report shall include the name and address of the 3274  
~~certificate~~license holder, the nature of the offense for which 3275  
the action was taken, and the certified court documents 3276  
recording the action. 3277

**Sec. 4730.32.** (A) Within sixty days after the imposition 3278  
of any formal disciplinary action taken by a health care 3279  
facility against any individual holding a valid ~~certificate~~ 3280  
license to practice as a physician assistant issued under this 3281  
chapter, the chief administrator or executive officer of the 3282  
facility shall report to the state medical board the name of the 3283  
individual, the action taken by the facility, and a summary of 3284  
the underlying facts leading to the action taken. Upon request, 3285  
the board shall be provided certified copies of the patient 3286  
records that were the basis for the facility's action. Prior to 3287  
release to the board, the summary shall be approved by the peer 3288

review committee that reviewed the case or by the governing 3289  
board of the facility. 3290

The filing of a report with the board or decision not to 3291  
file a report, investigation by the board, or any disciplinary 3292  
action taken by the board, does not preclude a health care 3293  
facility from taking disciplinary action against a physician 3294  
assistant. 3295

In the absence of fraud or bad faith, no individual or 3296  
entity that provides patient records to the board shall be 3297  
liable in damages to any person as a result of providing the 3298  
records. 3299

(B) A physician assistant, professional association or 3300  
society of physician assistants, physician, or professional 3301  
association or society of physicians that believes a violation 3302  
of any provision of this chapter, Chapter 4731. of the Revised 3303  
Code, or rule of the board has occurred shall report to the 3304  
board the information upon which the belief is based. This 3305  
division does not require any treatment provider approved by the 3306  
board under section 4731.25 of the Revised Code or any employee, 3307  
agent, or representative of such a provider to make reports with 3308  
respect to a physician assistant participating in treatment or 3309  
aftercare for substance abuse as long as the physician assistant 3310  
maintains participation in accordance with the requirements of 3311  
section 4731.25 of the Revised Code and the treatment provider 3312  
or employee, agent, or representative of the provider has no 3313  
reason to believe that the physician assistant has violated any 3314  
provision of this chapter or rule adopted under it, other than 3315  
being impaired by alcohol, drugs, or other substances. This 3316  
division does not require reporting by any member of an impaired 3317  
practitioner committee established by a health care facility or 3318

by any representative or agent of a committee or program 3319  
sponsored by a professional association or society of physician 3320  
assistants to provide peer assistance to physician assistants 3321  
with substance abuse problems with respect to a physician 3322  
assistant who has been referred for examination to a treatment 3323  
program approved by the board under section 4731.25 of the 3324  
Revised Code if the physician assistant cooperates with the 3325  
referral for examination and with any determination that the 3326  
physician assistant should enter treatment and as long as the 3327  
committee member, representative, or agent has no reason to 3328  
believe that the physician assistant has ceased to participate 3329  
in the treatment program in accordance with section 4731.25 of 3330  
the Revised Code or has violated any provision of this chapter 3331  
or rule adopted under it, other than being impaired by alcohol, 3332  
drugs, or other substances. 3333

(C) Any professional association or society composed 3334  
primarily of physician assistants that suspends or revokes an 3335  
individual's membership for violations of professional ethics, 3336  
or for reasons of professional incompetence or professional 3337  
malpractice, within sixty days after a final decision, shall 3338  
report to the board, on forms prescribed and provided by the 3339  
board, the name of the individual, the action taken by the 3340  
professional organization, and a summary of the underlying facts 3341  
leading to the action taken. 3342

The filing or nonfiling of a report with the board, 3343  
investigation by the board, or any disciplinary action taken by 3344  
the board, shall not preclude a professional organization from 3345  
taking disciplinary action against a physician assistant. 3346

(D) Any insurer providing professional liability insurance 3347  
to any person holding a valid ~~certificate~~ license to practice as 3348

a physician assistant issued under this chapter or any other 3349  
entity that seeks to indemnify the professional liability of a 3350  
physician assistant shall notify the board within thirty days 3351  
after the final disposition of any written claim for damages 3352  
where such disposition results in a payment exceeding twenty- 3353  
five thousand dollars. The notice shall contain the following 3354  
information: 3355

(1) The name and address of the person submitting the 3356  
notification; 3357

(2) The name and address of the insured who is the subject 3358  
of the claim; 3359

(3) The name of the person filing the written claim; 3360

(4) The date of final disposition; 3361

(5) If applicable, the identity of the court in which the 3362  
final disposition of the claim took place. 3363

(E) The board may investigate possible violations of this 3364  
chapter or the rules adopted under it that are brought to its 3365  
attention as a result of the reporting requirements of this 3366  
section, except that the board shall conduct an investigation if 3367  
a possible violation involves repeated malpractice. As used in 3368  
this division, "repeated malpractice" means three or more claims 3369  
for malpractice within the previous five-year period, each 3370  
resulting in a judgment or settlement in excess of twenty-five 3371  
thousand dollars in favor of the claimant, and each involving 3372  
negligent conduct by the physician assistant. 3373

(F) All summaries, reports, and records received and 3374  
maintained by the board pursuant to this section shall be held 3375  
in confidence and shall not be subject to discovery or 3376  
introduction in evidence in any federal or state civil action 3377

involving a physician assistant, supervising physician, or 3378  
health care facility arising out of matters that are the subject 3379  
of the reporting required by this section. The board may use the 3380  
information obtained only as the basis for an investigation, as 3381  
evidence in a disciplinary hearing against a physician assistant 3382  
or supervising physician, or in any subsequent trial or appeal 3383  
of a board action or order. 3384

The board may disclose the summaries and reports it 3385  
receives under this section only to health care facility 3386  
committees within or outside this state that are involved in 3387  
credentialing or recredentialing a physician assistant or 3388  
supervising physician or reviewing their privilege to practice 3389  
within a particular facility. The board shall indicate whether 3390  
or not the information has been verified. Information 3391  
transmitted by the board shall be subject to the same 3392  
confidentiality provisions as when maintained by the board. 3393

(G) Except for reports filed by an individual pursuant to 3394  
division (B) of this section, the board shall send a copy of any 3395  
reports or summaries it receives pursuant to this section to the 3396  
physician assistant. The physician assistant shall have the 3397  
right to file a statement with the board concerning the 3398  
correctness or relevance of the information. The statement shall 3399  
at all times accompany that part of the record in contention. 3400

(H) An individual or entity that reports to the board or 3401  
refers an impaired physician assistant to a treatment provider 3402  
approved by the board under section 4731.25 of the Revised Code 3403  
shall not be subject to suit for civil damages as a result of 3404  
the report, referral, or provision of the information. 3405

(I) In the absence of fraud or bad faith, a professional 3406  
association or society of physician assistants that sponsors a 3407

committee or program to provide peer assistance to a physician 3408  
assistant with substance abuse problems, a representative or 3409  
agent of such a committee or program, and a member of the state 3410  
medical board shall not be held liable in damages to any person 3411  
by reason of actions taken to refer a physician assistant to a 3412  
treatment provider approved under section 4731.25 of the Revised 3413  
Code for examination or treatment. 3414

**Sec. 4730.33.** The secretary of the state medical board 3415  
shall enforce the laws relating to the practice of physician 3416  
assistants. If the secretary has knowledge or notice of a 3417  
violation of this chapter or the rules adopted under it, the 3418  
secretary shall investigate the matter, and, upon probable cause 3419  
appearing, file a complaint and prosecute the offender. When 3420  
requested by the secretary, the prosecuting attorney of the 3421  
proper county shall take charge of and conduct such prosecution. 3422

In the prosecution of any person for violation of division 3423  
(A) of section 4730.02 of the Revised Code it shall not be 3424  
necessary to allege or prove want of a valid ~~certificate~~license 3425  
to practice as a physician assistant, but such matters shall be 3426  
a matter of defense to be established by the accused. 3427

**Sec. 4730.38.** (A) Except as provided in division (B) of 3428  
this section, the physician assistant policy committee of the 3429  
state medical board shall, at such times the committee 3430  
determines to be necessary, submit to the board recommendations 3431  
regarding physician-delegated prescriptive authority for 3432  
physician assistants. The committee's recommendations shall 3433  
address both of the following: 3434

(1) Policy and procedures regarding physician-delegated 3435  
prescriptive authority, ~~including the issuance of certificates~~ 3436  
~~to prescribe under this chapter;~~ 3437

(2) Any issue the committee considers necessary to assist the board in fulfilling its duty to adopt rules governing physician-delegated prescriptive authority, ~~including the issuance of certificates to prescribe.~~

(B) ~~Not less than every six months beginning on the first day of June following the effective date of this amendment,~~ the committee shall review the physician assistant formulary the board adopts pursuant to division (A) (1) of section 4730.39 of the Revised Code and, to the extent it determines to be necessary, submit recommendations proposing changes to the formulary.

(C) Recommendations submitted under this section are subject to the procedures and time frames specified in division (C) of section 4730.06 of the Revised Code.

**Sec. 4730.39.** (A) The state medical board shall do ~~both~~ all of the following:

(1) Adopt a formulary listing the drugs and therapeutic devices by class and specific generic nomenclature that a physician may include in the physician-delegated prescriptive authority granted to a physician assistant who holds a ~~certificate to prescribe under this chapter~~ valid prescriber number issued by the state medical board;

(2) Adopt rules governing physician-delegated prescriptive authority for physician assistants, ~~including the issuance of certificates to prescribe under this chapter;~~

(3) Establish standards and procedures for delegation under division (A) of section 4730.203 of the Revised Code of the authority to administer drugs.

(B) The board's rules governing physician-delegated



prescriptive authority adopted pursuant to division (A) (2) of 3467  
this section shall be adopted in accordance with Chapter 119. of 3468  
the Revised Code and shall establish all of the following: 3469

(1) Requirements regarding the pharmacology courses that a 3470  
physician assistant is required to complete ~~to receive a~~ 3471  
~~certificate to prescribe;~~ 3472

(2) ~~Standards and procedures for the issuance and renewal~~ 3473  
~~of certificates to prescribe to physician assistants;~~ 3474

~~(3) Standards and procedures for the appropriate conduct~~ 3475  
~~of the provisional period that a physician assistant is required~~ 3476  
~~to complete pursuant to section 4730.45 of the Revised Code and~~ 3477  
~~for determining whether a physician assistant has successfully~~ 3478  
~~completed the provisional period;~~ 3479

~~(4) A specific prohibition against prescribing any drug or~~ 3480  
~~device to perform or induce an abortion;~~ 3481

~~(5)~~ (3) Standards and procedures to be followed by a 3482  
physician assistant in personally furnishing samples of drugs or 3483  
complete or partial supplies of drugs to patients under section 3484  
4730.43 of the Revised Code; 3485

~~(6)~~ (4) Any other requirements the board considers 3486  
necessary to implement the provisions of this chapter regarding 3487  
physician-delegated prescriptive authority ~~and the issuance of~~ 3488  
~~certificates to prescribe.~~ 3489

(C) (1) After considering recommendations submitted by the 3490  
physician assistant policy committee pursuant to sections 3491  
4730.06 and 4730.38 of the Revised Code, the board shall review 3492  
either or both of the following, as appropriate according to the 3493  
submitted recommendations: 3494

(a) The formulary the board adopts under division (A) (1) of this section;	3495 3496
(b) The rules the board adopts under division (A) (2) of this section regarding physician-delegated prescriptive authority.	3497 3498 3499
(2) Based on its review, the board shall make any necessary modifications to the formulary or rules.	3500 3501
<b>Sec. 4730.41.</b> (A) <del>A certificate to prescribe issued under this chapter authorizes a physician assistant</del> <u>who holds a valid prescriber number issued by the state medical board is</u> authorized to prescribe and personally furnish drugs and therapeutic devices in the exercise of physician-delegated prescriptive authority.	3502 3503 3504 3505 3506 3507
(B) In exercising physician-delegated prescriptive authority, a physician assistant is subject to all of the following:	3508 3509 3510
(1) The physician assistant shall exercise physician-delegated prescriptive authority only to the extent that the physician supervising the physician assistant has granted that authority.	3511 3512 3513 3514
(2) The physician assistant shall comply with all conditions placed on the physician-delegated prescriptive authority, as specified by the supervising physician who is supervising the physician assistant in the exercise of physician-delegated prescriptive authority.	3515 3516 3517 3518 3519
(3) If the physician assistant possesses physician-delegated prescriptive authority for controlled substances, the physician assistant shall register with the federal drug enforcement administration.	3520 3521 3522 3523

(4) If the physician assistant possesses physician- 3524  
delegated prescriptive authority for schedule II controlled 3525  
substances, the physician assistant shall comply with section 3526  
4730.411 of the Revised Code. 3527

(5) If the physician assistant possesses physician- 3528  
delegated prescriptive authority to prescribe for a minor, as 3529  
defined in section 3719.061 of the Revised Code, a compound that 3530  
is a controlled substance containing an opioid, the physician 3531  
assistant shall comply with section 3719.061 of the Revised 3532  
Code. 3533

(6) The physician assistant shall comply with the 3534  
requirements of section 4730.44 of the Revised Code. 3535

**Sec. 4730.42.** (A) In granting physician-delegated 3536  
prescriptive authority to a particular physician assistant who 3537  
holds a ~~certificate to prescribe valid prescriber number~~ issued 3538  
~~under this chapter by the state medical board~~, the supervising 3539  
physician is subject to all of the following: 3540

(1) The supervising physician shall not grant physician- 3541  
delegated prescriptive authority for any drug or therapeutic 3542  
device that is not listed on the physician assistant formulary 3543  
adopted under section 4730.39 of the Revised Code as a drug or 3544  
therapeutic device that may be included in the physician- 3545  
delegated prescriptive authority granted to a physician 3546  
assistant. 3547

(2) The supervising physician shall not grant physician- 3548  
delegated prescriptive authority for any drug or device that may 3549  
be used to perform or induce an abortion. 3550

(3) The supervising physician shall not grant physician- 3551  
delegated prescriptive authority in a manner that exceeds the 3552

supervising physician's prescriptive authority, including the 3553  
physician's authority to treat chronic pain with controlled 3554  
substances and products containing tramadol as described in 3555  
section 4731.052 of the Revised Code. 3556

(4) The supervising physician shall supervise the 3557  
physician assistant in accordance with all both of the 3558  
following: 3559

(a) The supervision requirements specified in section 3560  
4730.21 of the Revised Code ~~and, in the case of supervision~~ 3561  
~~provided during a provisional period of physician-delegated~~ 3562  
~~prescriptive authority, the supervision requirements specified~~ 3563  
~~in section 4730.45 of the Revised Code;~~ 3564

(b) ~~The physician supervisory plan approved for the~~ 3565  
~~supervising physician or supervision agreement entered into with~~ 3566  
the physician assistant under section 4730.19 of the Revised 3567  
Code, including, if applicable, the policies of the health care 3568  
facility in which the physician and physician assistant are 3569  
practicing. 3570

~~(c) The supervision agreement approved under section~~ 3571  
~~4730.19 of the Revised Code that applies to the supervising~~ 3572  
~~physician and the physician assistant.~~ 3573

(B) (1) The supervising physician of a physician assistant 3574  
may place conditions on the physician-delegated prescriptive 3575  
authority granted to the physician assistant. If conditions are 3576  
placed on that authority, the supervising physician shall 3577  
maintain a written record of the conditions and make the record 3578  
available to the state medical board on request. 3579

(2) The conditions that a supervising physician may place 3580  
on the physician-delegated prescriptive authority granted to a 3581

physician assistant include the following:	3582
(a) Identification by class and specific generic nomenclature of drugs and therapeutic devices that the physician chooses not to permit the physician assistant to prescribe;	3583 3584 3585
(b) Limitations on the dosage units or refills that the physician assistant is authorized to prescribe;	3586 3587
(c) Specification of circumstances under which the physician assistant is required to refer patients to the supervising physician or another physician when exercising physician-delegated prescriptive authority;	3588 3589 3590 3591
(d) Responsibilities to be fulfilled by the physician in supervising the physician assistant that are not otherwise specified in the <u>physician supervisory plan supervision agreement</u> or otherwise required by this chapter.	3592 3593 3594 3595
<b>Sec. 4730.43.</b> (A) A physician assistant who holds a <u>certificate to prescribe valid prescriber number</u> issued <del>under this chapter</del> <u>by the state medical board</u> and has been granted physician-delegated prescriptive authority <del>by a supervising physician</del> may personally furnish to a patient samples of drugs and therapeutic devices that are included in the physician assistant's physician-delegated prescriptive authority, subject to all of the following:	3596 3597 3598 3599 3600 3601 3602 3603
(1) The amount of the sample furnished shall not exceed a <u>seventy-two-hour</u> supply, except when the minimum available quantity of the sample is packaged in an amount that is greater than a <u>seventy-two-hour</u> supply, in which case the physician assistant may furnish the sample in the package amount.	3604 3605 3606 3607 3608
(2) No charge may be imposed for the sample or for furnishing it.	3609 3610

(3) Samples of controlled substances may not be personally furnished. 3611  
3612

(B) A physician assistant who holds a ~~certificate to~~ 3613  
~~prescribe valid prescriber number issued under this chapter by~~ 3614  
the state medical board and has been granted physician-delegated 3615  
prescriptive authority ~~by a supervising physician~~ may personally 3616  
furnish to a patient a complete or partial supply of the drugs 3617  
and therapeutic devices that are included in the physician 3618  
assistant's physician-delegated prescriptive authority, subject 3619  
to all of the following: 3620

(1) The physician assistant shall personally furnish only 3621  
antibiotics, antifungals, scabicides, contraceptives, prenatal 3622  
vitamins, antihypertensives, drugs and devices used in the 3623  
treatment of diabetes, drugs and devices used in the treatment 3624  
of asthma, and drugs used in the treatment of dyslipidemia. 3625

(2) The physician assistant shall not furnish the drugs 3626  
and devices in locations other than a health department operated 3627  
by the board of health of a city or general health district or 3628  
the authority having the duties of a board of health under 3629  
section 3709.05 of the Revised Code, a federally funded 3630  
comprehensive primary care clinic, or a nonprofit health care 3631  
clinic or program. 3632

(3) The physician assistant shall comply with all 3633  
standards and procedures for personally furnishing supplies of 3634  
drugs and devices, as established in rules adopted under section 3635  
4730.39 of the Revised Code. 3636

**Sec. 4730.431.** (A) Notwithstanding any provision of this 3637  
chapter or rule adopted by the state medical board, a physician 3638  
assistant who holds a ~~certificate to prescribe valid prescriber~~ 3639

number issued under this chapter by the board and has been 3640  
granted physician-delegated prescriptive authority may 3641  
personally furnish a supply of naloxone, or issue a prescription 3642  
for naloxone, without having examined the individual to whom it 3643  
may be administered if all of the following conditions are met: 3644

(1) The naloxone supply is furnished to, or the 3645  
prescription is issued to and in the name of, a family member, 3646  
friend, or other individual in a position to assist an 3647  
individual who there is reason to believe is at risk of 3648  
experiencing an opioid-related overdose. 3649

(2) The physician assistant instructs the individual 3650  
receiving the naloxone supply or prescription to summon 3651  
emergency services either immediately before or immediately 3652  
after administering naloxone to an individual apparently 3653  
experiencing an opioid-related overdose. 3654

(3) The naloxone is personally furnished or prescribed in 3655  
such a manner that it may be administered by only either of the 3656  
following routes: 3657

(a) Using a device manufactured for the intranasal 3658  
administration of liquid drugs; 3659

(b) Using an autoinjector in a manufactured dosage form. 3660

(B) A physician assistant who under division (A) of this 3661  
section in good faith furnishes a supply of naloxone or issues a 3662  
prescription for naloxone is not liable for or subject to any of 3663  
the following for any action or omission of the individual to 3664  
whom the naloxone is furnished or the prescription is issued: 3665  
damages in any civil action, prosecution in any criminal 3666  
proceeding, or professional disciplinary action. 3667

Sec. 4730.44. (A) During the first five hundred hours of a 3668

physician assistant's exercise of physician-delegated 3669  
prescriptive authority, the physician assistant shall exercise 3670  
that authority only under the on-site supervision of a 3671  
supervising physician. 3672

(B) A physician assistant shall be excused from the 3673  
requirement established in division (A) of this section if prior 3674  
to application under section 4730.10 of the Revised Code the 3675  
physician assistant held a prescriber number, or the equivalent, 3676  
from another jurisdiction and practiced with prescriptive 3677  
authority in that jurisdiction for not less than one thousand 3678  
hours. 3679

(C) A record of a physician assistant's completion of the 3680  
hours required by division (A) of this section or issuance of a 3681  
prescriber number or equivalent by another jurisdiction shall be 3682  
kept in the records maintained by a supervising physician of the 3683  
physician assistant. The record shall be made available for 3684  
inspection by the board. 3685

**Sec. 4730.49.** (A) To be eligible for renewal of a 3686  
certificate to prescribe~~license to practice as a physician~~ 3687  
assistant, an applicant who has been granted physician-delegated 3688  
prescriptive authority is subject to both of the following: 3689

(1) The applicant shall complete every two years at least 3690  
twelve hours of continuing education in pharmacology from an 3691  
accredited institution recognized by the state medical board. 3692  
Except as provided in division (B) of this section and in 3693  
section 5903.12 of the Revised Code, the continuing education 3694  
shall be completed not later than the thirty-first day of 3695  
January of each even-numbered year. 3696

(2) (a) Except as provided in division (A) (2) (b) of this 3697



section, in the case of an applicant who prescribes opioid analgesics or benzodiazepines, as defined in section 3719.01 of the Revised Code, the applicant shall certify to the board whether the applicant has been granted access to the drug database established and maintained by the state board of pharmacy pursuant to section 4729.75 of the Revised Code. 3698  
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(b) The requirement in division (A) (2) (a) of this section does not apply if any of the following is the case: 3704  
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(i) The state board of pharmacy notifies the state medical board pursuant to section 4729.861 of the Revised Code that the applicant has been restricted from obtaining further information from the drug database. 3706  
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(ii) The state board of pharmacy no longer maintains the drug database. 3710  
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(iii) The applicant does not practice as a physician assistant in this state. 3712  
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(c) If an applicant certifies to the state medical board that the applicant has been granted access to the drug database and the board finds through an audit or other means that the applicant has not been granted access, the board may take action under section 4730.25 of the Revised Code. 3714  
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(B) The state medical board shall provide for pro rata reductions by month of the number of hours of continuing education in pharmacology that is required to be completed for physician assistants who are in their first ~~certification~~ licensure period after completing the ~~provisional period of~~ supervision required under section ~~4730.45~~ 4730.44 of the Revised Code, who have been disabled due to illness or accident, or who have been absent from the country. The board shall adopt 3719  
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rules, in accordance with Chapter 119. of the Revised Code, as 3727  
necessary to implement this division. 3728

(C) The continuing education required by this section is 3729  
in addition to the continuing education required under section 3730  
4730.14 of the Revised Code. 3731

**Sec. 4730.51.** In the information the board maintains on 3732  
~~the~~ its internet web site, the state medical board shall include 3733  
the following: 3734

(A) The name of each physician assistant who holds a 3735  
~~certificate to prescribe~~ license under this chapter; 3736

(B) For each physician assistant who holds a ~~certificate~~ 3737  
~~to prescribe~~ valid prescriber number issued by the state medical 3738  
board, the name of each supervising physician who has authority 3739  
to grant physician-delegated prescriptive authority to the 3740  
physician assistant. 3741

**Sec. 4730.53.** (A) As used in this section, "drug database" 3742  
means the database established and maintained by the state board 3743  
of pharmacy pursuant to section 4729.75 of the Revised Code. 3744

(B) Except as provided in divisions (C) and (E) of this 3745  
section, a physician assistant ~~holding a certificate to~~ 3746  
~~prescribe issued~~ licensed under this chapter who has been 3747  
granted physician-delegated prescriptive authority shall comply 3748  
with all of the following as conditions of prescribing a drug 3749  
that is either an opioid analgesic or a benzodiazepine as part 3750  
of a patient's course of treatment for a particular condition: 3751

(1) Before initially prescribing the drug, the physician 3752  
assistant or the physician assistant's delegate shall request 3753  
from the drug database a report of information related to the 3754  
patient that covers at least the twelve months immediately 3755

preceding the date of the request. If the physician assistant 3756  
practices primarily in a county of this state that adjoins 3757  
another state, the physician assistant or delegate also shall 3758  
request a report of any information available in the drug 3759  
database that pertains to prescriptions issued or drugs 3760  
furnished to the patient in the state adjoining that county. 3761

(2) If the patient's course of treatment for the condition 3762  
continues for more than ninety days after the initial report is 3763  
requested, the physician assistant or delegate shall make 3764  
periodic requests for reports of information from the drug 3765  
database until the course of treatment has ended. The requests 3766  
shall be made at intervals not exceeding ninety days, determined 3767  
according to the date the initial request was made. The request 3768  
shall be made in the same manner provided in division (B)(1) of 3769  
this section for requesting the initial report of information 3770  
from the drug database. 3771

(3) On receipt of a report under division (B)(1) or (2) of 3772  
this section, the physician assistant shall assess the 3773  
information in the report. The physician assistant shall 3774  
document in the patient's record that the report was received 3775  
and the information was assessed. 3776

(C) Division (B) of this section does not apply in any of 3777  
the following circumstances: 3778

(1) A drug database report regarding the patient is not 3779  
available, in which case the physician assistant shall document 3780  
in the patient's record the reason that the report is not 3781  
available. 3782

(2) The drug is prescribed in an amount indicated for a 3783  
period not to exceed seven days. 3784

(3) The drug is prescribed for the treatment of cancer or another condition associated with cancer. 3785  
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(4) The drug is prescribed to a hospice patient in a hospice care program, as those terms are defined in section 3712.01 of the Revised Code, or any other patient diagnosed as terminally ill. 3787  
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(5) The drug is prescribed for administration in a hospital, nursing home, or residential care facility. 3791  
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(D) With respect to prescribing any drug that is not an opioid analgesic or a benzodiazepine but is included in the drug database pursuant to rules adopted under section 4729.84 of the Revised Code, the state medical board shall adopt rules that establish standards and procedures to be followed by a physician assistant ~~who holds a certificate to prescribe issued~~ licensed under this chapter who has been granted physician-delegated prescriptive authority regarding the review of patient information available through the drug database under division (A) (5) of section 4729.80 of the Revised Code. The rules shall be adopted in accordance with Chapter 119. of the Revised Code. 3793  
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(E) This section and the rules adopted under it do not apply if the state board of pharmacy no longer maintains the drug database. 3804  
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**Sec. 4731.07.** (A) The state medical board shall keep a record of its proceedings. The minutes of a meeting of the board shall, on approval by the board, constitute an official record of its proceedings. 3807  
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(B) The board shall keep a register of applicants for certificates of registration and certificates to practice issued under this chapter and Chapters ~~4730.,~~ 4760., 4762., and 4774. 3811  
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of the Revised Code and licenses issued under ~~Chapter~~ Chapters 3814  
4730. and 4778. of the Revised Code. The register shall show the 3815  
name of the applicant and whether the applicant was granted or 3816  
refused a certificate or license. With respect to applicants to 3817  
practice medicine and surgery or osteopathic medicine and 3818  
surgery, the register shall show the name of the institution 3819  
that granted the applicant the degree of doctor of medicine or 3820  
osteopathic medicine. The books and records of the board shall 3821  
be prima-facie evidence of matters therein contained. 3822

**Sec. 4731.72.** (A) As used in this section: 3823

(1) "Anatomic pathology services," "assignment of 3824  
benefits," "histologic processing," "insurer," "physician," and 3825  
"referring clinical laboratory" have the same meanings as in 3826  
section 3701.86 of the Revised Code. 3827

(2) "Professional component of an anatomic pathology 3828  
service" means the entire anatomic pathology service other than 3829  
histologic processing. 3830

(3) "Technical component of an anatomic pathology service" 3831  
means only histologic processing. 3832

(B) No physician shall present or cause to be presented a 3833  
claim, bill, or demand for payment for anatomic pathology 3834  
services to any person or entity other than the following: 3835

(1) The patient who receives the services or another 3836  
individual, such as a parent, spouse, or guardian, who is 3837  
responsible for the patient's bills; 3838

(2) A responsible insurer or other third-party payor of a 3839  
patient who receives the services; 3840

(3) A hospital, public health clinic, or not-for-profit 3841

health clinic ordering the services;	3842
(4) A referring clinical laboratory;	3843
(5) A governmental agency or any person acting on behalf of a governmental agency;	3844 3845
(6) A physician who is permitted to bill for the services under division (D) of this section.	3846 3847
(C) Except as provided in division (D) of this section, no physician shall charge, bill, or otherwise solicit payment, directly or indirectly, for anatomic pathology services unless the services are personally rendered by the physician or rendered under the on-site supervision of the physician.	3848 3849 3850 3851 3852
(D) <del>(1)</del> A physician who performs the professional component of an anatomic pathology service on a patient specimen may bill for the amount incurred in doing either of the following:	3853 3854 3855
<del>(a)</del> <u>(1)</u> Having a clinical laboratory or another physician perform the technical component of the anatomic pathology service;	3856 3857 3858
<del>(b)</del> <u>(2)</u> Obtaining another physician's consultation regarding the patient specimen.	3859 3860
<del>(2) A physician may bill for having a clinical laboratory or another physician perform an anatomic pathology service on a dermatology specimen, but only if the billing physician discloses to the person or entity being billed both of the following:</del>	3861 3862 3863 3864 3865
<del>(a) The name and address of the clinical laboratory or physician who performed the service;</del>	3866 3867
<del>(b) The amount the billing physician was charged by or</del>	3868

~~paid to the clinical laboratory or physician who performed the~~ 3869  
~~service.~~ 3870

(E) A violation of division (B) or (C) of this section 3871  
constitutes a reason for taking action under division (B) (20) of 3872  
section 4731.22 of the Revised Code. 3873

(F) Nothing in this section shall be construed to mandate 3874  
the assignment of benefits for anatomic pathology services. 3875

**Sec. 4761.01.** As used in this chapter: 3876

(A) "Respiratory care" means rendering or offering to 3877  
render to individuals, groups, organizations, or the public any 3878  
service involving the evaluation of cardiopulmonary function, 3879  
the treatment of cardiopulmonary impairment, the assessment of 3880  
treatment effectiveness, and the care of patients with 3881  
deficiencies and abnormalities associated with the 3882  
cardiopulmonary system. The practice of respiratory care 3883  
includes: 3884

(1) Obtaining, analyzing, testing, measuring, and 3885  
monitoring blood and gas samples in the determination of 3886  
cardiopulmonary parameters and related physiologic data, 3887  
including flows, pressures, and volumes, and the use of 3888  
equipment employed for this purpose; 3889

(2) Administering, monitoring, recording the results of, 3890  
and instructing in the use of medical gases, aerosols, and 3891  
bronchopulmonary hygiene techniques, including drainage, 3892  
aspiration, and sampling, and applying, maintaining, and 3893  
instructing in the use of artificial airways, ventilators, and 3894  
other life support equipment employed in the treatment of 3895  
cardiopulmonary impairment and provided in collaboration with 3896  
other licensed health care professionals responsible for 3897

providing care;	3898
(3) Performing cardiopulmonary resuscitation and respiratory rehabilitation techniques;	3899 3900
(4) Administering medications for the testing or treatment of cardiopulmonary impairment.	3901 3902
(B) "Respiratory care professional" means a person who is licensed under this chapter to practice the full range of respiratory care services as defined in division (A) of this section.	3903 3904 3905 3906
(C) "Physician" means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.	3907 3908 3909
(D) "Registered nurse" means an individual licensed under Chapter 4723. of the Revised Code to engage in the practice of nursing as a registered nurse.	3910 3911 3912
(E) "Hospital" means a facility that meets the operating standards of section 3727.02 of the Revised Code.	3913 3914
(F) "Nursing facility" has the same meaning as in section 5165.01 of the Revised Code.	3915 3916
(G) "Certified hyperbaric technologist" means a person who administers hyperbaric oxygen therapy and is certified as a hyperbaric technologist by the national board of diving and hyperbaric medical technology or its successor organization.	3917 3918 3919 3920
(H) "Hyperbaric oxygen therapy" means the administration of pure oxygen in a pressurized room or chamber, except that it does not include ventilator management.	3921 3922 3923
(I) "Advanced practice registered nurse" has the same	3924



meaning as in section 4723.01 of the Revised Code. 3925

(J) "Physician assistant" means an individual who holds a 3926  
valid ~~certificate~~license to practice issued under Chapter 4730. 3927  
of the Revised Code authorizing the individual to provide 3928  
services as a physician assistant to patients under the 3929  
supervision, control, and direction of one or more physicians. 3930

**Sec. 4761.17.** All of the following apply to the practice 3931  
of respiratory care by a person who holds a license or limited 3932  
permit issued under this chapter: 3933

(A) The person shall practice only pursuant to a 3934  
prescription or other order for respiratory care issued by ~~a~~ any 3935  
of the following: 3936

(1) A physician ~~or by a~~ ; 3937

(2) A registered nurse who holds a certificate of 3938  
authority issued under Chapter 4723. of the Revised Code to 3939  
practice as a certified nurse practitioner or clinical nurse 3940  
specialist and has entered into a standard care arrangement with 3941  
a physician that allows the nurse to prescribe or order 3942  
respiratory care services; 3943

(3) A physician assistant who holds a valid prescriber 3944  
number issued by the state medical board, has been granted 3945  
physician-delegated prescriptive authority, and has entered into 3946  
a supervision agreement that allows the physician assistant to 3947  
prescribe or order respiratory care services. 3948

(B) The person shall practice only under the supervision 3949  
of ~~a~~ any of the following: 3950

(1) A physician ~~or under the supervision of a~~ ; 3951

(2) A certified nurse practitioner or clinical nurse 3952

specialist who is authorized to prescribe or order respiratory care services as provided in division (A) (2) of this section; 3953  
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(3) A physician assistant who is authorized to prescribe or order respiratory care services as provided in division (A) (3) of this section. 3955  
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(C) (1) When practicing under the prescription or order of a certified nurse practitioner or clinical nurse specialist or under the supervision of such a nurse, the person's administration of medication that requires a prescription is limited to the drugs that the nurse is authorized to prescribe pursuant to the nurse's certificate to prescribe issued under section 4723.48 of the Revised Code. 3958  
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(2) When practicing under the prescription or order of a physician assistant or under the supervision of a physician assistant, the person's administration of medication that requires a prescription is limited to the drugs that the physician assistant is authorized to prescribe pursuant to the physician assistant's physician-delegated prescriptive authority. 3965  
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**Sec. 4765.01.** As used in this chapter: 3972

(A) "First responder" means an individual who holds a current, valid certificate issued under section 4765.30 of the Revised Code to practice as a first responder. 3973  
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(B) "Emergency medical technician-basic" or "EMT-basic" means an individual who holds a current, valid certificate issued under section 4765.30 of the Revised Code to practice as an emergency medical technician-basic. 3976  
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(C) "Emergency medical technician-intermediate" or "EMT-I" means an individual who holds a current, valid certificate 3980  
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issued under section 4765.30 of the Revised Code to practice as 3982  
an emergency medical technician-intermediate. 3983

(D) "Emergency medical technician-paramedic" or 3984  
"paramedic" means an individual who holds a current, valid 3985  
certificate issued under section 4765.30 of the Revised Code to 3986  
practice as an emergency medical technician-paramedic. 3987

(E) "Ambulance" means any motor vehicle that is used, or 3988  
is intended to be used, for the purpose of responding to 3989  
emergency medical situations, transporting emergency patients, 3990  
and administering emergency medical service to patients before, 3991  
during, or after transportation. 3992

(F) "Cardiac monitoring" means a procedure used for the 3993  
purpose of observing and documenting the rate and rhythm of a 3994  
patient's heart by attaching electrical leads from an 3995  
electrocardiograph monitor to certain points on the patient's 3996  
body surface. 3997

(G) "Emergency medical service" means any of the services 3998  
described in sections 4765.35, 4765.37, 4765.38, and 4765.39 of 3999  
the Revised Code that are performed by first responders, 4000  
emergency medical technicians-basic, emergency medical 4001  
technicians-intermediate, and paramedics. "Emergency medical 4002  
service" includes such services performed before or during any 4003  
transport of a patient, including transports between hospitals 4004  
and transports to and from helicopters. 4005

(H) "Emergency medical service organization" means a 4006  
public or private organization using first responders, EMTs- 4007  
basic, EMTs-I, or paramedics, or a combination of first 4008  
responders, EMTs-basic, EMTs-I, and paramedics, to provide 4009  
emergency medical services. 4010

(I) "Physician" means an individual who holds a current, 4011  
valid certificate issued under Chapter 4731. of the Revised Code 4012  
authorizing the practice of medicine and surgery or osteopathic 4013  
medicine and surgery. 4014

(J) "Registered nurse" means an individual who holds a 4015  
current, valid license issued under Chapter 4723. of the Revised 4016  
Code authorizing the practice of nursing as a registered nurse. 4017

(K) "Volunteer" means a person who provides services 4018  
either for no compensation or for compensation that does not 4019  
exceed the actual expenses incurred in providing the services or 4020  
in training to provide the services. 4021

(L) "Emergency medical service personnel" means first 4022  
responders, emergency medical service technicians-basic, 4023  
emergency medical service technicians-intermediate, emergency 4024  
medical service technicians-paramedic, and persons who provide 4025  
medical direction to such persons. 4026

(M) "Hospital" has the same meaning as in section 3727.01 4027  
of the Revised Code. 4028

(N) "Trauma" or "traumatic injury" means severe damage to 4029  
or destruction of tissue that satisfies both of the following 4030  
conditions: 4031

(1) It creates a significant risk of any of the following: 4032

(a) Loss of life; 4033

(b) Loss of a limb; 4034

(c) Significant, permanent disfigurement; 4035

(d) Significant, permanent disability. 4036

(2) It is caused by any of the following: 4037

(a) Blunt or penetrating injury;	4038
(b) Exposure to electromagnetic, chemical, or radioactive energy;	4039 4040
(c) Drowning, suffocation, or strangulation;	4041
(d) A deficit or excess of heat.	4042
(O) "Trauma victim" or "trauma patient" means a person who has sustained a traumatic injury.	4043 4044
(P) "Trauma care" means the assessment, diagnosis, transportation, treatment, or rehabilitation of a trauma victim by emergency medical service personnel or by a physician, nurse, physician assistant, respiratory therapist, physical therapist, chiropractor, occupational therapist, speech-language pathologist, audiologist, or psychologist licensed to practice as such in this state or another jurisdiction.	4045 4046 4047 4048 4049 4050 4051
(Q) "Trauma center" means all of the following:	4052
(1) Any hospital that is verified by the American college of surgeons as an adult or pediatric trauma center;	4053 4054
(2) Any hospital that is operating as an adult or pediatric trauma center under provisional status pursuant to section 3727.101 of the Revised Code;	4055 4056 4057
(3) Until December 31, 2004, any hospital in this state that is designated by the director of health as a level II pediatric trauma center under section 3727.081 of the Revised Code;	4058 4059 4060 4061
(4) Any hospital in another state that is licensed or designated under the laws of that state as capable of providing specialized trauma care appropriate to the medical needs of the	4062 4063 4064

trauma patient. 4065

(R) "Pediatric" means involving a patient who is less than sixteen years of age. 4066  
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(S) "Adult" means involving a patient who is not a pediatric patient. 4068  
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(T) "Geriatric" means involving a patient who is at least seventy years old or exhibits significant anatomical or physiological characteristics associated with advanced aging. 4070  
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(U) "Air medical organization" means an organization that provides emergency medical services, or transports emergency victims, by means of fixed or rotary wing aircraft. 4073  
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(V) "Emergency care" and "emergency facility" have the same meanings as in section 3727.01 of the Revised Code. 4076  
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(W) "Stabilize," except as it is used in division (B) of section 4765.35 of the Revised Code with respect to the manual stabilization of fractures, has the same meaning as in section 1753.28 of the Revised Code. 4078  
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(X) "Transfer" has the same meaning as in section 1753.28 of the Revised Code. 4082  
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(Y) "Firefighter" means any member of a fire department as defined in section 742.01 of the Revised Code. 4084  
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(Z) "Volunteer firefighter" has the same meaning as in section 146.01 of the Revised Code. 4086  
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(AA) "Part-time paid firefighter" means a person who provides firefighting services on less than a full-time basis, is routinely scheduled to be present on site at a fire station or other designated location for purposes of responding to a 4088  
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fire or other emergency, and receives more than nominal 4092  
compensation for the provision of firefighting services. 4093

(BB) "Physician assistant" means an individual who holds a 4094  
valid ~~certificate~~license to practice as a physician assistant 4095  
issued under Chapter 4730. of the Revised Code. 4096

**Sec. 4765.51.** Nothing in this chapter prevents or 4097  
restricts the practice, services, or activities of any 4098  
registered nurse practicing within the scope of the registered 4099  
nurse's practice. 4100

Nothing in this chapter prevents or restricts the 4101  
practice, services, or activities of any physician assistant 4102  
practicing in accordance with a ~~physician supervisory plan~~ 4103  
~~approved supervision agreement entered into~~ under section 4104  
~~4730.17~~4730.19 of the Revised Code ~~or, including, if~~ 4105  
applicable, the policies of the health care facility in which 4106  
the physician assistant is practicing. 4107

**Sec. 5123.47.** (A) As used in this section: 4108

(1) "In-home care" means the supportive services provided 4109  
within the home of an individual with mental retardation or a 4110  
developmental disability who receives funding for the services 4111  
through a county board of developmental disabilities, including 4112  
any recipient of residential services funded as home and 4113  
community-based services, family support services provided under 4114  
section 5126.11 of the Revised Code, or supported living 4115  
provided in accordance with sections 5126.41 to 5126.47 of the 4116  
Revised Code. "In-home care" includes care that is provided 4117  
outside an individual's home in places incidental to the home, 4118  
and while traveling to places incidental to the home, except 4119  
that "in-home care" does not include care provided in the 4120

facilities of a county board of developmental disabilities or	4121
care provided in schools.	4122
(2) "Parent" means either parent of a child, including an	4123
adoptive parent but not a foster parent.	4124
(3) "Unlicensed in-home care worker" means an individual	4125
who provides in-home care but is not a health care professional.	4126
(4) "Family member" means a parent, sibling, spouse, son,	4127
daughter, grandparent, aunt, uncle, cousin, or guardian of the	4128
individual with mental retardation or a developmental disability	4129
if the individual with mental retardation or developmental	4130
disabilities lives with the person and is dependent on the	4131
person to the extent that, if the supports were withdrawn,	4132
another living arrangement would have to be found.	4133
(5) "Health care professional" means any of the following:	4134
(a) A dentist who holds a valid license issued under	4135
Chapter 4715. of the Revised Code;	4136
(b) A registered or licensed practical nurse who holds a	4137
valid license issued under Chapter 4723. of the Revised Code;	4138
(c) An optometrist who holds a valid license issued under	4139
Chapter 4725. of the Revised Code;	4140
(d) A pharmacist who holds a valid license issued under	4141
Chapter 4729. of the Revised Code;	4142
(e) A person who holds a valid certificate issued under	4143
Chapter 4731. of the Revised Code to practice medicine and	4144
surgery, osteopathic medicine and surgery, podiatric medicine	4145
and surgery, or a limited brand of medicine;	4146
(f) A physician assistant who holds a valid <del>certificate</del>	4147



<u>license</u> issued under Chapter 4730. of the Revised Code;	4148
(g) An occupational therapist or occupational therapy	4149
assistant or a physical therapist or physical therapist	4150
assistant who holds a valid license issued under Chapter 4755.	4151
of the Revised Code;	4152
(h) A respiratory care professional who holds a valid	4153
license issued under Chapter 4761. of the Revised Code.	4154
(6) "Health care task" means a task that is prescribed,	4155
ordered, delegated, or otherwise directed by a health care	4156
professional acting within the scope of the professional's	4157
practice.	4158
(B) Except as provided in division (E) of this section, a	4159
family member of an individual with mental retardation or a	4160
developmental disability may authorize an unlicensed in-home	4161
care worker to administer oral and topical prescribed	4162
medications or perform other health care tasks as part of the	4163
in-home care the worker provides to the individual, if all of	4164
the following apply:	4165
(1) The family member is the primary supervisor of the	4166
care.	4167
(2) The unlicensed in-home care worker has been selected	4168
by the family member or the individual receiving care and is	4169
under the direct supervision of the family member.	4170
(3) The unlicensed in-home care worker is providing the	4171
care through an employment or other arrangement entered into	4172
directly with the family member and is not otherwise employed by	4173
or under contract with a person or government entity to provide	4174
services to individuals with mental retardation and	4175
developmental disabilities.	4176

(C) A family member shall obtain a prescription, if 4177  
applicable, and written instructions from a health care 4178  
professional for the care to be provided to the individual. The 4179  
family member shall authorize the unlicensed in-home care worker 4180  
to provide the care by preparing a written document granting the 4181  
authority. The family member shall provide the unlicensed in- 4182  
home care worker with appropriate training and written 4183  
instructions in accordance with the instructions obtained from 4184  
the health care professional. 4185

(D) A family member who authorizes an unlicensed in-home 4186  
care worker to administer oral and topical prescribed 4187  
medications or perform other health care tasks retains full 4188  
responsibility for the health and safety of the individual 4189  
receiving the care and for ensuring that the worker provides the 4190  
care appropriately and safely. No entity that funds or monitors 4191  
the provision of in-home care may be held liable for the results 4192  
of the care provided under this section by an unlicensed in-home 4193  
care worker, including such entities as the county board of 4194  
developmental disabilities and the department of developmental 4195  
disabilities. 4196

An unlicensed in-home care worker who is authorized under 4197  
this section by a family member to provide care to an individual 4198  
may not be held liable for any injury caused in providing the 4199  
care, unless the worker provides the care in a manner that is 4200  
not in accordance with the training and instructions received or 4201  
the worker acts in a manner that constitutes wanton or reckless 4202  
misconduct. 4203

(E) A county board of developmental disabilities may 4204  
evaluate the authority granted by a family member under this 4205  
section to an unlicensed in-home care worker at any time it 4206

considers necessary and shall evaluate the authority on receipt 4207  
of a complaint. If the board determines that a family member has 4208  
acted in a manner that is inappropriate for the health and 4209  
safety of the individual receiving the care, the authorization 4210  
granted by the family member to an unlicensed in-home care 4211  
worker is void, and the family member may not authorize other 4212  
unlicensed in-home care workers to provide the care. In making 4213  
such a determination, the board shall use appropriately licensed 4214  
health care professionals and shall provide the family member an 4215  
opportunity to file a complaint under section 5126.06 of the 4216  
Revised Code. 4217

**Section 2.** That existing sections 1.64, 2133.211, 4218  
2151.3515, 2305.113, 2925.61, 3701.048, 3701.92, 3727.06, 4219  
4503.44, 4723.01, 4723.06, 4723.07, 4723.18, 4723.181, 4723.48, 4220  
4723.482, 4723.50, 4729.01, 4730.01, 4730.02, 4730.03, 4730.04, 4221  
4730.06, 4730.08, 4730.091, 4730.10, 4730.101, 4730.11, 4730.12, 4222  
4730.13, 4730.14, 4730.19, 4730.21, 4730.22, 4730.25, 4730.251, 4223  
4730.27, 4730.28, 4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 4224  
4730.41, 4730.42, 4730.43, 4730.431, 4730.49, 4730.51, 4730.53, 4225  
4731.07, 4731.72, 4761.01, 4761.17, 4765.01, 4765.51, and 4226  
5123.47 and sections 4730.081, 4730.09, 4730.15, 4730.16, 4227  
4730.17, 4730.18, 4730.20, 4730.44, 4730.45, 4730.46, 4730.47, 4228  
4730.48, 4730.50, and 4730.52 of the Revised Code are hereby 4229  
repealed. 4230

**Section 3.** (A) The State Medical Board may continue to 4231  
issue certificates to practice and certificates to prescribe 4232  
pursuant to Chapter 4730. of the Revised Code for not longer 4233  
than ninety days after the effective date of this act. 4234  
Thereafter, the Board shall issue physician assistant licenses 4235  
in compliance with this act. 4236

(B) Certificates to practice and certificates to prescribe 4237  
issued pursuant to division (A) of this section or Chapter 4730. 4238  
of the Revised Code, as that chapter existed immediately prior 4239  
to the effective date of this act, shall satisfy the 4240  
requirements for physician assistant licenses, as created by 4241  
this act, until January 31, 2016. 4242

**Section 4.** Section 4730.25 of the Revised Code is 4243  
presented in this act as a composite of the section as amended 4244  
by Sub. H.B. 314, Am. Sub. H.B. 341, and Am. Sub. H.B. 483, all 4245  
of the 130th General Assembly. The General Assembly, applying 4246  
the principle stated in division (B) of section 1.52 of the 4247  
Revised Code that amendments are to be harmonized if reasonably 4248  
capable of simultaneous operation, finds that the composite is 4249  
the resulting version of the section in effect prior to the 4250  
effective date of the section as presented in this act. 4251