

As Introduced

**136th General Assembly
Regular Session
2025-2026**

S. B. No. 438

Senator Reynolds

To amend sections 3701.351, 3702.30, 3702.301, 1
4723.01, 4723.02, 4723.03, 4723.06, 4723.07, 2
4723.08, 4723.271, 4723.28, 4723.282, 4723.33, 3
4723.34, 4723.341, 4723.35, 4723.41, 4723.43, 4
4723.431, 4723.432, 4723.481, 4723.483, 5
4723.487, 4723.488, 4723.4810, 4723.4811, 6
4723.50, 4723.91, 4723.99, 4731.22, and 4731.27 7
and to enact sections 5.2324, 3702.35, 4723.53, 8
4723.54, 4723.55, 4723.551, 4723.56, 4723.57, 9
4723.58, 4723.581, 4723.582, 4723.583, 4723.584, 10
4723.59, 4723.60, 4724.01, 4724.02, 4724.03, 11
4724.04, 4724.05, 4724.06, 4724.07, 4724.08, 12
4724.09, 4724.10, 4724.11, 4724.12, 4724.13, 13
4724.14, 4724.15, 4724.16, and 4724.99 of the 14
Revised Code to regulate the practice of 15
midwifery, to establish requirements for 16
freestanding birthing centers, and to designate 17
May 5th as the "Day of the Midwife." 18

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

Section 1. That sections 3701.351, 3702.30, 3702.301, 19
4723.01, 4723.02, 4723.03, 4723.06, 4723.07, 4723.08, 4723.271, 20
4723.28, 4723.282, 4723.33, 4723.34, 4723.341, 4723.35, 4723.41, 21

4723.43, 4723.431, 4723.432, 4723.481, 4723.483, 4723.487, 22
4723.488, 4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 23
4731.22, and 4731.27 be amended and sections 5.2324, 3702.35, 24
4723.53, 4723.54, 4723.55, 4723.551, 4723.56, 4723.57, 4723.58, 25
4723.581, 4723.582, 4723.583, 4723.584, 4723.59, 4723.60, 26
4724.01, 4724.02, 4724.03, 4724.04, 4724.05, 4724.06, 4724.07, 27
4724.08, 4724.09, 4724.10, 4724.11, 4724.12, 4724.13, 4724.14, 28
4724.15, 4724.16, and 4724.99 of the Revised Code be enacted to 29
read as follows: 30

Sec. 5.2324. The fifth day of May is designated as the 31
"Day of the Midwife." 32

Sec. 3701.351. (A) The governing body of every hospital 33
shall set standards and procedures to be applied by the hospital 34
and its medical staff in considering and acting upon 35
applications for staff membership or professional privileges. 36
These standards and procedures shall be available for public 37
inspection. 38

(B) The governing body of any hospital, in considering and 39
acting upon applications for staff membership or professional 40
privileges within the scope of the applicants' respective 41
licensures, shall not discriminate against a qualified person 42
solely on the basis of whether that person is licensed to 43
practice medicine, osteopathic medicine, or podiatry, is 44
licensed to practice dentistry or psychology, ~~or~~ is licensed to 45
practice nursing as an advanced practice registered nurse, or is 46
licensed to practice as a certified midwife or licensed midwife. 47
Staff membership or professional privileges shall be considered 48
and acted on in accordance with standards and procedures 49
established under division (A) of this section. This section 50
does not permit a psychologist to admit a patient to a hospital 51

in violation of section 3727.06 of the Revised Code. 52

(C) The governing body of any hospital that provides 53
maternity services, in considering and acting upon applications 54
for clinical privileges, shall not discriminate against a 55
qualified person solely on the basis that the person is 56
authorized to practice nurse-midwifery or midwifery. An 57
application from a certified nurse-midwife or certified midwife 58
who is not employed by the hospital shall contain the name of a 59
physician member of the hospital's medical staff who holds 60
clinical privileges in obstetrics at that hospital and who has 61
agreed to be the collaborating physician for the applicant in 62
accordance with section ~~4723.43~~ 4723.431 of the Revised Code. 63

(D) Any person may apply to the court of common pleas for 64
temporary or permanent injunctions restraining a violation of 65
division (A), (B), or (C) of this section. This action is an 66
additional remedy not dependent on the adequacy of the remedy at 67
law. 68

(E) (1) If a hospital does not provide or permit the 69
provision of any diagnostic or treatment service for mental or 70
emotional disorders or any other service that may be legally 71
performed by a psychologist licensed under Chapter 4732. of the 72
Revised Code, this section does not require the hospital to 73
provide or permit the provision of any such service and the 74
hospital shall be exempt from requirements of this section 75
pertaining to psychologists. 76

(2) This section does not impair the right of a hospital 77
to enter into an employment, personal service, or any other kind 78
of contract with a licensed psychologist, upon any such terms as 79
the parties may mutually agree, for the provision of any service 80
that may be legally performed by a licensed psychologist. 81

Sec. 3702.30. (A) As used in ~~this section~~sections 3702.30 82
to 3702.511 of the Revised Code: 83

(1) "Ambulatory surgical facility" means a facility in 84
which surgical services are provided to patients who do not 85
require hospitalization for inpatient care, the duration of 86
services for any patient does not extend beyond twenty-four 87
hours after the patient's admission, and to which any of the 88
following apply: 89

(a) The surgical services are provided in a building that 90
is separate from another building in which inpatient care is 91
provided, regardless of whether the separate building is part of 92
the same organization as the building in which inpatient care is 93
provided. 94

(b) The surgical services are provided within a building 95
in which inpatient care is provided and the entity that operates 96
the portion of the building where the surgical services are 97
provided is not the entity that operates the remainder of the 98
building. 99

(c) The facility is held out to any person or government 100
entity as an ambulatory surgical facility or similar facility by 101
means of signage, advertising, or other promotional efforts. 102

"Ambulatory surgical facility" does not include a 103
freestanding birthing center, a hospital emergency department, 104
hospital provider-based department that is otherwise licensed 105
under Chapter 3722. of the Revised Code, or an office of a 106
physician, podiatrist, or dentist. 107

(2) "Freestanding birthing center" means an independent 108
health care facility, separate from a hospital licensed under 109
Chapter 3722. of the Revised Code, that provides prenatal, 110

<u>labor, delivery, and postpartum care for low-risk pregnancies.</u>	111
<u>(3) "Health care facility" means any of the following:</u>	112
(a) An ambulatory surgical facility;	113
(b) A freestanding dialysis center;	114
(c) A freestanding inpatient rehabilitation facility;	115
(d) A freestanding birthing center;	116
(e) A freestanding radiation therapy center;	117
(f) A freestanding or mobile diagnostic imaging center.	118
(B) By rule adopted in accordance with sections 3702.12 and 3702.13 of the Revised Code, the director of health shall establish quality standards for health care facilities. The standards may incorporate accreditation standards or other quality standards established by any entity recognized by the director.	119 120 121 122 123 124
<u>(1) In the case of an ambulatory surgical facility, the standards shall require the ambulatory surgical facility to maintain an infection control program. The purposes of the program are to minimize infections and communicable diseases and facilitate a functional and sanitary environment consistent with standards of professional practice. To achieve these purposes, ambulatory surgical facility staff managing the program shall create and administer a plan designed to prevent, identify, and manage infections and communicable diseases; ensure that the program is directed by a qualified professional trained in infection control; ensure that the program is an integral part of the ambulatory surgical facility's quality assessment and performance improvement program; and implement in an expeditious manner corrective and preventive measures that result in</u>	125 126 127 128 129 130 131 132 133 134 135 136 137 138

improvement.	139
<u>(2) In the case of a licensed freestanding birthing center, the standards shall require both of the following:</u>	140 141
<u>(a) At least one of the following to attend each birth:</u>	142
<u>(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;</u>	143 144 145
<u>(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code;</u>	146 147
<u>(iii) A certified midwife licensed under Chapter 4723. of the Revised Code;</u>	148 149
<u>(iv) A licensed midwife licensed under Chapter 4724. of the Revised Code.</u>	150 151
<u>(b) That each licensed freestanding birthing center have a director of patient services who is one of the following:</u>	152 153
<u>(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;</u>	154 155 156
<u>(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code who has contracted with a collaborating physician;</u>	157 158 159
<u>(iii) A certified midwife licensed under Chapter 4723. of the Revised Code who has contracted with a collaborating physician.</u>	160 161 162
(C) Every ambulatory surgical facility shall require that each physician who practices at the facility comply with all relevant provisions in the Revised Code that relate to the	163 164 165

obtaining of informed consent from a patient. 166

(D) The director shall issue a license to each health care 167
facility that makes application for a license and demonstrates 168
to the director that it meets the quality standards established 169
by the rules adopted under division (B) of this section and 170
satisfies the informed consent compliance requirements specified 171
in division (C) of this section. 172

(E) (1) Except as provided in division (H) of this section 173
and in section 3702.301 of the Revised Code, no health care 174
facility shall operate without a license issued under this 175
section. 176

The general assembly does not intend for the provisions of 177
this section or section 3702.301 of the Revised Code that 178
establish health care facility licensing requirements or 179
exemptions to have an effect on any third-party payments that 180
may be available for the services provided by either a licensed 181
health care facility or an entity exempt from licensure. 182

(2) If the department of health finds that a physician who 183
practices at a health care facility is not complying with any 184
provision of the Revised Code related to the obtaining of 185
informed consent from a patient, the department shall report its 186
finding to the state medical board, the physician, and the 187
health care facility. 188

(3) Division (E) (2) of this section does not create, and 189
shall not be construed as creating, a new cause of action or 190
substantive legal right against a health care facility and in 191
favor of a patient who allegedly sustains harm as a result of 192
the failure of the patient's physician to obtain informed 193
consent from the patient prior to performing a procedure on or 194

otherwise caring for the patient in the health care facility.	195
(F) The rules adopted under division (B) of this section shall include all of the following:	196 197
(1) Provisions governing application for, renewal, suspension, and revocation of a license under this section;	198 199
(2) Provisions governing orders issued pursuant to section 3702.32 of the Revised Code for a health care facility to cease its operations or to prohibit certain types of services provided by a health care facility;	200 201 202 203
(3) Provisions governing the imposition under section 3702.32 of the Revised Code of civil penalties for violations of this section or the rules adopted under this section, including a scale for determining the amount of the penalties;	204 205 206 207
(4) Provisions specifying the form inspectors must use when conducting inspections of ambulatory surgical facilities.	208 209
(G) An ambulatory surgical facility that performs or induces abortions shall comply with section 3701.791 of the Revised Code.	210 211 212
(H) The following entities are not required to obtain a license as a freestanding diagnostic imaging center issued under this section:	213 214 215
(1) A hospital registered under section 3701.07 of the Revised Code that provides diagnostic imaging;	216 217
(2) An entity that is reviewed as part of a hospital accreditation or certification program and that provides diagnostic imaging;	218 219 220
(3) An ambulatory surgical facility that provides	221

diagnostic imaging in conjunction with or during any portion of	222
a surgical procedure.	223
Sec. 3702.301. (A) Except as provided in division (C) of	224
this section, a freestanding birthing center is not required to	225
obtain a license under section 3702.30 of the Revised Code if	226
all of the following are the case:	227
(1) A religious denomination, sect, or group owns and	228
operates the center.	229
(2) Requiring that the center be licensed significantly	230
abridges or infringes on the religious practices or beliefs of	231
that religious denomination, sect, or group.	232
(3) The center provides care only during low-risk	233
pregnancy, delivery, and the immediate postpartum period	234
exclusively to women who_	235
are members of that religious denomination, sect, or	236
group.	237
(4) The center monitors and evaluates the care provided to	238
its patients in accordance with at least the minimum patient	239
safety monitoring and evaluation requirements established in	240
rules adopted under division (D) of this section.	241
(5) The center meets the quality assessment and	242
improvement standards established in rules adopted under	243
division (D) of this section.	244
(B) If the director determines that a freestanding	245
birthing center is no longer exempt from the requirement to	246
obtain a license under section 3702.30 of the Revised Code	247
because the center ceases to comply with division (A) (4) or (5)	248
of this section, the director may order the center to come into	249

compliance. In the order, the director may do all of the	250
following:	251
(1) Identify what the center is not in compliance with and	252
what the center needs to do to come into compliance;	253
(2) Require that the center come into compliance within a	254
period of time specified in the order;	255
(3) Require that the center provide the director a written	256
notice within a period of time specified in the order that	257
contains all of the following:	258
(a) Certification that the center has come into	259
compliance;	260
(b) The signature of the center's administrator or medical	261
director and certification that the administrator or medical	262
director, whichever signs the notice, is the center's authorized	263
representative;	264
(c) Certification that the information contained in the	265
notice and in any accompanying documentation is true and	266
accurate;	267
(d) Any other information or documentation that the	268
director may require to verify that the center has come into	269
compliance.	270
(C) If the director issues an order to a freestanding	271
birthing center under division (B) of this section and the	272
center fails to comply with the order within the time specified	273
in the order, the director may issue a second order that	274
requires the center to cease operations until the center obtains	275
a license under section 3702.30 of the Revised Code.	276
(D) The director of health shall adopt rules in accordance	277

with Chapter 119. of the Revised Code as necessary to implement	278
this section. The rules shall establish all of the following:	279
(1) Minimum patient safety monitoring and evaluation requirements;	280 281
(2) Quality assessment and improvement standards, <u>including standards that require both of the following:</u>	282 283
<u>(a) At least one of the following to attend each birth:</u>	284
<u>(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;</u>	285 286 287
<u>(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code;</u>	288 289
<u>(iii) A certified midwife licensed under Chapter 4723. of the Revised Code;</u>	290 291
<u>(iv) A licensed midwife licensed under Chapter 4724. of the Revised Code;</u>	292 293
<u>(v) A traditional midwife as defined in section 4724.01 of the Revised Code.</u>	294 295
<u>(b) That each center have a director of patient services who is one of the following:</u>	296 297
<u>(i) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;</u>	298 299 300
<u>(ii) A certified nurse-midwife licensed under Chapter 4723. of the Revised Code;</u>	301 302
<u>(iii) A registered nurse licensed under Chapter 4723. of the Revised Code;</u>	303 304

<u>(iv) A certified midwife licensed under Chapter 4723. of</u>	305
<u>the Revised Code;</u>	306
<u>(v) A licensed midwife licensed under Chapter 4724. of the</u>	307
<u>Revised Code;</u>	308
<u>(vi) A traditional midwife as defined in section 4724.01</u>	309
<u>of the Revised Code.</u>	310
(3) Procedures for determining whether freestanding	311
birthing centers are in compliance with the rules.	312
Sec. 3702.35. (A) <u>Each freestanding birthing center shall</u>	313
<u>have a written plan for the transfer of a mother or a newborn to</u>	314
<u>a hospital in the event of medical complications, emergency</u>	315
<u>situations, or as the need arises.</u>	316
<u>(B) No licensed freestanding birthing center shall be</u>	317
<u>required to establish a written transfer agreement with a</u>	318
<u>hospital if it is both of the following:</u>	319
<u>(1) Accredited by the commission for the accreditation of</u>	320
<u>birth centers or its successor organization;</u>	321
<u>(2) Located within thirty miles of a hospital subject to</u>	322
<u>the provisions of the "Emergency Medical Treatment and Labor</u>	323
<u>Act," 42 U.S.C. 1395dd.</u>	324
<u>(C) A licensed freestanding birthing center that is not</u>	325
<u>accredited by the commission for the accreditation of birth</u>	326
<u>centers or its successor organization shall have a written</u>	327
<u>transfer agreement with a local hospital.</u>	328
<u>(D) No freestanding birthing center that is exempt from</u>	329
<u>licensure under section 3702.301 of the Revised Code shall be</u>	330
<u>required to establish a written transfer agreement with a</u>	331
<u>hospital.</u>	332

Sec. 4723.01. As used in this chapter:	333
(A) "Registered nurse" means an individual who holds a current, valid license issued under this chapter that authorizes the practice of nursing as a registered nurse.	334 335 336
(B) "Practice of nursing as a registered nurse" means providing to individuals and groups nursing care requiring specialized knowledge, judgment, and skill derived from the principles of biological, physical, behavioral, social, and nursing sciences. Such nursing care includes:	337 338 339 340 341
(1) Identifying patterns of human responses to actual or potential health problems amenable to a nursing regimen;	342 343
(2) Executing a nursing regimen through the selection, performance, management, and evaluation of nursing actions;	344 345
(3) Assessing health status for the purpose of providing nursing care;	346 347
(4) Providing health counseling and health teaching;	348
(5) Administering medications, treatments, and executing regimens authorized by an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice;	349 350 351 352
(6) Teaching, administering, supervising, delegating, and evaluating nursing practice.	353 354
(C) "Nursing regimen" may include preventative, restorative, and health-promotion activities.	355 356
(D) "Assessing health status" means the collection of data through nursing assessment techniques, which may include interviews, observation, and physical evaluations for the	357 358 359

purpose of providing nursing care.	360
(E) "Licensed practical nurse" means an individual who	361
holds a current, valid license issued under this chapter that	362
authorizes the practice of nursing as a licensed practical	363
nurse.	364
(F) "The practice of nursing as a licensed practical	365
nurse" means providing to individuals and groups nursing care	366
requiring the application of basic knowledge of the biological,	367
physical, behavioral, social, and nursing sciences at the	368
direction of a registered nurse or any of the following who is	369
authorized to practice in this state: a physician, physician	370
assistant, dentist, podiatrist, optometrist, or chiropractor.	371
Such nursing care includes:	372
(1) Observation, patient teaching, and care in a diversity	373
of health care settings;	374
(2) Contributions to the planning, implementation, and	375
evaluation of nursing;	376
(3) Administration of medications and treatments	377
authorized by an individual who is authorized to practice in	378
this state and is acting within the course of the individual's	379
professional practice;	380
(4) Administration to an adult of intravenous therapy	381
authorized by an individual who is authorized to practice in	382
this state and is acting within the course of the individual's	383
professional practice, on the condition that the licensed	384
practical nurse is authorized under section 4723.18 or 4723.181	385
of the Revised Code to perform intravenous therapy and performs	386
intravenous therapy only in accordance with those sections;	387
(5) Delegation of nursing tasks as directed by a	388

registered nurse;	389
(6) Teaching nursing tasks to licensed practical nurses	390
and individuals to whom the licensed practical nurse is	391
authorized to delegate nursing tasks as directed by a registered	392
nurse.	393
(G) "Certified registered nurse anesthetist" means an	394
advanced practice registered nurse who holds a current, valid	395
license issued under this chapter and is designated as a	396
certified registered nurse anesthetist in accordance with	397
section 4723.42 of the Revised Code and rules adopted by the	398
board of nursing.	399
(H) "Clinical nurse specialist" means an advanced practice	400
registered nurse who holds a current, valid license issued under	401
this chapter and is designated as a clinical nurse specialist in	402
accordance with section 4723.42 of the Revised Code and rules	403
adopted by the board of nursing.	404
(I) "Certified nurse-midwife" means an advanced practice	405
registered nurse who holds a current, valid license issued under	406
this chapter and is designated as a certified nurse-midwife in	407
accordance with section 4723.42 of the Revised Code and rules	408
adopted by the board of nursing. <u>A certified nurse-midwife does</u>	409
<u>not include a certified midwife, licensed midwife, or</u>	410
<u>traditional midwife.</u>	411
(J) "Certified nurse practitioner" means an advanced	412
practice registered nurse who holds a current, valid license	413
issued under this chapter and is designated as a certified nurse	414
practitioner in accordance with section 4723.42 of the Revised	415
Code and rules adopted by the board of nursing.	416
(K) "Physician" means an individual authorized under	417

Chapter 4731. of the Revised Code to practice medicine and 418
surgery or osteopathic medicine and surgery. 419

(L) "Collaboration" or "collaborating" means the 420
following: 421

(1) In the case of a clinical nurse specialist or a 422
certified nurse practitioner, that one or more podiatrists 423
acting within the scope of practice of podiatry in accordance 424
with section 4731.51 of the Revised Code and with whom the nurse 425
has entered into a standard care arrangement or one or more 426
physicians with whom the nurse has entered into a standard care 427
arrangement are continuously available to communicate with the 428
clinical nurse specialist or certified nurse practitioner either 429
in person or by electronic communication; 430

(2) In the case of a certified nurse-midwife or certified 431
midwife, that one or more physicians with whom the certified 432
nurse-midwife or certified midwife has entered into a standard 433
care arrangement are continuously available to communicate with 434
the certified nurse-midwife or certified midwife either in 435
person or by electronic communication. 436

(M) "Supervision," as it pertains to a certified 437
registered nurse anesthetist, means that the certified 438
registered nurse anesthetist is under the direction of a 439
podiatrist acting within the podiatrist's scope of practice in 440
accordance with section 4731.51 of the Revised Code, a dentist 441
acting within the dentist's scope of practice in accordance with 442
Chapter 4715. of the Revised Code, or a physician, and, when 443
administering anesthesia, the certified registered nurse 444
anesthetist is in the immediate presence of the podiatrist, 445
dentist, or physician. 446

(N) "Standard care arrangement" means a written, formal 447
guide for planning and evaluating a patient's health care that 448
is developed by one or more collaborating physicians or 449
podiatrists and a clinical nurse specialist, certified nurse- 450
midwife, certified midwife, or certified nurse practitioner and 451
meets the requirements of section 4723.431 of the Revised Code. 452

(O) "Advanced practice registered nurse" means an 453
individual who holds a current, valid license issued under this 454
chapter that authorizes the practice of nursing as an advanced 455
practice registered nurse and is designated as any of the 456
following: 457

(1) A certified registered nurse anesthetist; 458

(2) A clinical nurse specialist; 459

(3) A certified nurse-midwife; 460

(4) A certified nurse practitioner. 461

(P) "Practice of nursing as an advanced practice 462
registered nurse" means providing to individuals and groups 463
nursing care that requires knowledge and skill obtained from 464
advanced formal education, training, and clinical experience. 465
Such nursing care includes the care described in section 4723.43 466
of the Revised Code. 467

(Q) "Dialysis care" means the care and procedures that a 468
dialysis technician or dialysis technician intern is authorized 469
to provide and perform, as specified in section 4723.72 of the 470
Revised Code. 471

(R) "Dialysis technician" means an individual who holds a 472
current, valid certificate to practice as a dialysis technician 473
issued under section 4723.75 of the Revised Code. 474

(S) "Dialysis technician intern" means an individual who 475
has not passed the dialysis technician certification examination 476
required by section 4723.751 of the Revised Code, but who has 477
successfully completed a dialysis training program approved by 478
the board of nursing under section 4723.74 of the Revised Code 479
within the previous eighteen months. 480

(T) "Certified community health worker" means an 481
individual who holds a current, valid certificate as a community 482
health worker issued under section 4723.85 of the Revised Code. 483

(U) "Medication aide" means an individual who holds a 484
current, valid certificate issued under this chapter that 485
authorizes the individual to administer medication in accordance 486
with section 4723.67 of the Revised Code; 487

(V) "Nursing specialty" means a specialty in practice as a 488
certified registered nurse anesthetist, clinical nurse 489
specialist, certified nurse-midwife, or certified nurse 490
practitioner. 491

(W) "Physician assistant" means an individual who is 492
licensed to practice as a physician assistant under Chapter 493
4730. of the Revised Code. 494

(X) "Certified midwife" means an individual who is 495
licensed under section 4723.56 of the Revised Code and engages 496
in one or more of the activities described in that section. A 497
certified midwife does not include a certified nurse-midwife, 498
licensed midwife, or traditional midwife. 499

(Y) "Licensed midwife" has the same meaning as in section 500
4724.01 of the Revised Code. A licensed midwife does not include 501
a certified nurse-midwife, certified midwife, or traditional 502
midwife. 503

(Z) "Traditional midwife" has the same meaning as in 504
section 4724.01 of the Revised Code. 505

Sec. 4723.02. The board of nursing shall assume and 506
exercise all the powers and perform all the duties conferred and 507
imposed on it by this chapter. 508

The board shall consist of ~~thirteen~~fifteen members who 509
shall be citizens of the United States and residents of Ohio. 510
Eight members shall be registered nurses, each of whom shall be 511
a graduate of an approved program of nursing education that 512
prepares persons for licensure as a registered nurse, shall hold 513
a currently active license issued under this chapter to practice 514
nursing as a registered nurse, and shall have been actively 515
engaged in the practice of nursing as a registered nurse for the 516
five years immediately preceding the member's initial 517
appointment to the board. Of the eight members who are 518
registered nurses, at least two shall hold a current, valid 519
license issued under this chapter that authorizes the practice 520
of nursing as an advanced practice registered nurse. Four 521
members shall be licensed practical nurses, each of whom shall 522
be a graduate of an approved program of nursing education that 523
prepares persons for licensure as a practical nurse, shall hold 524
a currently active license issued under this chapter to practice 525
nursing as a licensed practical nurse, and shall have been 526
actively engaged in the practice of nursing as a licensed 527
practical nurse for the five years immediately preceding the 528
member's initial appointment to the board. One member shall be a 529
certified nurse-midwife or a certified midwife practicing in an 530
urban setting. One member shall be a certified nurse-midwife or 531
a certified midwife practicing in a rural setting. One member 532
shall represent the interests of consumers of health care. 533
Neither this member nor any person in the member's immediate 534

family shall be a member of or associated with a health care 535
provider or profession or shall have a financial interest in the 536
delivery or financing of health care. Representation of nursing 537
service and nursing education and of the various geographical 538
areas of the state shall be considered in making appointments. 539

As the term of any member of the board expires, a 540
successor shall be appointed who has the qualifications the 541
vacancy requires. Terms of office shall be for four years, 542
commencing on the first day of January and ending on the thirty- 543
first day of December. 544

A current or former board member who has served not more 545
than one full term or one full term and not more than thirty 546
months of another term may be reappointed for one additional 547
term. 548

Each member shall hold office from the date of appointment 549
until the end of the term for which the member was appointed. 550
The term of a member shall expire if the member ceases to meet 551
any requirement of this section for the member's position on the 552
board. Any member appointed to fill a vacancy occurring prior to 553
the expiration of the term for which the member's predecessor 554
was appointed shall hold office for the remainder of such term. 555
Any member shall continue in office subsequent to the expiration 556
date of the member's term until the member's successor takes 557
office, or until a period of sixty days has elapsed, whichever 558
occurs first. 559

Nursing organizations of this state may each submit to the 560
governor the names of not more than five nominees for each 561
position to be filled on the board. From the names so submitted 562
or from others, at the governor's discretion, the governor with 563
the advice and consent of the senate shall make such 564

appointments. 565

Any member of the board may be removed by the governor for 566
neglect of any duty required by law or for incompetency or 567
unprofessional or dishonorable conduct, after a hearing as 568
provided in Chapter 119. of the Revised Code. 569

~~Seven~~Eight members of the board, including at least four 570
registered nurses and at least one licensed practical nurse, 571
shall at all times constitute a quorum. 572

Each member of the board shall receive an amount fixed 573
pursuant to division (J) of section 124.15 of the Revised Code 574
for each day in attendance at board meetings and in discharge of 575
official duties, and in addition thereto, necessary expense 576
incurred in the performance of such duties. 577

The board shall elect one of its nurse members as 578
president and one as vice-president. The board shall elect one 579
of its registered nurse members to serve as the supervising 580
member for disciplinary matters. 581

The board may establish advisory groups to serve in 582
consultation with the board or the executive director. Each 583
advisory group shall be given a specific charge in writing and 584
shall report to the board. Members of advisory groups shall 585
serve without compensation but shall receive their actual and 586
necessary expenses incurred in the performance of their official 587
duties. 588

Sec. 4723.03. (A) No person shall engage in the practice 589
of nursing as a registered nurse, represent the person as being 590
a registered nurse, or use the title "registered nurse," the 591
initials "R.N.," or any other title implying that the person is 592
a registered nurse, for a fee, salary, or other consideration, 593

or as a volunteer, without holding a current, valid license as a 594
registered nurse under this chapter. 595

(B) No person shall knowingly do any of the following 596
without holding a current, valid license to practice nursing as 597
an advanced practice registered nurse issued under this chapter: 598

(1) Engage in the practice of nursing as an advanced 599
practice registered nurse; 600

(2) Represent the person as being an advanced practice 601
registered nurse; 602

(3) Use the title "advanced practice registered nurse," 603
the initials "A.P.R.N.," or any other title implying that the 604
person is an advanced practice registered nurse, for a fee, 605
salary, or other consideration, or as a volunteer. 606

(C) No person who is not otherwise authorized to do so 607
shall knowingly prescribe or personally furnish drugs or 608
therapeutic devices without holding a current, valid license to 609
practice nursing as an advanced practice registered nurse issued 610
under this chapter and being designated as a clinical nurse 611
specialist, certified nurse-midwife, or certified nurse 612
practitioner under section 4723.42 of the Revised Code; 613

(D) No person shall engage in the practice of nursing as a 614
licensed practical nurse, represent the person as being a 615
licensed practical nurse, or use the title "licensed practical 616
nurse," the initials "L.P.N.," or any other title implying that 617
the person is a licensed practical nurse, for a fee, salary, or 618
other consideration, or as a volunteer, without holding a 619
current, valid license as a practical nurse under this chapter. 620

(E) No person shall use the titles or initials "graduate 621
nurse," "G.N.," "professional nurse," "P.N.," "graduate 622

practical nurse," "G.P.N.," "practical nurse," "P.N.," "trained 623
nurse," "T.N.," or any other statement, title, or initials that 624
would imply or represent to the public that the person is 625
authorized to practice nursing in this state, except as follows: 626

(1) A person licensed under this chapter to practice 627
nursing as a registered nurse may use that title and the 628
initials "R.N."; 629

(2) A person licensed under this chapter to practice 630
nursing as a licensed practical nurse may use that title and the 631
initials "L.P.N."; 632

(3) A person licensed under this chapter to practice 633
nursing as an advanced practice registered nurse and designated 634
as a certified registered nurse anesthetist may use that title 635
or the initials "A.P.R.N.-C.R.N.A."; 636

(4) A person licensed under this chapter to practice 637
nursing as an advanced practice registered nurse and designated 638
as a clinical nurse specialist may use that title or the 639
initials "A.P.R.N.-C.N.S."; 640

(5) A person licensed under this chapter to practice 641
nursing as an advanced practice registered nurse and designated 642
as a certified nurse-midwife may use that title or the initials 643
"A.P.R.N.-C.N.M."; 644

(6) A person licensed under this chapter to practice 645
nursing as an advanced practice registered nurse and designated 646
as a certified nurse practitioner may use that title or the 647
initials "A.P.R.N.-C.N.P."; 648

(7) A person licensed under this chapter to practice 649
nursing as an advanced practice registered nurse may use the 650
title "advanced practice registered nurse" or the initials 651

"A.P.R.N." 652

(F) No person shall employ a person not licensed as a 653
registered nurse under this chapter to engage in the practice of 654
nursing as a registered nurse. 655

No person shall knowingly employ a person not licensed as 656
an advanced practice registered nurse under this chapter to 657
engage in the practice of nursing as an advanced practice 658
registered nurse. 659

No person shall employ a person not licensed as a 660
practical nurse under this chapter to engage in the practice of 661
nursing as a licensed practical nurse. 662

(G) No person shall sell or fraudulently obtain or furnish 663
any nursing diploma, license, certificate, renewal, or record, 664
or aid or abet such acts. 665

(H) (1) No person shall knowingly use the title "certified 666
nurse-midwife," the initials "C.N.M.," or any other title 667
implying that the person is a certified nurse-midwife without 668
holding a current, valid license as a certified nurse-midwife 669
under this chapter. 670

(2) No person shall knowingly use the title "certified 671
midwife," the initials "C.M.," or any other title implying that 672
the person is a certified midwife without holding a current, 673
valid license as a certified midwife under this chapter. 674

Sec. 4723.06. (A) The board of nursing shall: 675

(1) Administer and enforce the provisions of this chapter, 676
including the taking of disciplinary action for violations of 677
section 4723.28 of the Revised Code, any other provisions of 678
this chapter, or rules adopted under this chapter; 679

(2) Develop criteria that an applicant must meet to be 680
eligible to sit for the examination for licensure to practice as 681
a registered nurse or as a licensed practical nurse; 682

(3) Issue and renew nursing licenses, certified midwife 683
licenses, dialysis technician certificates, medication aide 684
certificates, and community health worker certificates, as 685
provided in this chapter; 686

(4) Define the minimum educational standards for the 687
schools and programs of registered nursing and practical nursing 688
in this state; 689

(5) Survey, inspect, and grant full approval to 690
prelicensure nursing education programs in this state that meet 691
the standards established by rules adopted under section 4723.07 692
of the Revised Code. Prelicensure nursing education programs 693
include, but are not limited to, diploma, associate degree, 694
baccalaureate degree, master's degree, and doctor of nursing 695
programs leading to initial licensure to practice nursing as a 696
registered nurse and practical nurse programs leading to initial 697
licensure to practice nursing as a licensed practical nurse. 698

(6) Grant conditional approval, by a vote of a quorum of 699
the board, to a new prelicensure nursing education program or a 700
program that is being reestablished after having ceased to 701
operate, if the program meets and maintains the minimum 702
standards of the board established by rules adopted under 703
section 4723.07 of the Revised Code. If the board does not grant 704
conditional approval, it shall hold an adjudication under 705
Chapter 119. of the Revised Code to consider conditional 706
approval of the program. If the board grants conditional 707
approval, at the first meeting following completion of the 708
survey process required by division (A) (5) of this section, the 709

board shall determine whether to grant full approval to the 710
program. If the board does not grant full approval or if it 711
appears that the program has failed to meet and maintain 712
standards established by rules adopted under section 4723.07 of 713
the Revised Code, the board shall hold an adjudication under 714
Chapter 119. of the Revised Code to consider the program. Based 715
on results of the adjudication, the board may continue or 716
withdraw conditional approval, or grant full approval. 717

(7) Place on provisional approval, for a period of time 718
specified by the board, a prelicensure nursing education program 719
that has ceased to meet and maintain the minimum standards of 720
the board established by rules adopted under section 4723.07 of 721
the Revised Code. Prior to or at the end of the period, the 722
board shall reconsider whether the program meets the standards 723
and shall grant full approval if it does. If it does not, the 724
board may withdraw approval, pursuant to an adjudication under 725
Chapter 119. of the Revised Code. 726

(8) Approve continuing education programs and courses 727
under standards established in rules adopted under sections 728
4723.07, 4723.69, 4723.79, and 4723.88 of the Revised Code; 729

(9) Establish the safe haven program in accordance with 730
sections 4723.35 and 4723.351 of the Revised Code; 731

(10) Establish the practice intervention and improvement 732
program in accordance with section 4723.282 of the Revised Code; 733

(11) Grant approval to the course of study in advanced 734
pharmacology and related topics described in section 4723.482 or 735
4723.551 of the Revised Code; 736

(12) Make an annual edition of the exclusionary formulary 737
established in rules adopted under section 4723.50 of the 738

Revised Code available to the public by electronic means and, as	739
soon as possible after any revision of the formulary becomes	740
effective, make the revision available to the public by	741
electronic means;	742
(13) Approve under section 4723.46 of the Revised Code	743
national certifying organizations for examination and licensure	744
of advanced practice registered nurses, which may include	745
separate organizations for each nursing specialty;	746
(14) Provide guidance and make recommendations to the	747
general assembly, the governor, state agencies, and the federal	748
government with respect to the regulation of the practice of	749
nursing and the enforcement of this chapter;	750
(15) Make an annual report to the governor, which shall be	751
open for public inspection;	752
(16) Maintain and have open for public inspection the	753
following records:	754
(a) A record of all its meetings and proceedings;	755
(b) A record of all applicants for, and holders of,	756
licenses and certificates issued by the board under this chapter	757
or in accordance with rules adopted under this chapter. The	758
record shall be maintained in a format determined by the board.	759
(c) A list of education and training programs approved by	760
the board.	761
(17) Deny conditional approval to a new prelicensure	762
nursing education program or a program that is being	763
reestablished after having ceased to operate if the program or a	764
person acting on behalf of the program submits or causes to be	765
submitted to the board false, misleading, or deceptive	766

statements, information, or documentation in the process of 767
applying for approval of the program. If the board proposes to 768
deny approval of the program, it shall do so pursuant to an 769
adjudication conducted under Chapter 119. of the Revised Code. 770

(B) The board may fulfill the requirement of division (A) 771
(8) of this section by authorizing persons who meet the 772
standards established in rules adopted under section 4723.07 of 773
the Revised Code to approve continuing education programs and 774
courses. Persons so authorized shall approve continuing 775
education programs and courses in accordance with standards 776
established in rules adopted under section 4723.07 of the 777
Revised Code. 778

Persons seeking authorization to approve continuing 779
education programs and courses shall apply to the board and pay 780
the appropriate fee established under section 4723.08 of the 781
Revised Code. Authorizations to approve continuing education 782
programs and courses shall expire and may be renewed according 783
to the schedule established in rules adopted under section 784
4723.07 of the Revised Code. 785

In addition to approving continuing education programs 786
under division (A) (8) of this section, the board may sponsor 787
continuing education activities that are directly related to the 788
statutes and rules the board enforces. 789

(C) (1) The board may deny conditional approval to a new 790
prelicensure nursing education program or program that is being 791
reestablished after having ceased to operate if the program is 792
controlled by a person who controls or has controlled a program 793
that had its approval withdrawn, revoked, suspended, or 794
restricted by the board or a board of another jurisdiction that 795
is a member of the national council of state boards of nursing. 796

If the board proposes to deny approval, it shall do so pursuant 797
to an adjudication conducted under Chapter 119. of the Revised 798
Code. 799

(2) As used in this division, "control" means any of the 800
following: 801

(a) Holding fifty per cent or more of the outstanding 802
voting securities or membership interest of a prelicensure 803
nursing education program; 804

(b) In the case of an unincorporated prelicensure nursing 805
education program, having the right to fifty per cent or more of 806
the program's profits or in the event of a dissolution, fifty 807
per cent or more of the program's assets; 808

(c) In the case of a prelicensure nursing education 809
program that is a for-profit or not-for-profit corporation, 810
having the contractual authority presently to designate fifty 811
per cent or more of its directors; 812

(d) In the case of a prelicensure nursing education 813
program that is a trust, having the contractual authority 814
presently to designate fifty per cent or more of its trustees; 815

(e) Having the authority to direct the management, 816
policies, or investments of a prelicensure nursing education 817
program. 818

(D) (1) When an action taken by the board under division 819
(A) (6), (7), or (17) or (C) (1) of this section is required to be 820
taken pursuant to an adjudication conducted under Chapter 119. 821
of the Revised Code, the board may, in lieu of an adjudication 822
hearing, enter into a consent agreement to resolve the matter. A 823
consent agreement, when ratified by a vote of a quorum of the 824
board, constitutes the findings and order of the board with 825

respect to the matter addressed in the agreement. If the board 826
refuses to ratify a consent agreement, the admissions and 827
findings contained in the agreement are of no effect. 828

(2) In any instance in which the board is required under 829
Chapter 119. of the Revised Code to give notice to a person 830
seeking approval of a prelicensure nursing education program of 831
an opportunity for a hearing and the person does not make a 832
timely request for a hearing in accordance with section 119.07 833
of the Revised Code, the board is not required to hold a 834
hearing, but may adopt, by a vote of a quorum, a final order 835
that contains the board's findings. 836

(3) When the board denies or withdraws approval of a 837
prelicensure nursing education program, the board may specify 838
that its action is permanent. A program subject to a permanent 839
action taken by the board is forever ineligible for approval and 840
the board shall not accept an application for the program's 841
reinstatement or approval. 842

Sec. 4723.07. In accordance with Chapter 119. of the 843
Revised Code, the board of nursing shall adopt and may amend and 844
rescind rules that establish all of the following: 845

(A) Provisions for the board's government and control of 846
its actions and business affairs; 847

(B) Subject to section 4723.072 of the Revised Code, 848
minimum standards for nursing education programs that prepare 849
graduates to be licensed under this chapter and procedures for 850
granting, renewing, and withdrawing approval of those programs; 851

(C) Criteria that applicants for licensure must meet to be 852
eligible to take examinations for licensure; 853

(D) Standards and procedures for renewal of the licenses 854

and certificates issued by the board;	855
(E) Standards for approval of continuing nursing education	856
programs and courses for registered nurses, advanced practice	857
registered nurses, and licensed practical nurses. The standards	858
may provide for approval of continuing nursing education	859
programs and courses that have been approved by other state	860
boards of nursing or by national accreditation systems for	861
nursing, including, but not limited to, the American nurses'	862
credentialing center and the national association for practical	863
nurse education and service.	864
(F) Standards that persons must meet to be authorized by	865
the board to approve continuing education programs and courses	866
and a schedule by which that authorization expires and may be	867
renewed;	868
(G) Requirements, including continuing education	869
requirements, for reactivating inactive licenses or	870
certificates, and for reinstating licenses or certificates that	871
have lapsed;	872
(H) Conditions that may be imposed for reinstatement of a	873
license or certificate following action taken under section	874
3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised	875
Code resulting in a license or certificate suspension;	876
(I) Criteria for evaluating the qualifications of an	877
applicant for a license to practice nursing as a registered	878
nurse, a license to practice nursing as an advanced practice	879
registered nurse, or a license to practice nursing as a licensed	880
practical nurse for the purpose of issuing the license by the	881
board's endorsement of the applicant's authority to practice	882
issued by the licensing agency of another state;	883

(J) Universal and standard precautions that shall be used	884
by each licensee or certificate holder. The rules shall define	885
and establish requirements for universal and standard	886
precautions that include the following:	887
(1) Appropriate use of hand washing;	888
(2) Disinfection and sterilization of equipment;	889
(3) Handling and disposal of needles and other sharp	890
instruments;	891
(4) Wearing and disposal of gloves and other protective	892
garments and devices.	893
(K) Quality assurance standards for advanced practice	894
registered nurses;	895
(L) Additional criteria for the standard care arrangement	896
required by section 4723.431 of the Revised Code entered into by	897
a <u>certified midwife</u> , clinical nurse specialist, certified nurse-	898
midwife, or certified nurse practitioner and the nurse's	899
collaborating physician or podiatrist;	900
(M) For purposes of division (B) (31) of section 4723.28 of	901
the Revised Code, the actions, omissions, or other circumstances	902
that constitute failure to establish and maintain professional	903
boundaries with a patient;	904
(N) Standards and procedures for delegation under section	905
4723.48 of the Revised Code of the authority to administer	906
drugs.	907
The board may adopt other rules necessary to carry out the	908
provisions of this chapter. The rules shall be adopted in	909
accordance with Chapter 119. of the Revised Code.	910

Sec. 4723.08. (A) The board of nursing may impose fees not	911
to exceed the following limits:	912
(1) For application for licensure by examination or	913
endorsement to practice nursing as a registered nurse or as a	914
licensed practical nurse submitted under division (A) or (B) of	915
section 4723.09 of the Revised Code, seventy-five dollars;	916
(2) For application for licensure to practice nursing as	917
an advanced practice registered nurse submitted under division	918
(A) or (B) (2) of section 4723.41 of the Revised Code, one	919
hundred fifty dollars;	920
(3) For application for a dialysis technician certificate,	921
the amount specified in rules adopted under section 4723.79 of	922
the Revised Code;	923
(4) For providing, pursuant to division (B) of section	924
4723.271 of the Revised Code, written verification of a nursing	925
license, dialysis technician certificate, medication aide	926
certificate, or community health worker certificate to another	927
jurisdiction, fifteen dollars;	928
(5) For providing, pursuant to division (A) of section	929
4723.271 of the Revised Code, a replacement copy of a wall	930
certificate suitable for framing as described in that division,	931
twenty-five dollars;	932
(6) For renewal of a license to practice as a registered	933
nurse or licensed practical nurse, sixty-five dollars;	934
(7) For renewal of a license to practice as an advanced	935
practice registered nurse, one hundred thirty-five dollars;	936
(8) For renewal of a dialysis technician certificate, the	937
amount specified in rules adopted under section 4723.79 of the	938

Revised Code;	939
(9) For processing a late application for renewal of a nursing license or dialysis technician certificate, fifty dollars;	940 941 942
(10) For application for authorization to approve continuing education programs and courses from an applicant accredited by a national accreditation system for nursing, five hundred dollars;	943 944 945 946
(11) For application for authorization to approve continuing education programs and courses from an applicant not accredited by a national accreditation system for nursing, one thousand dollars;	947 948 949 950
(12) For each year for which authorization to approve continuing education programs and courses is renewed, one hundred fifty dollars;	951 952 953
(13) For application for approval to operate a dialysis training program, the amount specified in rules adopted under section 4723.79 of the Revised Code;	954 955 956
(14) For reinstatement of a lapsed license or certificate issued under this chapter, one hundred dollars except as provided in section 5903.10 of the Revised Code;	957 958 959
(15) For processing a check returned to the board by a financial institution, twenty-five dollars;	960 961
(16) The amounts specified in rules adopted under section 4723.88 of the Revised Code pertaining to the issuance of certificates to community health workers, including fees for application for a certificate, renewal of a certificate, processing a late application for renewal of a certificate,	962 963 964 965 966

reinstatement of a lapsed certificate, application for approval 967
of a community health worker training program for community 968
health workers, and renewal of the approval of a training 969
program for community health workers; 970

(17) For application for licensure to practice as a 971
certified midwife, an amount equal to the fee for licensure to 972
practice as an advanced practice registered nurse; 973

(18) For renewal of a license to practice as a certified 974
midwife, an amount equal to the fee for renewal of a license to 975
practice as an advanced practice registered nurse. 976

(B) Each quarter, for purposes of transferring funds under 977
section 4743.05 of the Revised Code to the nurse education 978
assistance fund created in section 3333.28 of the Revised Code, 979
the board of nursing shall certify to the director of budget and 980
management the number of licenses renewed under this chapter 981
during the preceding quarter and the amount equal to that number 982
times five dollars. 983

(C) The board may charge a participant in a board- 984
sponsored continuing education activity an amount not exceeding 985
fifteen dollars for each activity. 986

(D) The board may contract for services pertaining to the 987
process of providing written verification of a license or 988
certificate when the verification is performed for purposes 989
other than providing verification to another jurisdiction. The 990
contract may include provisions pertaining to the collection of 991
the fee charged for providing the written verification. As part 992
of these provisions, the board may permit the contractor to 993
retain a portion of the fees as compensation, before any amounts 994
are deposited into the state treasury. 995

Sec. 4723.271. (A) Upon request of the holder of a nursing 996
license, certified midwife license, dialysis technician 997
certificate, medication aide certificate, or community health 998
worker certificate issued under this chapter, the presentment of 999
proper identification as prescribed in rules adopted by the 1000
board of nursing, and payment of the fee authorized under 1001
section 4723.08 of the Revised Code, the board of nursing shall 1002
provide to the requestor a replacement copy of a wall 1003
certificate suitable for framing. 1004

(B) Upon request of the holder of a nursing license, 1005
certified midwife license, volunteer's certificate, dialysis 1006
technician certificate, medication aide certificate, or 1007
community health worker certificate issued under this chapter 1008
and payment of the fee authorized under section 4723.08 of the 1009
Revised Code, the board shall verify to an agency of another 1010
jurisdiction or foreign country the fact that the person holds 1011
such nursing license, certified midwife license, volunteer's 1012
certificate, dialysis technician certificate, medication aide 1013
certificate, or community health worker certificate. 1014

Sec. 4723.28. (A) The board of nursing, by a vote of a 1015
quorum, may impose one or more of the following sanctions if it 1016
finds that a person committed fraud in passing an examination 1017
required to obtain a nursing license, certified midwife license, 1018
or dialysis technician certificate issued by the board or 1019
committed fraud, misrepresentation, or deception in applying for 1020
or securing a nursing license, certified midwife license, or 1021
dialysis technician certificate issued by the board: deny, 1022
revoke, suspend, or place restrictions on any nursing license, 1023
certified midwife license, or dialysis technician certificate 1024
issued by the board; reprimand or otherwise discipline a holder 1025
of a nursing license, certified midwife license, or dialysis 1026

technician certificate; or impose a fine of not more than five 1027
hundred dollars per violation. 1028

(B) Except as provided in section 4723.092 of the Revised 1029
Code, the board of nursing, by a vote of a quorum, may impose 1030
one or more of the following sanctions: deny, revoke, suspend, 1031
or place restrictions on any nursing license, certified midwife 1032
license, or dialysis technician certificate issued by the board; 1033
reprimand or otherwise discipline a holder of a nursing license, 1034
certified midwife license, or dialysis technician certificate; 1035
or impose a fine of not more than five hundred dollars per 1036
violation. The sanctions may be imposed for any of the 1037
following: 1038

(1) Denial, revocation, suspension, or restriction of 1039
authority to engage in a licensed profession or practice a 1040
health care occupation, including nursing or practice as a 1041
certified midwife or dialysis technician, for any reason other 1042
than a failure to renew, in Ohio or another state or 1043
jurisdiction; 1044

(2) Engaging in the practice of nursing or engaging in 1045
practice as a certified midwife or dialysis technician, having 1046
failed to renew a nursing license, certified midwife license, or 1047
dialysis technician certificate issued under this chapter, or 1048
while a nursing license, certified midwife license, or dialysis 1049
technician certificate is under suspension; 1050

(3) Conviction of, a plea of guilty to, a judicial finding 1051
of guilt of, a judicial finding of guilt resulting from a plea 1052
of no contest to, or a judicial finding of eligibility for a 1053
pretrial diversion or similar program or for intervention in 1054
lieu of conviction for, a misdemeanor committed in the course of 1055
practice; 1056

(4) Conviction of, a plea of guilty to, a judicial finding 1057
of guilt of, a judicial finding of guilt resulting from a plea 1058
of no contest to, or a judicial finding of eligibility for a 1059
pretrial diversion or similar program or for intervention in 1060
lieu of conviction for, any felony or of any crime involving 1061
gross immorality or moral turpitude; 1062

(5) Selling, giving away, or administering drugs or 1063
therapeutic devices for other than legal and legitimate 1064
therapeutic purposes; or conviction of, a plea of guilty to, a 1065
judicial finding of guilt of, a judicial finding of guilt 1066
resulting from a plea of no contest to, or a judicial finding of 1067
eligibility for a pretrial diversion or similar program or for 1068
intervention in lieu of conviction for, violating any municipal, 1069
state, county, or federal drug law; 1070

(6) Conviction of, a plea of guilty to, a judicial finding 1071
of guilt of, a judicial finding of guilt resulting from a plea 1072
of no contest to, or a judicial finding of eligibility for a 1073
pretrial diversion or similar program or for intervention in 1074
lieu of conviction for, an act in another jurisdiction that 1075
would constitute a felony or a crime of moral turpitude in Ohio; 1076

(7) Conviction of, a plea of guilty to, a judicial finding 1077
of guilt of, a judicial finding of guilt resulting from a plea 1078
of no contest to, or a judicial finding of eligibility for a 1079
pretrial diversion or similar program or for intervention in 1080
lieu of conviction for, an act in the course of practice in 1081
another jurisdiction that would constitute a misdemeanor in 1082
Ohio; 1083

(8) Self-administering or otherwise taking into the body 1084
any dangerous drug, as defined in section 4729.01 of the Revised 1085
Code, in any way that is not in accordance with a legal, valid 1086

prescription issued for that individual, or self-administering 1087
or otherwise taking into the body any drug that is a schedule I 1088
controlled substance; 1089

(9) Habitual or excessive use of controlled substances, 1090
other habit-forming drugs, or alcohol or other chemical 1091
substances to an extent that impairs the individual's ability to 1092
provide safe nursing care, safe care as a certified midwife, or 1093
safe dialysis care; 1094

(10) Impairment of the ability to practice according to 1095
acceptable and prevailing standards of safe nursing care, safe 1096
care as a certified midwife, or safe dialysis care because of 1097
the use of drugs, alcohol, or other chemical substances; 1098

(11) Impairment of the ability to practice according to 1099
acceptable and prevailing standards of safe nursing care, safe 1100
care as a certified midwife, or safe dialysis care because of a 1101
physical or mental disability; 1102

(12) Assaulting or causing harm to a patient or depriving 1103
a patient of the means to summon assistance; 1104

(13) Misappropriation or attempted misappropriation of 1105
money or anything of value in the course of practice; 1106

(14) Adjudication by a probate court of being mentally ill 1107
or mentally incompetent. The board may reinstate the person's 1108
nursing license, certified midwife license, or dialysis 1109
technician certificate upon adjudication by a probate court of 1110
the person's restoration to competency or upon submission to the 1111
board of other proof of competency. 1112

(15) The suspension or termination of employment by the 1113
United States department of defense or department of veterans 1114
affairs for any act that violates or would violate this chapter; 1115

(16) Violation of this chapter or any rules adopted under it;	1116 1117
(17) Violation of any restrictions placed by the board on a nursing license, <u>certified midwife license</u> , or dialysis technician certificate;	1118 1119 1120
(18) Failure to use universal and standard precautions established by rules adopted under section 4723.07 of the Revised Code;	1121 1122 1123
(19) Failure to practice in accordance with acceptable and prevailing standards of safe nursing care, <u>safe care as a certified midwife</u> , or safe dialysis care;	1124 1125 1126
(20) In the case of a registered nurse, engaging in activities that exceed the practice of nursing as a registered nurse;	1127 1128 1129
(21) In the case of a licensed practical nurse, engaging in activities that exceed the practice of nursing as a licensed practical nurse;	1130 1131 1132
(22) In the case of a dialysis technician, engaging in activities that exceed those permitted under section 4723.72 of the Revised Code;	1133 1134 1135
(23) Aiding and abetting a person in that person's practice of nursing <u>or as a certified midwife</u> without a license or practice as a dialysis technician without a certificate issued under this chapter;	1136 1137 1138 1139
(24) In the case of an advanced practice registered nurse, except as provided in division (M) of this section, either of the following:	1140 1141 1142
(a) Waiving the payment of all or any part of a deductible	1143

or copayment that a patient, pursuant to a health insurance or 1144
health care policy, contract, or plan that covers such nursing 1145
services, would otherwise be required to pay if the waiver is 1146
used as an enticement to a patient or group of patients to 1147
receive health care services from that provider; 1148

(b) Advertising that the nurse will waive the payment of 1149
all or any part of a deductible or copayment that a patient, 1150
pursuant to a health insurance or health care policy, contract, 1151
or plan that covers such nursing services, would otherwise be 1152
required to pay. 1153

(25) Failure to comply with the terms and conditions of 1154
participation in the safe haven program conducted under sections 1155
4723.35 and 4723.351 of the Revised Code; 1156

(26) Failure to comply with the terms and conditions 1157
required under the practice intervention and improvement program 1158
established under section 4723.282 of the Revised Code; 1159

(27) In the case of an advanced practice registered nurse: 1160

(a) Engaging in activities that exceed those permitted for 1161
the nurse's nursing specialty under section 4723.43 of the 1162
Revised Code; 1163

(b) Failure to meet the quality assurance standards 1164
established under section 4723.07 of the Revised Code. 1165

(28) In the case of an advanced practice registered nurse 1166
other than a certified registered nurse anesthetist, failure to 1167
maintain a standard care arrangement in accordance with section 1168
4723.431 of the Revised Code or to practice in accordance with 1169
the standard care arrangement; 1170

(29) In the case of an advanced practice registered nurse 1171

who is designated as a clinical nurse specialist, certified 1172
nurse-midwife, or certified nurse practitioner, failure to 1173
prescribe drugs and therapeutic devices in accordance with 1174
section 4723.481 of the Revised Code; 1175

(30) Prescribing any drug or device to perform or induce 1176
an abortion, or otherwise performing or inducing an abortion; 1177

(31) Failure to establish and maintain professional 1178
boundaries with a patient, as specified in rules adopted under 1179
section 4723.07 of the Revised Code; 1180

(32) Regardless of whether the contact or verbal behavior 1181
is consensual, engaging with a patient other than the spouse of 1182
the registered nurse, licensed practical nurse, certified 1183
midwife, or dialysis technician in any of the following: 1184

(a) Sexual contact, as defined in section 2907.01 of the 1185
Revised Code; 1186

(b) Verbal behavior that is sexually demeaning to the 1187
patient or may be reasonably interpreted by the patient as 1188
sexually demeaning. 1189

(33) Assisting suicide, as defined in section 3795.01 of 1190
the Revised Code; 1191

(34) Failure to comply with the requirements in section 1192
3719.061 of the Revised Code before issuing for a minor a 1193
prescription for an opioid analgesic, as defined in section 1194
3719.01 of the Revised Code; 1195

(35) Failure to comply with section 4723.487 of the 1196
Revised Code, unless the state board of pharmacy no longer 1197
maintains a drug database pursuant to section 4729.75 of the 1198
Revised Code; 1199

(36) The revocation, suspension, restriction, reduction, 1200
or termination of clinical privileges by the United States 1201
department of defense or department of veterans affairs or the 1202
termination or suspension of a certificate of registration to 1203
prescribe drugs by the drug enforcement administration of the 1204
United States department of justice; 1205

(37) In the case of an advanced practice registered nurse 1206
who is designated as a clinical nurse specialist, certified 1207
nurse-midwife, or certified nurse practitioner, failure to 1208
comply with the terms of a consult agreement entered into with a 1209
pharmacist pursuant to section 4729.39 of the Revised Code; 1210

(38) Violation of section 4723.93 of the Revised Code; 1211

(39) Failure to cooperate with an investigation conducted 1212
by the board under this chapter, including failure to comply 1213
with a subpoena or order issued by the board or failure to 1214
answer truthfully a question presented by the board in an 1215
investigative interview, in an investigative office conference, 1216
at a deposition, or in written interrogatories, except that 1217
failure to cooperate with an investigation does not constitute 1218
grounds for discipline if a court of competent jurisdiction has 1219
issued an order that either quashes a subpoena or permits the 1220
individual to withhold testimony or evidence at issue; 1221

(40) In the case of a certified midwife: 1222

(a) Engaging in activities that exceed those permitted 1223
under section 4723.57 of the Revised Code; 1224

(b) Failure to prescribe drugs and therapeutic devices in 1225
accordance with section 4723.481 of the Revised Code; 1226

(c) Failure to maintain a standard care arrangement in 1227
accordance with section 4723.431 of the Revised Code or to 1228

practice in accordance with the standard care arrangement. 1229

(C) Disciplinary actions taken by the board under 1230
divisions (A) and (B) of this section shall be taken pursuant to 1231
an adjudication conducted under Chapter 119. of the Revised 1232
Code, except that in lieu of a hearing, the board may enter into 1233
a consent agreement with an individual to resolve an allegation 1234
of a violation of this chapter or any rule adopted under it. A 1235
consent agreement, when ratified by a vote of a quorum, shall 1236
constitute the findings and order of the board with respect to 1237
the matter addressed in the agreement. If the board refuses to 1238
ratify a consent agreement, the admissions and findings 1239
contained in the agreement shall be of no effect. 1240

(D) The hearings of the board shall be conducted in 1241
accordance with Chapter 119. of the Revised Code, the board may 1242
appoint a hearing examiner, as provided in section 119.09 of the 1243
Revised Code, to conduct any hearing the board is authorized to 1244
hold under Chapter 119. of the Revised Code. 1245

In any instance in which the board is required under 1246
Chapter 119. of the Revised Code to give notice of an 1247
opportunity for a hearing and the applicant, licensee, or 1248
certificate holder does not make a timely request for a hearing 1249
in accordance with section 119.07 of the Revised Code, the board 1250
is not required to hold a hearing, but may adopt, by a vote of a 1251
quorum, a final order that contains the board's findings. In the 1252
final order, the board may order any of the sanctions listed in 1253
division (A) or (B) of this section. 1254

(E) If a criminal action is brought against a registered 1255
nurse, licensed practical nurse, certified midwife, or dialysis 1256
technician for an act or crime described in divisions (B) (3) to 1257
(7) of this section and the action is dismissed by the trial 1258

court other than on the merits, the board shall conduct an 1259
adjudication to determine whether the registered nurse, licensed 1260
practical nurse, certified midwife, or dialysis technician 1261
committed the act on which the action was based. If the board 1262
determines on the basis of the adjudication that the registered 1263
nurse, licensed practical nurse, certified midwife, or dialysis 1264
technician committed the act, or if the registered nurse, 1265
licensed practical nurse, certified midwife, or dialysis 1266
technician fails to participate in the adjudication, the board 1267
may take action as though the registered nurse, licensed 1268
practical nurse, certified midwife, or dialysis technician had 1269
been convicted of the act. 1270

If the board takes action on the basis of a conviction, 1271
plea, or a judicial finding as described in divisions (B) (3) to 1272
(7) of this section that is overturned on appeal, the registered 1273
nurse, licensed practical nurse, certified midwife, or dialysis 1274
technician may, on exhaustion of the appeal process, petition 1275
the board for reconsideration of its action. On receipt of the 1276
petition and supporting court documents, the board shall 1277
temporarily rescind its action. If the board determines that the 1278
decision on appeal was a decision on the merits, it shall 1279
permanently rescind its action. If the board determines that the 1280
decision on appeal was not a decision on the merits, it shall 1281
conduct an adjudication to determine whether the registered 1282
nurse, licensed practical nurse, certified midwife, or dialysis 1283
technician committed the act on which the original conviction, 1284
plea, or judicial finding was based. If the board determines on 1285
the basis of the adjudication that the registered nurse, 1286
licensed practical nurse, certified midwife, or dialysis 1287
technician committed such act, or if the registered nurse, 1288
licensed practical nurse, certified midwife, or dialysis 1289

technician does not request an adjudication, the board shall 1290
reinstate its action; otherwise, the board shall permanently 1291
rescind its action. 1292

Notwithstanding the provision of division (D) (2) of 1293
section 2953.32 or division (F) (1) of section 2953.39 of the 1294
Revised Code specifying that if records pertaining to a criminal 1295
case are sealed or expunged under that section the proceedings 1296
in the case shall be deemed not to have occurred, sealing or 1297
expungement of the following records on which the board has 1298
based an action under this section shall have no effect on the 1299
board's action or any sanction imposed by the board under this 1300
section: records of any conviction, guilty plea, judicial 1301
finding of guilt resulting from a plea of no contest, or a 1302
judicial finding of eligibility for a pretrial diversion program 1303
or intervention in lieu of conviction. 1304

The board shall not be required to seal, destroy, redact, 1305
or otherwise modify its records to reflect the court's sealing 1306
or expungement of conviction records. 1307

(F) The board may investigate an individual's criminal 1308
background in performing its duties under this section. As part 1309
of such investigation, the board may order the individual to 1310
submit, at the individual's expense, a request to the bureau of 1311
criminal identification and investigation for a criminal records 1312
check and check of federal bureau of investigation records 1313
pursuant to section 4723.091 of the Revised Code. 1314

(G) During the course of an investigation conducted under 1315
this section, the board may compel any registered nurse, 1316
licensed practical nurse, certified midwife, or dialysis 1317
technician or applicant under this chapter to submit to a mental 1318
or physical examination, or both, as required by the board and 1319

at the expense of the individual, if the board finds reason to 1320
believe that the individual under investigation may have a 1321
physical or mental impairment that may affect the individual's 1322
ability to provide safe nursing, certified midwifery, or 1323
dialysis care. 1324

The board shall not compel an individual who has been 1325
referred to the safe haven program as described in sections 1326
4723.35 and 4723.351 of the Revised Code to submit to a mental 1327
or physical examination. 1328

Failure of any individual to submit to a mental or 1329
physical examination when directed constitutes an admission of 1330
the allegations, unless the failure is due to circumstances 1331
beyond the individual's control, and a default and final order 1332
may be entered without the taking of testimony or presentation 1333
of evidence. 1334

If the board finds that an individual is impaired, the 1335
board shall require the individual to submit to care, 1336
counseling, or treatment approved or designated by the board, as 1337
a condition for initial, continued, reinstated, or renewed 1338
authority to practice. The individual shall be afforded an 1339
opportunity to demonstrate to the board that the individual can 1340
begin or resume the individual's occupation in compliance with 1341
acceptable and prevailing standards of care under the provisions 1342
of the individual's authority to practice. 1343

For purposes of this division, any registered nurse, 1344
licensed practical nurse, certified midwife, or dialysis 1345
technician or applicant under this chapter shall be deemed to 1346
have given consent to submit to a mental or physical examination 1347
when directed to do so in writing by the board, and to have 1348
waived all objections to the admissibility of testimony or 1349

examination reports that constitute a privileged communication. 1350

(H) The board shall investigate evidence that appears to 1351
show that any person has violated any provision of this chapter 1352
or any rule of the board. Any person may report to the board any 1353
information the person may have that appears to show a violation 1354
of any provision of this chapter or rule of the board. In the 1355
absence of bad faith, any person who reports such information or 1356
who testifies before the board in any adjudication conducted 1357
under Chapter 119. of the Revised Code shall not be liable for 1358
civil damages as a result of the report or testimony. 1359

(I) All of the following apply under this chapter with 1360
respect to the confidentiality of information: 1361

(1) Information received by the board pursuant to a 1362
complaint or an investigation is confidential and not subject to 1363
discovery in any civil action, except that the board may 1364
disclose information to law enforcement officers and government 1365
entities for purposes of an investigation of either a licensed 1366
health care professional, including a registered nurse, licensed 1367
practical nurse, certified midwife, or dialysis technician, or a 1368
person who may have engaged in the unauthorized practice of 1369
nursing, certified midwifery, or dialysis care. No law 1370
enforcement officer or government entity with knowledge of any 1371
information disclosed by the board pursuant to this division 1372
shall divulge the information to any other person or government 1373
entity except for the purpose of a government investigation, a 1374
prosecution, or an adjudication by a court or government entity. 1375

(2) If an investigation requires a review of patient 1376
records, the investigation and proceeding shall be conducted in 1377
such a manner as to protect patient confidentiality. 1378

(3) All adjudications and investigations of the board 1379
shall be considered civil actions for the purposes of section 1380
2305.252 of the Revised Code. 1381

(4) Any board activity that involves continued monitoring 1382
of an individual as part of or following any disciplinary action 1383
taken under this section shall be conducted in a manner that 1384
maintains the individual's confidentiality. Information received 1385
or maintained by the board with respect to the board's 1386
monitoring activities is not subject to discovery in any civil 1387
action and is confidential, except that the board may disclose 1388
information to law enforcement officers and government entities 1389
for purposes of an investigation of a licensee or certificate 1390
holder. 1391

(J) Any action taken by the board under this section 1392
resulting in a suspension from practice shall be accompanied by 1393
a written statement of the conditions under which the person may 1394
be reinstated to practice. 1395

(K) When the board refuses to grant a license or 1396
certificate to an applicant, revokes a license or certificate, 1397
or refuses to reinstate a license or certificate, the board may 1398
specify that its action is permanent. An individual subject to 1399
permanent action taken by the board is forever ineligible to 1400
hold a license or certificate of the type that was refused or 1401
revoked and the board shall not accept from the individual an 1402
application for reinstatement of the license or certificate or 1403
for a new license or certificate. 1404

(L) No unilateral surrender of a nursing license, 1405
certified midwife license, or dialysis technician certificate 1406
issued under this chapter shall be effective unless accepted by 1407
majority vote of the board. No application for a nursing 1408

license, certified midwife license, or dialysis technician 1409
certificate issued under this chapter may be withdrawn without a 1410
majority vote of the board. The board's jurisdiction to take 1411
disciplinary action under this section is not removed or limited 1412
when an individual has a license or certificate classified as 1413
inactive or fails to renew a license or certificate. 1414

(M) Sanctions shall not be imposed under division (B) (24) 1415
of this section against any licensee who waives deductibles and 1416
copayments as follows: 1417

(1) In compliance with the health benefit plan that 1418
expressly allows such a practice. Waiver of the deductibles or 1419
copayments shall be made only with the full knowledge and 1420
consent of the plan purchaser, payer, and third-party 1421
administrator. Documentation of the consent shall be made 1422
available to the board upon request. 1423

(2) For professional services rendered to any other person 1424
licensed pursuant to this chapter to the extent allowed by this 1425
chapter and the rules of the board. 1426

Sec. 4723.282. (A) As used in this section, "practice 1427
deficiency" means any activity that does not meet acceptable and 1428
prevailing standards of safe and effective nursing care or 1429
dialysis care or safe and effective care as a certified midwife. 1430

(B) The board of nursing may abstain from taking 1431
disciplinary action under section 4723.28 of the Revised Code 1432
against the holder of a license or certificate issued under this 1433
chapter who has a practice deficiency that has been identified 1434
by the board through an investigation conducted under section 1435
4723.28 of the Revised Code. The board may abstain from taking 1436
action only if the board has reason to believe that the 1437

individual's practice deficiency can be corrected through 1438
remediation, and if the individual enters into an agreement with 1439
the board to seek remediation as prescribed by the board, 1440
complies with the terms and conditions of the remediation, and 1441
successfully completes the remediation. If an individual fails 1442
to complete the remediation or the board determines that 1443
remediation cannot correct the individual's practice deficiency, 1444
the board shall proceed with disciplinary action in accordance 1445
with section 4723.28 of the Revised Code. 1446

(C) To implement its authority under this section to 1447
abstain from taking disciplinary action, the board shall 1448
establish a practice intervention and improvement program. The 1449
board shall designate an administrator to operate the program 1450
and, in accordance with Chapter 119. of the Revised Code, adopt 1451
rules for the program that establish the following: 1452

(1) Criteria for use in identifying an individual's 1453
practice deficiency; 1454

(2) Requirements that an individual must meet to be 1455
eligible for remediation and the board's abstention from 1456
disciplinary action; 1457

(3) Standards and procedures for prescribing remediation 1458
that is appropriate for an individual's identified practice 1459
deficiency; 1460

(4) Terms and conditions that an individual must meet to 1461
be successful in completing the remediation prescribed; 1462

(5) Procedures for the board's monitoring of the 1463
individual's remediation; 1464

(6) Procedures for maintaining confidential records 1465
regarding individuals who participate in remediation; 1466

(7) Any other requirements or procedures necessary to 1467
develop and administer the program. 1468

(D) All records held by the board for purposes of the 1469
program shall be confidential, are not public records for 1470
purposes of section 149.43 of the Revised Code, and are not 1471
subject to discovery by subpoena or admissible as evidence in 1472
any judicial proceeding. The administrator of the program shall 1473
maintain all records in the board's office in accordance with 1474
the board's record retention schedule. 1475

(E) When an individual begins the remediation prescribed 1476
by the board, the individual shall sign a waiver permitting any 1477
entity that provides services related to the remediation to 1478
release to the board information regarding the individual's 1479
progress. An entity that provides services related to 1480
remediation shall report to the board if the individual fails to 1481
complete the remediation or does not make satisfactory progress 1482
in remediation. 1483

In the absence of fraud or bad faith, an entity that 1484
reports to the board regarding an individual's practice 1485
deficiency, or progress or lack of progress in remediation, is 1486
not liable in damages to any person as a result of making the 1487
report. 1488

(F) An individual participating in remediation prescribed 1489
under this section is responsible for all financial obligations 1490
that may arise from obtaining or completing the remediation. 1491

Sec. 4723.33. A registered nurse, licensed practical 1492
nurse, certified midwife, dialysis technician, community health 1493
worker, or medication aide who in good faith makes a report 1494
under this chapter or any other provision of the Revised Code 1495

regarding a violation of this chapter or any other provision of 1496
the Revised Code, or participates in any investigation, 1497
administrative proceeding, or judicial proceeding resulting from 1498
the report, has the full protection against retaliatory action 1499
provided by sections 4113.51 to 4113.53 of the Revised Code. 1500

Sec. 4723.34. (A) A person or governmental entity that 1501
employs, or contracts directly or through another person or 1502
governmental entity for the provision of services by, registered 1503
nurses, licensed practical nurses, nurses holding multistate 1504
licenses to practice registered or licensed practical nursing 1505
issued pursuant to section 4723.11 of the Revised Code, 1506
certified midwives, dialysis technicians, medication aides, or 1507
certified community health workers and that knows or has reason 1508
to believe that a current or former employee or person providing 1509
services under a contract who holds a license or certificate 1510
issued under this chapter engaged in conduct that would be 1511
grounds for disciplinary action by the board of nursing under 1512
this chapter or rules adopted under it shall report to the board 1513
of nursing the name of such current or former employee or person 1514
providing services under a contract. The report shall be made on 1515
the person's or governmental entity's behalf by an individual 1516
licensed by the board who the person or governmental entity has 1517
designated to make such reports. 1518

A prosecutor in a case described in divisions (B) (3) to 1519
(5) of section 4723.28 of the Revised Code, or in a case where 1520
the trial court issued an order of dismissal upon technical or 1521
procedural grounds of a charge of a misdemeanor committed in the 1522
course of practice, a felony charge, or a charge of gross 1523
immorality or moral turpitude, who knows or has reason to 1524
believe that the person charged is licensed under this chapter 1525
to practice nursing as a registered nurse or as a licensed 1526

practical nurse, is licensed under this chapter to practice as a 1527
certified midwife, or holds a certificate issued under this 1528
chapter to practice as a dialysis technician shall notify the 1529
board of nursing of the charge. With regard to certified 1530
community health workers and medication aides, the prosecutor in 1531
a case involving a charge of a misdemeanor committed in the 1532
course of employment, a felony charge, or a charge of gross 1533
immorality or moral turpitude, including a case dismissed on 1534
technical or procedural grounds, who knows or has reason to 1535
believe that the person charged holds a community health worker 1536
or medication aide certificate issued under this chapter shall 1537
notify the board of the charge. 1538

Each notification from a prosecutor shall be made on forms 1539
prescribed and provided by the board. The report shall include 1540
the name and address of the license or certificate holder, the 1541
charge, and the certified court documents recording the action. 1542

(B) If any person or governmental entity fails to provide 1543
a report required by this section, the board may seek an order 1544
from a court of competent jurisdiction compelling submission of 1545
the report. 1546

Sec. 4723.341. (A) As used in this section, "person" has 1547
the same meaning as in section 1.59 of the Revised Code and also 1548
includes the board of nursing and its members and employees; 1549
health care facilities, associations, and societies; insurers; 1550
and individuals. 1551

(B) In the absence of fraud or bad faith, no person 1552
reporting to the board of nursing or testifying in an 1553
adjudication conducted under Chapter 119. of the Revised Code 1554
with regard to alleged incidents of negligence or malpractice or 1555
matters subject to this chapter or sections 3123.41 to 3123.50 1556

of the Revised Code and any applicable rules adopted under 1557
section 3123.63 of the Revised Code shall be subject to either 1558
of the following based on making the report or testifying: 1559

(1) Liability in damages in a civil action for injury, 1560
death, or loss to person or property; 1561

(2) Discipline or dismissal by an employer. 1562

(C) An individual who is disciplined or dismissed in 1563
violation of division (B) (2) of this section has the same rights 1564
and duties accorded an employee under sections 4113.52 and 1565
4113.53 of the Revised Code. 1566

(D) In the absence of fraud or bad faith, no professional 1567
association of registered nurses, advanced practice registered 1568
nurses, licensed practical nurses, certified midwives, dialysis 1569
technicians, community health workers, or medication aides that 1570
sponsors a committee or program to provide peer assistance to 1571
individuals with substance abuse problems, no representative or 1572
agent of such a committee or program, and no member of the board 1573
of nursing shall be liable to any person for damages in a civil 1574
action by reason of actions taken to refer a nurse, certified 1575
midwife, dialysis technician, community health worker, or 1576
medication aide to a treatment provider or actions or omissions 1577
of the provider in treating a nurse, certified midwife, dialysis 1578
technician, community health worker, or medication aide. 1579

Sec. 4723.35. (A) As used in this section and section 1580
4723.351 of the Revised Code: 1581

(1) "Applicant" means an individual who has applied for a 1582
license or certificate to practice issued under this chapter. 1583
"Applicant" may include an individual who has been granted 1584
authority by the board of nursing to practice as one type of 1585

practitioner, but has applied for authority to practice as 1586
another type of practitioner. 1587

(2) "Impaired" or "impairment" means either or both of the 1588
following: 1589

(a) Impairment of the ability to practice as described in 1590
division (B) (10) of section 4723.28 of the Revised Code; 1591

(b) Impairment of the ability to practice as described in 1592
division (B) (11) of section 4723.28 of the Revised Code. 1593

(3) "Practitioner" means an individual authorized under 1594
this chapter to practice as a registered nurse, including as an 1595
advanced practice registered nurse, licensed practical nurse, 1596
certified midwife, dialysis technician, community health worker, 1597
or medication aide. 1598

(B) The board of nursing shall establish the safe haven 1599
program to monitor applicants and practitioners who are or may 1600
be impaired, but against whom the board has abstained from 1601
taking disciplinary action. The program is to be conducted by 1602
the monitoring organization under contract with the board as 1603
described in section 4723.351 of the Revised Code. 1604

(C) (1) On the establishment of the program, the board may 1605
transfer to the monitoring organization, in whole or in part, 1606
either or both of the following responsibilities: 1607

(a) The monitoring and oversight of licensees as part of 1608
the substance use disorder program as that program existed on or 1609
~~before the effective date of this section~~ September 20, 2024; 1610

(b) The monitoring and oversight of licensees under terms 1611
specified in a board adjudication order or consent agreement. 1612

(2) If the board transfers the responsibilities described 1613

in division (C) (1) of this section, both of the following apply: 1614

(a) The monitoring organization shall provide to the board 1615
quarterly reports regarding the compliance of transferred 1616
licensees. 1617

(b) The monitoring organization shall immediately report 1618
to the board any licensee who is not in compliance with the 1619
terms and conditions of monitoring. 1620

(D) The board shall refer to the monitoring organization 1621
any applicant or practitioner whose health and effectiveness 1622
show signs of impairment or potential impairment, but only if 1623
the applicant or practitioner meets the eligibility conditions 1624
of division (G) of this section. 1625

(E) Determinations regarding an applicant's or 1626
practitioner's eligibility for admission to, continued 1627
participation in, and successful completion of the safe haven 1628
program shall be made by the monitoring organization in 1629
accordance with rules adopted under section 4723.351 of the 1630
Revised Code. 1631

(F) The board shall abstain from taking disciplinary 1632
action under section 4723.28, 4723.652, or 4723.86 of the 1633
Revised Code against an individual whose health and 1634
effectiveness show signs of impairment or potential impairment, 1635
but who is not currently under the terms of a consent agreement 1636
with the board for impairment or an order issued by the board 1637
for impairment if the individual is participating in the safe 1638
haven program. 1639

An applicant's or practitioner's impairment neither 1640
excuses an applicant or practitioner who has committed other 1641
violations of this chapter nor precludes the board from 1642

investigating or taking disciplinary action against an applicant 1643
or practitioner for other violations of this chapter. 1644

(G) An applicant or practitioner is eligible to 1645
participate in the safe haven program if both of the following 1646
conditions are met: 1647

(1) The applicant or practitioner needs assistance with 1648
impairment or potential impairment. 1649

(2) The applicant or practitioner has an unencumbered 1650
license and is not currently under the terms of a consent 1651
agreement with the board for impairment or an order issued by 1652
the board for impairment. 1653

Sec. 4723.41. (A) Each person who desires to practice 1654
nursing as a certified nurse-midwife and has not been authorized 1655
to practice ~~midwifery~~ nurse-midwifery prior to December 1, 1967, 1656
and each person who desires to practice nursing as a certified 1657
registered nurse anesthetist, clinical nurse specialist, or 1658
certified nurse practitioner shall file with the board of 1659
nursing a written application for a license to practice nursing 1660
as an advanced practice registered nurse and designation in the 1661
desired specialty. The application must be filed, under oath, on 1662
a form prescribed by the board accompanied by the application 1663
fee required by section 4723.08 of the Revised Code. 1664

Except as provided in division (B), (C), or (D) of this 1665
section, at the time of making application, the applicant shall 1666
meet all of the following requirements: 1667

(1) Be a registered nurse; 1668

(2) Submit documentation satisfactory to the board that 1669
the applicant has earned a master's or doctoral degree with a 1670
major in a nursing specialty or in a related field that 1671

qualifies the applicant to sit for the certification examination 1672
of a national certifying organization approved by the board 1673
under section 4723.46 of the Revised Code; 1674

(3) Submit documentation satisfactory to the board of 1675
having passed the certification examination of a national 1676
certifying organization approved by the board under section 1677
4723.46 of the Revised Code to examine and certify, as 1678
applicable, nurse-midwives, registered nurse anesthetists, 1679
clinical nurse specialists, or nurse practitioners; 1680

(4) Submit an affidavit with the application that states 1681
all of the following: 1682

(a) That the applicant is the person named in the 1683
documents submitted under this section and is the lawful 1684
possessor thereof; 1685

(b) The applicant's age, residence, the school at which 1686
the applicant obtained education in the applicant's nursing 1687
specialty, and any other facts that the board requires; 1688

(c) The specialty in which the applicant seeks 1689
designation. 1690

(B) (1) A certified registered nurse anesthetist, clinical 1691
nurse specialist, certified nurse-midwife, or certified nurse 1692
practitioner who is practicing or has practiced as such in 1693
another jurisdiction other than another state may apply for a 1694
license by endorsement to practice nursing as an advanced 1695
practice registered nurse and designation as a certified 1696
registered nurse anesthetist, clinical nurse specialist, 1697
certified nurse-midwife, or certified nurse practitioner in this 1698
state if the nurse meets the requirements set forth in division 1699
(A) of this section or division (B) (2) of this section. 1700

(2) If an applicant who is practicing or has practiced in another jurisdiction other than another state applies for designation under division (B) (2) of this section, the application shall be submitted to the board in the form prescribed by rules of the board and be accompanied by the application fee required by section 4723.08 of the Revised Code. The application shall include evidence that the applicant meets the requirements of division (B) (2) of this section, holds authority to practice nursing and is in good standing in another jurisdiction other than another state granted after meeting requirements approved by the entity of that jurisdiction that regulates nurses, and other information required by rules of the board of nursing.

With respect to the educational requirements and national certification requirements that an applicant under division (B) (2) of this section must meet, both of the following apply:

(a) If the applicant is a certified registered nurse anesthetist, certified nurse-midwife, or certified nurse practitioner who, on or before December 31, 2000, obtained certification in the applicant's nursing specialty with a national certifying organization listed in division (A) (3) of section 4723.41 of the Revised Code as that division existed prior to March 20, 2013, or that was at that time approved by the board under section 4723.46 of the Revised Code, the applicant must have maintained the certification. The applicant is not required to have earned a master's or doctoral degree with a major in a nursing specialty or in a related field that qualifies the applicant to sit for the certification examination.

(b) If the applicant is a clinical nurse specialist, one

of the following must apply to the applicant: 1731

(i) On or before December 31, 2000, the applicant obtained 1732
a master's or doctoral degree with a major in a clinical area of 1733
nursing from an educational institution accredited by a national 1734
or regional accrediting organization. The applicant is not 1735
required to have passed a certification examination. 1736

(ii) On or before December 31, 2000, the applicant 1737
obtained a master's or doctoral degree in nursing or a related 1738
field and was certified as a clinical nurse specialist by the 1739
American nurses credentialing center or another national 1740
certifying organization that was at that time approved by the 1741
board under section 4723.46 of the Revised Code. 1742

(3) The board shall grant a license to practice nursing as 1743
an advanced practice registered nurse in accordance with Chapter 1744
4796. of the Revised Code to an applicant if either of the 1745
following applies: 1746

(a) The applicant holds a license in another state. 1747

(b) The applicant has satisfactory work experience, a 1748
government certification, or a private certification as 1749
described in that chapter as an advanced practice registered 1750
nurse in a state that does not issue that license. 1751

(4) The board may grant a nonrenewable temporary permit to 1752
practice nursing as an advanced practice registered nurse to an 1753
applicant for licensure under division (B)(2) or (3) of this 1754
section if the board is satisfied by the evidence that the 1755
applicant holds a valid, unrestricted license in or equivalent 1756
authorization from another jurisdiction. Chapter 4796. of the 1757
Revised Code does not apply to a temporary permit issued under 1758
this division. The temporary permit shall expire at the earlier 1759

of one hundred eighty days after issuance or upon the issuance 1760
of a license under division (B) (2) or (3) of this section. 1761

(C) An applicant who desires to practice nursing as a 1762
certified registered nurse anesthetist, certified nurse-midwife, 1763
or certified nurse practitioner is exempt from the educational 1764
requirements in division (A) (2) of this section if all of the 1765
following are the case: 1766

(1) Before January 1, 2001, the board issued to the 1767
applicant a certificate of authority to practice as a certified 1768
registered nurse anesthetist, certified nurse-midwife, or 1769
certified nurse practitioner; 1770

(2) The applicant submits documentation satisfactory to 1771
the board that the applicant obtained certification in the 1772
applicant's nursing specialty with a national certifying 1773
organization listed in division (A) (3) of section 4723.41 of the 1774
Revised Code as that division existed prior to March 20, 2013, 1775
or that was at that time approved by the board under section 1776
4723.46 of the Revised Code; 1777

(3) The applicant submits documentation satisfactory to 1778
the board that the applicant has maintained the certification 1779
described in division (C) (2) of this section. 1780

(D) An applicant who desires to practice as a clinical 1781
nurse specialist is exempt from the examination requirement in 1782
division (A) (3) of this section if both of the following are the 1783
case: 1784

(1) Before January 1, 2001, the board issued to the 1785
applicant a certificate of authority to practice as a clinical 1786
nurse specialist; 1787

(2) The applicant submits documentation satisfactory to 1788

the board that the applicant earned either of the following: 1789

(a) A master's or doctoral degree with a major in a 1790
clinical area of nursing from an educational institution 1791
accredited by a national or regional accrediting organization; 1792

(b) A master's or doctoral degree in nursing or a related 1793
field and was certified as a clinical nurse specialist by the 1794
American nurses credentialing center or another national 1795
certifying organization that was at that time approved by the 1796
board under section 4723.46 of the Revised Code. 1797

Sec. 4723.43. A certified registered nurse anesthetist, 1798
clinical nurse specialist, certified nurse-midwife, or certified 1799
nurse practitioner may provide to individuals and groups nursing 1800
care that requires knowledge and skill obtained from advanced 1801
formal education and clinical experience. In this capacity as an 1802
advanced practice registered nurse, a certified nurse-midwife is 1803
subject to division (A) of this section, a certified registered 1804
nurse anesthetist is subject to division (B) of this section, a 1805
certified nurse practitioner is subject to division (C) of this 1806
section, and a clinical nurse specialist is subject to division 1807
(D) of this section. 1808

(A) ~~A~~ Subject to sections 4723.58 to 4723.584 of the 1809
Revised Code, a nurse authorized to practice as a certified 1810
nurse-midwife, in collaboration with one or more physicians, may 1811
provide the management of preventive services and those primary 1812
care services necessary to provide health care to women 1813
anteperatally, intraperatally, postperatally, and gynecologically, 1814
consistent with the nurse's education and certification, and in 1815
accordance with rules adopted by the board of nursing. 1816

No certified nurse-midwife may perform version, ~~deliver~~ 1817

~~breech or face presentation, use forceps, do any obstetric~~ 1818
~~operation, or treat any other abnormal condition outside of the~~ 1819
~~scope of practice for certified nurse-midwives established by~~ 1820
~~the American college of nurse-midwives, except in emergencies.~~ 1821
No certified nurse-midwife may deliver breech or face 1822
presentation except in an emergency or as provided in section 1823
4723.581 of the Revised Code. Division (A) of this section does 1824
not prohibit a certified nurse-midwife from performing 1825
episiotomies or normal vaginal deliveries, or repairing vaginal 1826
tears. A certified nurse-midwife may, in collaboration with one 1827
or more physicians, prescribe drugs and therapeutic devices in 1828
accordance with section 4723.481 of the Revised Code. A 1829
certified nurse-midwife may, in collaboration with one or more 1830
physicians, attend births in hospitals, homes, medical offices, 1831
and freestanding birthing centers and provide care for normal 1832
newborns during the period consistent with the scope of practice 1833
for certified nurse-midwives established by the American college 1834
of nurse-midwives. 1835

(B) A nurse authorized to practice as a certified 1836
registered nurse anesthetist, consistent with the nurse's 1837
education and certification and in accordance with rules adopted 1838
by the board, may do the following: 1839

(1) With supervision and in the immediate presence of a 1840
physician, podiatrist, or dentist, administer anesthesia and 1841
perform anesthesia induction, maintenance, and emergence; 1842

(2) With supervision, obtain informed consent for 1843
anesthesia care and perform preanesthetic preparation and 1844
evaluation, postanesthetic preparation and evaluation, 1845
postanesthesia care, and, subject to section 4723.433 of the 1846
Revised Code, clinical support functions; 1847

(3) With supervision and in accordance with section 1848
4723.434 of the Revised Code, engage in the activities described 1849
in division (A) of that section. 1850

The physician, podiatrist, or dentist supervising a 1851
certified registered nurse anesthetist must be actively engaged 1852
in practice in this state. When a certified registered nurse 1853
anesthetist is supervised by a podiatrist, the nurse's scope of 1854
practice is limited to the anesthesia procedures that the 1855
podiatrist has the authority under section 4731.51 of the 1856
Revised Code to perform. A certified registered nurse 1857
anesthetist may not administer general anesthesia under the 1858
supervision of a podiatrist in a podiatrist's office. When a 1859
certified registered nurse anesthetist is supervised by a 1860
dentist, the nurse's scope of practice is limited to the 1861
anesthesia procedures that the dentist has the authority under 1862
Chapter 4715. of the Revised Code to perform. 1863

(C) A nurse authorized to practice as a certified nurse 1864
practitioner, in collaboration with one or more physicians or 1865
podiatrists, may provide preventive and primary care services, 1866
provide services for acute illnesses, and evaluate and promote 1867
patient wellness within the nurse's nursing specialty, 1868
consistent with the nurse's education and certification, and in 1869
accordance with rules adopted by the board. A certified nurse 1870
practitioner may, in collaboration with one or more physicians 1871
or podiatrists, prescribe drugs and therapeutic devices in 1872
accordance with section 4723.481 of the Revised Code. 1873

When a certified nurse practitioner is collaborating with 1874
a podiatrist, the nurse's scope of practice is limited to the 1875
procedures that the podiatrist has the authority under section 1876
4731.51 of the Revised Code to perform. 1877

(D) A nurse authorized to practice as a clinical nurse specialist, in collaboration with one or more physicians or podiatrists, may provide and manage the care of individuals and groups with complex health problems and provide health care services that promote, improve, and manage health care within the nurse's nursing specialty, consistent with the nurse's education and in accordance with rules adopted by the board. A clinical nurse specialist may, in collaboration with one or more physicians or podiatrists, prescribe drugs and therapeutic devices in accordance with section 4723.481 of the Revised Code.

When a clinical nurse specialist is collaborating with a podiatrist, the nurse's scope of practice is limited to the procedures that the podiatrist has the authority under section 4731.51 of the Revised Code to perform.

Sec. 4723.431. (A) (1) ~~An~~ A certified midwife or an advanced practice registered nurse who is designated as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may practice only in accordance with a standard care arrangement entered into with each physician or podiatrist with whom the certified midwife or nurse collaborates. A copy of the standard care arrangement shall be retained on file by the certified midwife's or nurse's employer. Prior approval of the standard care arrangement by the board of nursing is not required, but the board may periodically review it for compliance with this section.

A certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may enter into a standard care arrangement with one or more collaborating physicians or podiatrists. If a collaborating physician or podiatrist enters into standard care arrangements with more than

five certified midwives or nurses, the physician or podiatrist 1908
shall not collaborate at the same time with more than five 1909
certified midwives or nurses in the prescribing component of 1910
their practices. 1911

Not later than thirty days after first engaging in the 1912
practice of midwifery as a certified midwife or the practice of 1913
nursing as a clinical nurse specialist, certified nurse-midwife, 1914
or certified nurse practitioner, the certified midwife or nurse 1915
shall submit to the board the name and business address of each 1916
collaborating physician or podiatrist. Thereafter, the certified 1917
midwife or nurse shall notify the board of any additions or 1918
deletions to the midwife's or nurse's collaborating physicians 1919
or podiatrists. Except as provided in division (D) of this 1920
section, the notice must be provided not later than thirty days 1921
after the change takes effect. 1922

(2) All of the following conditions apply with respect to 1923
the practice of a collaborating physician or podiatrist with 1924
whom a certified midwife, clinical nurse specialist, certified 1925
nurse-midwife, or certified nurse practitioner may enter into a 1926
standard care arrangement: 1927

(a) The physician or podiatrist must be authorized to 1928
practice in this state. 1929

(b) Except as provided in division (A) (2) (c) of this 1930
section, the physician or podiatrist must be practicing in a 1931
specialty that is the same as or similar to the certified 1932
midwife's specialty or nurse's nursing specialty. 1933

(c) If the nurse is a clinical nurse specialist who is 1934
certified as a psychiatric-mental health CNS or the equivalent 1935
of such title by the American nurses credentialing center or a 1936

certified nurse practitioner who is certified as a psychiatric- 1937
mental health NP or the equivalent of such title by the American 1938
nurses credentialing center or American academy of nurse 1939
practitioners certification board, the nurse may enter into a 1940
standard care arrangement with a physician but not a podiatrist 1941
and the collaborating physician must be practicing in one of the 1942
following specialties: 1943

- (i) Psychiatry; 1944
- (ii) Pediatrics; 1945
- (iii) Primary care or family practice. 1946

(B) A standard care arrangement shall be in writing and 1947
shall contain all of the following: 1948

- (1) Criteria for referral of a patient by the certified 1949
midwife, clinical nurse specialist, certified nurse-midwife, or 1950
certified nurse practitioner to a collaborating physician or 1951
podiatrist or another physician or podiatrist; 1952
- (2) A process for the certified midwife, clinical nurse 1953
specialist, certified nurse-midwife, or certified nurse 1954
practitioner to obtain a consultation with a collaborating 1955
physician or podiatrist or another physician or podiatrist; 1956
- (3) A plan for coverage in instances of emergency or 1957
planned absences of either the certified midwife, clinical nurse 1958
specialist, certified nurse-midwife, or certified nurse 1959
practitioner or a collaborating physician or podiatrist that 1960
provides the means whereby a physician or podiatrist is 1961
available for emergency care; 1962
- (4) The process for resolution of disagreements regarding 1963
matters of patient management between the certified midwife, 1964

clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and a collaborating physician or podiatrist;	1965 1966
(5) An agreement that the collaborating physician shall complete and sign the medical certificate of death pursuant to section 3705.16 of the Revised Code;	1967 1968 1969
(6) Any other criteria required by rule of the board adopted pursuant to section 4723.07 or 4723.50 of the Revised Code.	1970 1971 1972
(C) A standard care arrangement entered into pursuant to this section may permit a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to do any of the following:	1973 1974 1975 1976
(1) Supervise services provided by a home health agency as defined in section 3740.01 of the Revised Code;	1977 1978
(2) Admit a patient to a hospital in accordance with section 3727.06 of the Revised Code;	1979 1980
(3) Sign any document relating to the admission, treatment, or discharge of an inpatient receiving psychiatric or other behavioral health care services, but only if the conditions of section 4723.436 of the Revised Code have been met.	1981 1982 1983 1984 1985
(D) (1) Except as provided in division (D) (2) of this section, if a physician or podiatrist terminates the collaboration between the physician or podiatrist and a <u>certified midwife</u> , certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist before their standard care arrangement expires, all of the following apply:	1986 1987 1988 1989 1990 1991
(a) The physician or podiatrist must give the <u>certified</u>	1992

midwife or nurse written or electronic notice of the 1993
termination. 1994

(b) Once the certified midwife or nurse receives the 1995
termination notice, the certified midwife or nurse must notify 1996
the board of nursing of the termination as soon as practicable 1997
by submitting to the board a copy of the physician's or 1998
podiatrist's termination notice. 1999

(c) Notwithstanding the ~~requirement~~ requirements of 2000
~~section~~ sections 4723.43 and 4723.57 of the Revised Code that 2001
the certified midwife or nurse practice in collaboration with a 2002
physician or podiatrist, the certified midwife or nurse may 2003
continue to practice under the existing standard care 2004
arrangement without a collaborating physician or podiatrist for 2005
not more than one hundred twenty days after submitting to the 2006
board a copy of the termination notice. 2007

(2) In the event that the collaboration between a 2008
physician or podiatrist and a certified midwife, certified 2009
nurse-midwife, certified nurse practitioner, or clinical nurse 2010
specialist terminates because of the physician's or podiatrist's 2011
death, the certified midwife or nurse must notify the board of 2012
the death as soon as practicable. The certified midwife or nurse 2013
may continue to practice under the existing standard care 2014
arrangement without a collaborating physician or podiatrist for 2015
not more than one hundred twenty days after notifying the board 2016
of the physician's or podiatrist's death. 2017

(E) (1) Nothing in this section prohibits a hospital from 2018
hiring a certified midwife, clinical nurse specialist, certified 2019
nurse-midwife, or certified nurse practitioner as an employee 2020
and negotiating standard care arrangements on behalf of the 2021
employee as necessary to meet the requirements of this section. 2022

A standard care arrangement between the hospital's employee and 2023
the employee's collaborating physician is subject to approval by 2024
the medical staff and governing body of the hospital prior to 2025
implementation of the arrangement at the hospital. 2026

(2) Nothing in this section prohibits a standard care 2027
arrangement from specifying actions that a clinical nurse 2028
specialist, certified nurse-midwife, or certified nurse 2029
practitioner is authorized to take, or is prohibited from 2030
taking, as part of the nurse's practice in collaboration with a 2031
physician or podiatrist. In specifying such actions, the 2032
standard care arrangement shall not authorize the nurse to take 2033
any action that is otherwise prohibited by the Revised Code or 2034
rule of the board. 2035

Sec. 4723.432. (A) ~~An~~ A certified midwife or an advanced 2036
practice registered nurse who is designated as a clinical nurse 2037
specialist, certified nurse-midwife, or certified nurse 2038
practitioner shall cooperate with the state medical board in any 2039
investigation the board conducts with respect to a physician or 2040
podiatrist who collaborates with the certified midwife or nurse. 2041
The certified midwife or nurse shall cooperate with the board in 2042
any investigation the board conducts with respect to the 2043
unauthorized practice of medicine by the certified midwife or 2044
nurse. 2045

(B) An advanced practice registered nurse who is 2046
designated as a certified registered nurse anesthetist shall 2047
cooperate with the state medical board or state dental board in 2048
any investigation either board conducts with respect to a 2049
physician, podiatrist, or dentist who permits the nurse to 2050
practice with the supervision of that physician, podiatrist, or 2051
dentist. The nurse shall cooperate with either board in any 2052

investigation it conducts with respect to the unauthorized 2053
practice of medicine or dentistry by the nurse. 2054

Sec. 4723.481. This section establishes standards and 2055
conditions regarding the authority of an advanced practice 2056
registered nurse who is designated as a clinical nurse 2057
specialist, certified nurse-midwife, or certified nurse 2058
practitioner to prescribe and personally furnish drugs and 2059
therapeutic devices under a license issued under section 4723.42 2060
of the Revised Code. 2061

This section also establishes standards and conditions 2062
regarding the authority of a certified midwife to prescribe and 2063
personally furnish drugs and therapeutic devices under a license 2064
issued under section 4723.56 of the Revised Code. 2065

(A) A clinical nurse specialist, certified nurse-midwife, 2066
~~or~~ certified nurse practitioner, or certified midwife shall not 2067
prescribe or furnish any drug or therapeutic device that is 2068
listed on the exclusionary formulary established in rules 2069
adopted under section 4723.50 of the Revised Code. 2070

(B) The prescriptive authority of a clinical nurse 2071
specialist, certified nurse-midwife, ~~or~~ certified nurse 2072
practitioner, or certified midwife shall not exceed the 2073
prescriptive authority of the collaborating physician or 2074
podiatrist, including the collaborating physician's authority to 2075
treat chronic pain with controlled substances and products 2076
containing tramadol as described in section 4731.052 of the 2077
Revised Code. 2078

(C) (1) Except as provided in division (C) (2) or (3) of 2079
this section, a clinical nurse specialist, certified nurse- 2080
midwife, ~~or~~ certified nurse practitioner, or certified midwife 2081

may prescribe to a patient a schedule II controlled substance 2082
only if all of the following are the case: 2083

(a) The patient has a terminal condition, as defined in 2084
section 2133.01 of the Revised Code. 2085

(b) A physician initially prescribed the substance for the 2086
patient. 2087

(c) The prescription is for an amount that does not exceed 2088
the amount necessary for the patient's use in a single, seventy- 2089
two-hour period. 2090

(2) The restrictions on prescriptive authority in division 2091
(C)(1) of this section do not apply if a clinical nurse 2092
specialist, certified nurse-midwife, ~~or~~ certified nurse 2093
practitioner, or certified midwife issues the prescription to 2094
the patient from any of the following entities: 2095

(a) A hospital as defined in section 3722.01 of the 2096
Revised Code; 2097

(b) An entity owned or controlled, in whole or in part, by 2098
a hospital or by an entity that owns or controls, in whole or in 2099
part, one or more hospitals; 2100

(c) A health care facility operated by the department of 2101
mental health and addiction services or the department of 2102
developmental disabilities; 2103

(d) A nursing home licensed under section 3721.02 of the 2104
Revised Code or by a political subdivision certified under 2105
section 3721.09 of the Revised Code; 2106

(e) A county home or district home operated under Chapter 2107
5155. of the Revised Code that is certified under the medicare 2108
or medicaid program; 2109

(f) A hospice care program, as defined in section 3712.01	2110
of the Revised Code;	2111
(g) A community mental health services provider, as	2112
defined in section 5122.01 of the Revised Code;	2113
(h) An ambulatory surgical facility, as defined in section	2114
3702.30 of the Revised Code;	2115
(i) A freestanding birthing center, as defined in section	2116
3701.503 of the Revised Code;	2117
(j) A federally qualified health center, as defined in	2118
section 3701.047 of the Revised Code;	2119
(k) A federally qualified health center look-alike, as	2120
defined in section 3701.047 of the Revised Code;	2121
(l) A health care office or facility operated by the board	2122
of health of a city or general health district or the authority	2123
having the duties of a board of health under section 3709.05 of	2124
the Revised Code;	2125
(m) A site where a medical practice is operated, but only	2126
if the practice is comprised of one or more physicians who also	2127
are owners of the practice; the practice is organized to provide	2128
direct patient care; and the clinical nurse specialist,	2129
certified nurse-midwife, or certified nurse practitioner, <u>or</u>	2130
<u>certified midwife</u> providing services at the site has a standard	2131
care arrangement and collaborates with at least one of the	2132
physician owners who practices primarily at that site;	2133
(n) A site where a behavioral health practice is operated	2134
that does not qualify as a location otherwise described in	2135
division (C) (2) of this section, but only if the practice is	2136
organized to provide outpatient services for the treatment of	2137

mental health conditions, substance use disorders, or both, and 2138
the clinical nurse specialist, certified nurse-midwife, ~~or~~ 2139
certified nurse practitioner, or certified midwife providing 2140
services at the site of the practice has a standard care 2141
arrangement and collaborates with at least one physician who is 2142
employed by that practice; 2143

(o) A residential care facility, as defined in section 2144
3721.01 of the Revised Code. 2145

(3) A clinical nurse specialist, certified nurse-midwife, 2146
~~or~~certified nurse practitioner, or certified midwife shall not 2147
issue to a patient a prescription for a schedule II controlled 2148
substance from a convenience care clinic even if the clinic is 2149
owned or operated by an entity specified in division (C) (2) of 2150
this section. 2151

(D) A pharmacist who acts in good faith reliance on a 2152
prescription issued by a clinical nurse specialist, certified 2153
nurse-midwife, ~~or~~certified nurse practitioner, or certified 2154
midwife under division (C) (2) of this section is not liable for 2155
or subject to any of the following for relying on the 2156
prescription: damages in any civil action, prosecution in any 2157
criminal proceeding, or professional disciplinary action by the 2158
state board of pharmacy under Chapter 4729. of the Revised Code. 2159

(E) A clinical nurse specialist, certified nurse-midwife, 2160
~~or~~certified nurse practitioner, or certified midwife shall 2161
comply with section 3719.061 of the Revised Code if the nurse 2162
prescribes for a minor, as defined in that section, an opioid 2163
analgesic, as defined in section 3719.01 of the Revised Code. 2164

Sec. 4723.483. (A) (1) Subject to division (A) (2) of this 2165
section, and notwithstanding any provision of this chapter or 2166

rule adopted by the board of nursing, a clinical nurse 2167
specialist, certified nurse-midwife, ~~or~~ certified nurse 2168
~~practitioner who holds a certificate to prescribe issued under~~ 2169
~~section 4723.48 of the Revised Code,~~ or certified midwife may do 2170
either of the following without having examined an individual to 2171
whom epinephrine may be administered: 2172

(a) Personally furnish a supply of epinephrine 2173
autoinjectors for use in accordance with sections 3313.7110, 2174
3313.7111, 3314.143, 3326.28, 3328.29, 3728.03 to 3728.05, and 2175
5180.26 of the Revised Code; 2176

(b) Issue a prescription for epinephrine autoinjectors for 2177
use in accordance with sections 3313.7110, 3313.7111, 3314.143, 2178
3326.28, 3328.29, 3728.03 to 3728.05, and 5180.26 of the Revised 2179
Code. 2180

(2) An epinephrine autoinjector personally furnished or 2181
prescribed under division (A)(1) of this section must be 2182
furnished or prescribed in such a manner that it may be 2183
administered only in a manufactured dosage form. 2184

(B) A nurse or certified midwife who acts in good faith in 2185
accordance with this section is not liable for or subject to any 2186
of the following for any action or omission of an entity to 2187
which an epinephrine autoinjector is furnished or a prescription 2188
is issued: damages in any civil action, prosecution in any 2189
criminal proceeding, or professional disciplinary action. 2190

Sec. 4723.487. (A) As used in this section: 2191

(1) "Drug database" means the database established and 2192
maintained by the state board of pharmacy pursuant to section 2193
4729.75 of the Revised Code. 2194

(2) "Opioid analgesic" and "benzodiazepine" have the same 2195

meanings as in section 3719.01 of the Revised Code. 2196

(B) Except as provided in divisions (C) and (E) of this 2197
section, an advanced practice registered nurse who is designated 2198
as a clinical nurse specialist, certified nurse-midwife, or 2199
certified nurse practitioner or a certified midwife shall comply 2200
with all of the following as conditions of prescribing a drug 2201
that is either an opioid analgesic or a benzodiazepine as part 2202
of a patient's course of treatment for a particular condition: 2203

(1) Before initially prescribing the drug, the advanced 2204
practice registered nurse or certified midwife or the advanced 2205
practice registered nurse's or certified midwife's delegate 2206
shall request from the drug database a report of information 2207
related to the patient that covers at least the twelve months 2208
immediately preceding the date of the request. If the advanced 2209
practice registered nurse or certified midwife practices 2210
primarily in a county of this state that adjoins another state, 2211
the advanced practice registered nurse or certified midwife or 2212
delegate also shall request a report of any information 2213
available in the drug database that pertains to prescriptions 2214
issued or drugs furnished to the patient in the state adjoining 2215
that county. 2216

(2) If the patient's course of treatment for the condition 2217
continues for more than ninety days after the initial report is 2218
requested, the advanced practice registered nurse or certified 2219
midwife or delegate shall make periodic requests for reports of 2220
information from the drug database until the course of treatment 2221
has ended. The requests shall be made at intervals not exceeding 2222
ninety days, determined according to the date the initial 2223
request was made. The request shall be made in the same manner 2224
provided in division (B) (1) of this section for requesting the 2225

initial report of information from the drug database. 2226

(3) On receipt of a report under division (B) (1) or (2) of 2227
this section, the advanced practice registered nurse or 2228
certified midwife shall assess the information in the report. 2229
The advanced practice registered nurse or certified midwife 2230
shall document in the patient's record that the report was 2231
received and the information was assessed. 2232

(C) Division (B) of this section does not apply ~~if~~ in any 2233
of the following circumstances: 2234

(1) A drug database report regarding the patient is not 2235
available, in which case the advanced practice registered nurse 2236
or certified midwife shall document in the patient's record the 2237
reason that the report is not available. 2238

(2) The drug is prescribed in an amount indicated for a 2239
period not to exceed seven days. 2240

(3) The drug is prescribed for the treatment of cancer or 2241
another condition associated with cancer. 2242

(4) The drug is prescribed to a hospice patient in a 2243
hospice care program, as those terms are defined in section 2244
3712.01 of the Revised Code, or any other patient diagnosed as 2245
terminally ill. 2246

(5) The drug is prescribed for administration in a 2247
hospital, nursing home, or residential care facility. 2248

(D) The board of nursing may adopt rules, in accordance 2249
with Chapter 119. of the Revised Code, that establish standards 2250
and procedures to be followed by an advanced practice registered 2251
nurse or certified midwife regarding the review of patient 2252
information available through the drug database under division 2253

(A) (5) of section 4729.80 of the Revised Code. The rules shall 2254
be adopted in accordance with Chapter 119. of the Revised Code. 2255

(E) This section and any rules adopted under it do not 2256
apply if the state board of pharmacy no longer maintains the 2257
drug database. 2258

Sec. 4723.488. (A) Except as provided in division (B) of 2259
this section, in the case of a license holder who is seeking 2260
renewal of a license to practice nursing as an advanced practice 2261
registered nurse or a license to practice as a certified midwife 2262
and who prescribes opioid analgesics or benzodiazepines, as 2263
defined in section 3719.01 of the Revised Code, the holder shall 2264
certify to the board whether the holder has been granted access 2265
to the drug database established and maintained by the state 2266
board of pharmacy pursuant to section 4729.75 of the Revised 2267
Code. 2268

(B) The requirement in division (A) of this section does 2269
not apply if any of the following is the case: 2270

(1) The state board of pharmacy notifies the board of 2271
nursing pursuant to section 4729.861 of the Revised Code that 2272
the license holder has been restricted from obtaining further 2273
information from the drug database. 2274

(2) The state board of pharmacy no longer maintains the 2275
drug database. 2276

(3) The license holder does not practice nursing as an 2277
advanced practice registered nurse or certified midwife in this 2278
state. 2279

(C) If a license holder certifies to the board of nursing 2280
that the holder has been granted access to the drug database and 2281
the board finds through an audit or other means that the holder 2282

has not been granted access, the board may take action under 2283
section 4723.28 of the Revised Code. 2284

Sec. 4723.4810. (A) (1) Notwithstanding any conflicting 2285
provision of this chapter or rule adopted by the board of 2286
nursing, a clinical nurse specialist, certified nurse-midwife, 2287
~~or certified nurse practitioner, who holds a license to practice~~ 2288
~~nursing as an advanced practice registered nurse issued under~~ 2289
~~section 4723.42 of the Revised Code~~ or certified midwife may 2290
issue a prescription for or personally furnish a complete or 2291
partial supply of a drug to treat chlamydia, gonorrhea, or 2292
trichomoniasis, without having examined the individual for whom 2293
the drug is intended, if all of the following conditions are 2294
met: 2295

(a) The individual is a sexual partner of the nurse's or 2296
certified midwife's patient. 2297

(b) The patient has been diagnosed with chlamydia, 2298
gonorrhea, or trichomoniasis. 2299

(c) The patient reports to the nurse or certified midwife 2300
that the individual is unable or unlikely to be evaluated or 2301
treated by a health professional. 2302

(2) A prescription issued under this section shall include 2303
the individual's name and address, if known. If the nurse or 2304
certified midwife is unable to obtain the individual's name and 2305
address, the prescription shall include the patient's name and 2306
address and the words "expedited partner therapy" or the letters 2307
"EPT." 2308

(3) A nurse or certified midwife may prescribe or 2309
personally furnish a drug under this section for not more than a 2310
total of two individuals who are sexual partners of the nurse's_ 2311

<u>or certified midwife's</u> patient.	2312
(B) For each drug prescribed or personally furnished under this section, the nurse <u>or certified midwife</u> shall do all of the following:	2313 2314 2315
(1) Provide the patient with information concerning the drug for the purpose of sharing the information with the individual, including directions for use of the drug and any side effects, adverse reactions, or known contraindications associated with the drug;	2316 2317 2318 2319 2320
(2) Recommend to the patient that the individual seek treatment from a health professional;	2321 2322
(3) Document all of the following in the patient's record:	2323
(a) The name of the drug prescribed or furnished and its dosage;	2324 2325
(b) That information concerning the drug was provided to the patient for the purpose of sharing the information with the individual;	2326 2327 2328
(c) If known, any adverse reactions the individual experiences from treatment with the drug.	2329 2330
(C) A nurse <u>or certified midwife</u> who prescribes or personally furnishes a drug under this section may contact the individual for whom the drug is intended.	2331 2332 2333
(1) If the nurse <u>or certified midwife</u> contacts the individual, the nurse <u>or certified midwife</u> shall do all of the following:	2334 2335 2336
(a) Inform the individual that the individual may have been exposed to chlamydia, gonorrhea, or trichomoniasis;	2337 2338

(b) Encourage the individual to seek treatment from a health professional;	2339 2340
(c) Explain the treatment options available to the individual, including treatment with a prescription drug, directions for use of the drug, and any side effects, adverse reactions, or known contraindications associated with the drug;	2341 2342 2343 2344
(d) Document in the patient's record that the nurse <u>or certified midwife</u> contacted the individual.	2345 2346
(2) If the nurse <u>or certified midwife</u> does not contact the individual, the nurse <u>or certified midwife</u> shall document that fact in the patient's record.	2347 2348 2349
(D) A nurse <u>or certified midwife</u> who in good faith prescribes or personally furnishes a drug under this section is not liable for or subject to any of the following:	2350 2351 2352
(1) Damages in any civil action;	2353
(2) Prosecution in any criminal proceeding;	2354
(3) Professional disciplinary action.	2355
Sec. 4723.4811. (A) (1) Subject to division (A) (2) of this section, and notwithstanding any provision of this chapter or rule adopted by the board of nursing, a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner licensed as an advanced practice registered nurse under Chapter 4723. of the Revised Code, <u>or certified midwife</u> may do either of the following without having examined an individual to whom glucagon may be administered:	2356 2357 2358 2359 2360 2361 2362 2363
(a) Personally furnish a supply of injectable or nasally administered glucagon for use in accordance with sections 3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5180.262	2364 2365 2366

of the Revised Code; 2367

(b) Issue a prescription for injectable or nasally 2368
administered glucagon for use in accordance with sections 2369
3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5180.262 2370
of the Revised Code. 2371

(2) Injectable or nasally administered glucagon personally 2372
furnished or prescribed under division (A)(1) of this section 2373
must be furnished or prescribed in such a manner that it may be 2374
administered only in a manufactured dosage form. 2375

(B) A nurse or certified midwife who acts in good faith in 2376
accordance with this section is not liable for or subject to any 2377
of the following for any action or omission of an entity to 2378
which injectable or nasally administered glucagon is furnished 2379
or a prescription is issued: damages in any civil action, 2380
prosecution in any criminal proceeding, or professional 2381
disciplinary action. 2382

Sec. 4723.50. (A) As used in this section: 2383

(1) "Controlled substance" has the same meaning as in 2384
section 3719.01 of the Revised Code. 2385

(2) "Medication-assisted treatment" has the same meaning 2386
as in section 340.01 of the Revised Code. 2387

(B) In accordance with Chapter 119. of the Revised Code, 2388
the board of nursing shall adopt rules as necessary to implement 2389
the provisions of this chapter pertaining to the authority of 2390
~~advanced practice registered nurses who are designated as~~ 2391
clinical nurse specialists, certified nurse-midwives, ~~and~~ 2392
certified nurse practitioners, and certified midwives to 2393
prescribe and furnish drugs and therapeutic devices. 2394

The board shall adopt rules establishing an exclusionary formulary. The exclusionary formulary shall permit, in a manner consistent with section 4723.481 of the Revised Code, the prescribing of controlled substances, including drugs that contain buprenorphine used in medication-assisted treatment and both oral and long-acting opioid antagonists. The formulary shall not permit the prescribing or furnishing of any of the following:

(1) A drug or device to perform or induce an abortion;

(2) A drug or device prohibited by federal or state law.

(C) In addition to the rules described in division (B) of this section, the board shall adopt rules under this section that do the following:

(1) Establish standards for board approval of the course of study in advanced pharmacology and related topics required by ~~section~~ sections 4723.482 and 4723.551 of the Revised Code;

(2) Establish requirements for board approval of the two-hour course of instruction in the laws of this state as required under division (C)(1) of section 4723.482 of the Revised Code;

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

(a) Quality assurance standards;

(b) Standards for periodic review by a collaborating physician or podiatrist of the records of patients treated by

the clinical nurse specialist, certified nurse-midwife, ~~or~~ 2423
certified nurse practitioner, or certified midwife; 2424

(c) Acceptable travel time between the location at which 2425
the clinical nurse specialist, certified nurse-midwife, ~~or~~ 2426
certified nurse practitioner, or certified midwife is engaging 2427
in the prescribing components of the nurse's practice and the 2428
location of the nurse's or certified midwife's collaborating 2429
physician or podiatrist. 2430

Sec. 4723.53. As used in sections 4723.43 and 4723.53 to 2431
4723.60 of the Revised Code: 2432

(A) "Accreditation commission for midwifery education" 2433
means the organization known by that name or its successor 2434
organization. 2435

(B) "American college of nurse-midwives" means the 2436
organization known by that name or its successor organization. 2437

(C) "American midwifery certification board" means the 2438
organization known by that name or its successor organization. 2439

Sec. 4723.54. (A) Except as provided in division (B) of 2440
this section, no individual shall knowingly practice as a 2441
certified midwife unless the individual holds a current, valid 2442
license to practice as a certified midwife issued under section 2443
4723.56 of the Revised Code. 2444

(B) Division (A) of this section does not apply to any of 2445
the following: 2446

(1) A physician authorized under Chapter 4731. of the 2447
Revised Code to practice medicine and surgery, osteopathic 2448
medicine and surgery, or podiatric medicine and surgery; 2449

(2) A physician assistant authorized under Chapter 4730. 2450

<u>of the Revised Code to practice as a physician assistant;</u>	2451
<u>(3) A registered nurse, advanced practice registered nurse, or licensed practical nurse authorized under this chapter to practice nursing as a registered nurse, advanced practice registered nurse, or licensed practical nurse;</u>	2452 2453 2454 2455
<u>(4) A licensed midwife;</u>	2456
<u>(5) A traditional midwife;</u>	2457
<u>(6) A student who is participating in a midwifery education program accredited by the accreditation commission for midwifery education and who provides midwifery services under the auspices of the program and under the supervision of a certified midwife serving for the program as a faculty member, instructor, teaching assistant, or preceptor.</u>	2458 2459 2460 2461 2462 2463
<u>Sec. 4723.55. (A) An individual seeking a license to practice as a certified midwife shall file with the board of nursing an application in a manner prescribed by the board. The application shall include all the information the board considers necessary to process the application, including evidence satisfactory to the board that the applicant meets the requirements specified in division (B) of this section.</u>	2464 2465 2466 2467 2468 2469 2470
<u>(B) To be eligible to receive a license to practice as a certified midwife, an applicant shall demonstrate to the board that the applicant meets all of the following requirements:</u>	2471 2472 2473
<u>(1) Is at least eighteen years of age;</u>	2474
<u>(2) Has attained a master's degree or higher;</u>	2475
<u>(3) Has graduated from a midwifery education program accredited by the accreditation commission for midwifery education;</u>	2476 2477 2478

<u>(4) Is certified by the American midwifery certification</u>	2479
<u>board;</u>	2480
<u>(5) Is certified in neonatal and adult cardiopulmonary</u>	2481
<u>resuscitation;</u>	2482
<u>(6) Has successfully completed the course of study in</u>	2483
<u>advanced pharmacology required by section 4723.551 of the</u>	2484
<u>Revised Code.</u>	2485
<u>(C) The board shall review all applications received under</u>	2486
<u>this section. After receiving an application it considers</u>	2487
<u>complete, the board shall determine whether the applicant meets</u>	2488
<u>the requirements for a license to practice as a certified</u>	2489
<u>midwife.</u>	2490
Sec. 4723.551. <u>(A) An applicant for a license to practice</u>	2491
<u>as a certified midwife shall include with the application</u>	2492
<u>submitted under section 4723.55 of the Revised Code evidence of</u>	2493
<u>successfully completing the course of study in advanced</u>	2494
<u>pharmacology and related topics in accordance with the</u>	2495
<u>requirements specified in division (B) of this section.</u>	2496
<u>(B) With respect to the course of study in advanced</u>	2497
<u>pharmacology and related topics, all of the following</u>	2498
<u>requirements apply:</u>	2499
<u>(1) The course of study shall be completed not more than</u>	2500
<u>five years before the application is filed.</u>	2501
<u>(2) The course of study shall include at least forty-five</u>	2502
<u>contact hours.</u>	2503
<u>(3) The course of study shall meet the requirements to be</u>	2504
<u>approved by the board in accordance with standards established</u>	2505
<u>in rules adopted under section 4723.50 of the Revised Code.</u>	2506

<u>(4) The content of the course of study shall be specific</u>	2507
<u>to midwifery.</u>	2508
<u>(5) The instruction provided in the course of study shall</u>	2509
<u>include all of the following:</u>	2510
<u>(a) A minimum of thirty-six contact hours of instruction</u>	2511
<u>in advanced pharmacology that includes pharmacokinetic</u>	2512
<u>principles and clinical application and the use of drugs and</u>	2513
<u>therapeutic devices in the prevention of illness and maintenance</u>	2514
<u>of health;</u>	2515
<u>(b) Instruction in the fiscal and ethical implications of</u>	2516
<u>prescribing drugs and therapeutic devices;</u>	2517
<u>(c) Instruction in the state and federal laws that apply</u>	2518
<u>to the authority to prescribe;</u>	2519
<u>(d) Instruction that is specific to schedule II controlled</u>	2520
<u>substances, including instruction in all of the following:</u>	2521
<u>(i) Indications for the use of schedule II controlled</u>	2522
<u>substances in drug therapies;</u>	2523
<u>(ii) The most recent guidelines for pain management</u>	2524
<u>therapies, as established by state and national organizations</u>	2525
<u>such as the Ohio pain initiative and the American pain society;</u>	2526
<u>(iii) Fiscal and ethical implications of prescribing</u>	2527
<u>schedule II controlled substances;</u>	2528
<u>(iv) State and federal laws that apply to the authority to</u>	2529
<u>prescribe schedule II controlled substances;</u>	2530
<u>(v) Prevention of abuse and diversion of schedule II</u>	2531
<u>controlled substances, including identification of the risk of</u>	2532
<u>abuse and diversion, recognition of abuse and diversion, types</u>	2533

of assistance available for prevention of abuse and diversion, 2534
and methods of establishing safeguards against abuse and 2535
diversion. 2536

Sec. 4723.56. (A) If the board of nursing determines under 2537
section 4723.55 of the Revised Code that an applicant meets the 2538
requirements for a license to practice as a certified midwife, 2539
the secretary of the board shall issue the license to the 2540
applicant. 2541

(B) Each license shall be valid for a two-year period 2542
unless revoked or suspended, shall expire on the date that is 2543
two years after the date of issuance, and may be renewed for 2544
additional two-year periods in accordance with rules adopted 2545
under section 4723.59 of the Revised Code. 2546

(C) To renew a license to practice as a certified midwife, 2547
an applicant for renewal shall demonstrate both of the following 2548
to the board: 2549

(1) That the applicant has maintained certification in 2550
neonatal and adult cardiopulmonary resuscitation; 2551

(2) That the applicant has satisfied the continuing 2552
education requirements of the American midwifery certification 2553
board. 2554

Sec. 4723.57. (A) An individual who holds a current, valid 2555
license to practice as a certified midwife may, in collaboration 2556
with one or more physicians, engage in one or more of the 2557
following activities: 2558

(1) Providing primary health care services for women from 2559
adolescence and beyond menopause, including the independent 2560
provision of gynecologic and family planning services, 2561
preconception care, and care during pregnancy, childbirth, and 2562

<u>the postpartum period;</u>	2563
<u>(2) Attending births in hospitals, homes, medical offices,</u>	2564
<u>and freestanding birthing centers;</u>	2565
<u>(3) Providing care for normal newborns during the period</u>	2566
<u>consistent with the scope of practice for certified nurse-</u>	2567
<u>midwives established by the American college of nurse-midwives;</u>	2568
<u>(4) Providing initial and ongoing comprehensive</u>	2569
<u>assessment, diagnosis, and treatment;</u>	2570
<u>(5) Conducting physical examinations;</u>	2571
<u>(6) Ordering and interpreting laboratory and diagnostic</u>	2572
<u>tests;</u>	2573
<u>(7) Administering medications, treatments, and executing</u>	2574
<u>regimens authorized by an individual who is authorized to</u>	2575
<u>practice in this state and is acting within the course of the</u>	2576
<u>individual's professional practice;</u>	2577
<u>(8) Providing care that includes health promotion, disease</u>	2578
<u>prevention, and individualized wellness education and</u>	2579
<u>counseling.</u>	2580
<u>(B) When engaging in any of the activities permitted under</u>	2581
<u>this section, a certified midwife shall maintain appropriate</u>	2582
<u>medical records regarding patient history, treatment, and</u>	2583
<u>outcomes.</u>	2584
Sec. 4723.58. <u>(A) This section establishes the process by</u>	2585
<u>which a certified nurse-midwife or certified midwife obtains a</u>	2586
<u>patient's consent to treatment authorized by section 4723.43 or</u>	2587
<u>4723.57 of the Revised Code, but only when the certified nurse-</u>	2588
<u>midwife or certified midwife seeks to provide the treatment in a</u>	2589
<u>setting other than a hospital or facility.</u>	2590

(B) The following information shall be exchanged in 2591
writing between a certified nurse-midwife or certified midwife 2592
and patient when obtaining consent to treatment as described in 2593
division (A) of this section: 2594

(1) The name and license number of the certified nurse- 2595
midwife or certified midwife; 2596

(2) The patient's name, address, telephone number, and 2597
primary care provider, if the patient has one; 2598

(3) A description of the certified nurse-midwife's or 2599
certified midwife's education, training, and experience in 2600
nurse-midwifery or midwifery; 2601

(4) The certified nurse-midwife's or certified midwife's 2602
practice philosophy; 2603

(5) A promise to provide the patient, upon request, with 2604
separate documents describing the rules governing the practice 2605
of a certified nurse-midwife or certified midwife, including a 2606
list of conditions indicating the need for consultation, 2607
referral, transfer, or mandatory transfer and the certified 2608
nurse-midwife's or certified midwife's personal written practice 2609
guidelines; 2610

(6) A written plan for medical consultation and transfer 2611
of care; 2612

(7) A description of any hospital care and procedures that 2613
may be necessary in the event of an emergency transfer or care; 2614

(8) A description of the services provided to the patient 2615
by the certified nurse-midwife or certified midwife; 2616

(9) That the certified nurse-midwife or certified midwife 2617
holds a current, valid license to practice issued under this 2618

<u>chapter;</u>	2619
<u>(10) The availability of a grievance process;</u>	2620
<u>(11) Whether the certified nurse-midwife or certified midwife is covered by professional liability insurance;</u>	2621 2622
<u>(12) Any other information required in rules adopted by the board.</u>	2623 2624
<u>(C) Once the required information has been exchanged and if the patient consents to treatment, the patient and certified nurse-midwife or certified midwife shall sign a written document to indicate as such. The certified nurse-midwife or certified midwife shall retain a copy of the document for at least four years from the date on which the document was signed.</u>	2625 2626 2627 2628 2629 2630
<u>Sec. 4723.581. (A) The board of nursing shall adopt rules establishing the circumstances in which a certified nurse-midwife or certified midwife shall be prohibited from attending a home birth, which may include a high-risk pregnancy. In adopting the rules, the board shall allow a certified nurse-midwife or certified midwife to attend any of the following as a home birth only if the conditions described in division (B) of this section are satisfied: a vaginal birth after cesarean, birth of twins, or breech birth.</u>	2631 2632 2633 2634 2635 2636 2637 2638 2639
<u>(B) In the event of a home birth described in division (A) of this section, a certified nurse-midwife or certified midwife may attend the birth only if all of the following conditions are satisfied:</u>	2640 2641 2642 2643
<u>(1) In addition to the informed consent required under section 4723.58 of the Revised Code, the certified nurse-midwife or certified midwife obtains the patient's written informed consent for the vaginal birth after cesarean, birth of twins, or</u>	2644 2645 2646 2647

breech birth, including a description of risks associated with 2648
the procedure. 2649

(2) The certified nurse-midwife or certified midwife 2650
consults with a physician about the patient and together with 2651
the physician determines whether referral is appropriate for the 2652
patient. 2653

If a referral is determined to be appropriate and the 2654
patient consents to the referral, the certified nurse-midwife or 2655
certified midwife shall refer the patient to the physician. If 2656
the patient refuses the referral, the certified nurse-midwife or 2657
certified midwife shall document the refusal and may continue to 2658
provide care to the patient, including attending the vaginal 2659
birth after cesarean, birth of twins, or breech birth at home. 2660

(3) The certified nurse-midwife or certified midwife 2661
satisfies any other conditions required in rules adopted by the 2662
board of nursing. 2663

(C) In adopting rules under this section, the board of 2664
nursing shall do both of the following: 2665

(1) Consider any relevant peer-reviewed medical 2666
literature; 2667

(2) Specify the content and format of the document to be 2668
used when obtaining informed consent as described in this 2669
section. 2670

Sec. 4723.582. (A) As used in this section and section 2671
4723.583 of the Revised Code, "emergency medical service," 2672
"emergency medical service personnel," and "emergency medical 2673
service organization" have the same meanings as in section 2674
4765.01 of the Revised Code. 2675

(B) For any pregnancy or childbirth in which a certified nurse-midwife or certified midwife provides care and a home birth is planned, both of the following apply: 2676
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(1) The certified nurse-midwife or certified midwife shall create an individualized transfer of care plan with each patient. 2679
2680
2681

(2) The certified nurse-midwife or certified midwife shall assess the status of the patient, fetus, and newborn throughout the maternity care cycle and shall determine when or if a transfer to a hospital is necessary. 2682
2683
2684
2685

(C) Each individualized transfer of care plan shall contain all of the following: 2686
2687

(1) The name and location of geographically adjacent hospitals that are appropriately equipped to provide emergency care, obstetrical care, and newborn care; 2688
2689
2690

(2) The approximate travel time to each hospital; 2691

(3) A list of the modes of transport services available, including an emergency medical service organization available by calling 9-1-1; 2692
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(4) The requirements for activating each mode of transportation; 2695
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(5) The mechanism by which medical records and other information concerning the patient may be rapidly transmitted to each hospital; 2697
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(6) Confirmation that the certified nurse-midwife or certified midwife has recommended that the patient pre-register with the hospital closest to the patient's home that is appropriately equipped to provide emergency care, obstetrical 2700
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<u>care, and newborn care;</u>	2704
<u>(7) Contact information for either a health care provider</u>	2705
<u>or practice group who has agreed in advance to accept patients</u>	2706
<u>in transfer, or a hospital's preferred method of accessing care</u>	2707
<u>by the hospital's designated provider on call;</u>	2708
<u>(8) Any other information required in rules adopted by the</u>	2709
<u>board of nursing.</u>	2710
<u>(D) When it becomes necessary to transfer a patient, a</u>	2711
<u>certified nurse-midwife or certified midwife shall notify the</u>	2712
<u>receiving provider or hospital of all of the following:</u>	2713
<u>(1) The incoming transfer;</u>	2714
<u>(2) The reason for the transfer;</u>	2715
<u>(3) A brief relevant clinical history;</u>	2716
<u>(4) The planned mode of transport;</u>	2717
<u>(5) The expected time of arrival;</u>	2718
<u>(6) Any other information required in rules adopted by the</u>	2719
<u>board.</u>	2720
<u>The certified nurse-midwife or certified midwife shall</u>	2721
<u>continue to provide routine or urgent care en route in</u>	2722
<u>coordination with any emergency medical services personnel or</u>	2723
<u>emergency medical service organization and shall address the</u>	2724
<u>psychosocial needs of the patient during the change of birth</u>	2725
<u>setting.</u>	2726
<u>(E) On arrival at the hospital, the certified nurse-</u>	2727
<u>midwife or certified midwife shall do all of the following:</u>	2728
<u>(1) Provide a verbal report that includes details on the</u>	2729
<u>patient's current health status and the need for urgent care;</u>	2730

(2) Provide a legible copy of relevant prenatal and labor 2731
medical records; 2732

(3) Transfer clinical responsibility to the receiving 2733
provider or hospital; 2734

(4) Satisfy any other requirement established in rules 2735
adopted by the board of nursing. 2736

If the patient chooses, the certified nurse-midwife or 2737
certified midwife may remain at the hospital to provide 2738
continuous support. The certified nurse-midwife or certified 2739
midwife also may continue to provide midwifery services, but 2740
only if the hospital has granted the certified nurse-midwife or 2741
certified midwife clinical privileges. Whenever possible, the 2742
patient and her newborn shall be together during the transfer 2743
and after admission to the hospital. 2744

Sec. 4723.583. Emergency medical service personnel or an 2745
emergency medical service organization, hospital, facility, 2746
physician, advanced practice registered nurse, or certified 2747
midwife that provides services or care following an adverse 2748
incident as defined in section 4723.584 of the Revised Code or 2749
during and after a transfer of care as described in section 2750
4723.582 of the Revised Code are not liable in damages in a tort 2751
or other civil action for injury or loss to person or property 2752
arising from the services or care, unless the services or care 2753
are provided in a manner that constitutes willful or wanton 2754
misconduct. 2755

Sec. 4723.584. (A) As used in this section, "adverse 2756
incident" means an incident over which a certified nurse-midwife 2757
or certified midwife could exercise control, that is associated 2758
with an attempted or completed birth in a setting or facility 2759

<u>other than a hospital, and that results in one or more of the</u>	2760
<u>following injuries or conditions:</u>	2761
<u>(1) A maternal death that occurs during delivery or within</u>	2762
<u>forty-two days after delivery;</u>	2763
<u>(2) The transfer of a maternal patient to a hospital</u>	2764
<u>intensive care unit;</u>	2765
<u>(3) A maternal patient experiencing hemorrhagic shock or</u>	2766
<u>requiring a transfusion of more than two units of blood or blood</u>	2767
<u>products;</u>	2768
<u>(4) A fetal or newborn death, including a stillbirth,</u>	2769
<u>associated with an obstetrical delivery;</u>	2770
<u>(5) A transfer of a newborn to a neonatal intensive care</u>	2771
<u>unit due to a traumatic physical or neurological birth injury,</u>	2772
<u>including any degree of a brachial plexus injury;</u>	2773
<u>(6) A transfer of a newborn to a neonatal intensive care</u>	2774
<u>unit within the first seventy-two hours after birth if the</u>	2775
<u>newborn remains in such unit for more than seventy-two hours;</u>	2776
<u>(7) Any other condition as determined by the board of</u>	2777
<u>nursing in rules adopted under section 4723.07 or 4723.59 of the</u>	2778
<u>Revised Code.</u>	2779
<u>(B) Beginning July 1, 2027, a certified nurse-midwife or</u>	2780
<u>certified midwife who attends a birth planned for a facility or</u>	2781
<u>setting other than a hospital must report any adverse incident,</u>	2782
<u>along with a medical summary of events, to the board of nursing</u>	2783
<u>within fifteen days after the adverse incident occurs.</u>	2784
<u>(C) Beginning July 1, 2027, each certified nurse-midwife</u>	2785
<u>or certified midwife shall report annually to the board the</u>	2786
<u>following information regarding cases in which the midwife</u>	2787

<u>provided services when the intended place of birth at the onset</u>	2788
<u>of care was in a facility or setting other than a hospital:</u>	2789
<u>(1) The total number of patients provided nurse-midwifery</u>	2790
<u>or certified midwifery services at the onset of care;</u>	2791
<u>(2) The number of live births attended;</u>	2792
<u>(3) The number of cases of fetal demise, newborn deaths,</u>	2793
<u>and maternal deaths attended as a certified nurse-midwife or</u>	2794
<u>certified midwife at the discovery of the demise or death;</u>	2795
<u>(4) The number, reason for, and outcome of each transport</u>	2796
<u>of a patient in the antepartum, intrapartum period, or immediate</u>	2797
<u>postpartum period;</u>	2798
<u>(5) A brief description of any complications resulting in</u>	2799
<u>the morbidity or mortality of a maternal patient or a newborn;</u>	2800
<u>(6) The planned delivery setting and the actual setting;</u>	2801
<u>(7) Any other information required in rules adopted by the</u>	2802
<u>department.</u>	2803
<u>(D) Beginning eighteen months after the effective date of</u>	2804
<u>this section, the board shall submit an annual report to the</u>	2805
<u>department of health that compiles all information submitted to</u>	2806
<u>the board pursuant to divisions (B) and (C) of this section in</u>	2807
<u>the preceding calendar year.</u>	2808
<u>(E) The department shall adopt rules to implement this</u>	2809
<u>section and shall develop a form to be used for the reporting</u>	2810
<u>required under divisions (B) and (C) of this section.</u>	2811
<u>Sec. 4723.59. (A) In addition to the rules described in</u>	2812
<u>section 4723.07 of the Revised Code, the board of nursing shall</u>	2813
<u>adopt rules establishing standards and procedures for the</u>	2814

licensure and regulation of certified midwives, including those 2815
establishing license application and renewal procedures. The 2816
rules shall be adopted in accordance with Chapter 119. of the 2817
Revised Code. 2818

(B) The board also may adopt, in accordance with Chapter 2819
119. of the Revised Code, any other rules it considers necessary 2820
to implement and administer sections 4723.53 to 4723.60 of the 2821
Revised Code. The rules may require the completion of a criminal 2822
records check and, in the case of a license to practice as a 2823
certified midwife issued by another jurisdiction, may provide 2824
for licensure by endorsement. 2825

Sec. 4723.60. Sections 4723.53 to 4723.59 of the Revised 2826
Code do not abridge, change, or limit in any way the right of a 2827
parent to deliver the parent's baby where, when, how, and with 2828
whom the parent chooses, regardless of the licensure 2829
requirements established in those sections. 2830

Sec. 4723.91. On receipt of a notice pursuant to section 2831
3123.43 of the Revised Code, the board of nursing shall comply 2832
with sections 3123.41 to 3123.50 of the Revised Code and any 2833
applicable rules adopted under section 3123.63 of the Revised 2834
Code with respect to a nursing license, certified midwife 2835
license, medication aide certificate, dialysis technician 2836
certificate, or community health worker certificate issued 2837
pursuant to this chapter. 2838

Sec. 4723.99. (A) Except as provided in division (B) or 2839
(C) of this section, whoever violates section 4723.03, 4723.44, 2840
4723.54, 4723.653, or 4723.73 of the Revised Code is guilty of a 2841
felony of the fifth degree on a first offense and a felony of 2842
the fourth degree on each subsequent offense. 2843

(B) Each of the following is guilty of a minor
misdemeanor: 2844
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(1) A registered nurse, advanced practice registered
nurse, or licensed practical nurse who violates division (A),
(B), (C), or (D) of section 4723.03 of the Revised Code by
reason of a license to practice nursing that has lapsed for
failure to renew or by practicing nursing after a license has
been classified as inactive; 2846
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(2) A medication aide who violates section 4723.653 of the
Revised Code by reason of a medication aide certificate that has
lapsed for failure to renew or by administering medication as a
medication aide after a certificate has been classified as
inactive. 2852
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(C) Whoever violates division (H) of section 4723.03 of
the Revised Code is guilty of a misdemeanor of the first degree. 2857
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Sec. 4724.01. As used in this chapter: 2859

(A) "Certified international midwife" means an individual
who is certified by the international registry of midwives but
is not a licensed midwife. 2860
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(B) "Certified professional midwife" means an individual
who is certified by the north American registry of midwives but
is not a licensed midwife. 2863
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(C) "International registry of midwives" means the
organization known by that name or its successor organization. 2866
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(D) "Licensed midwife" means an individual holding a
license to practice issued under section 4724.04 of the Revised
Code. 2868
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(E) "Midwifery education accreditation council" means the 2871

organization known by that name or its successor organization. 2872

(F) "North American registry of midwives" means the 2873
organization known by that name or its successor organization. 2874

(G) "Physician" means an individual authorized under 2875
Chapter 4731. of the Revised Code to practice medicine and 2876
surgery or osteopathic medicine and surgery. 2877

(H) "Traditional midwife" means an individual who provides 2878
traditional midwifery services pursuant to sections 4724.14 and 2879
4724.15 of the Revised Code, does not hold a license to practice 2880
as a licensed midwife issued under this chapter, and does not 2881
hold a license to practice as a certified nurse-midwife or 2882
certified midwife issued under Chapter 4723. of the Revised 2883
Code. 2884

Sec. 4724.02. (A) Except as provided in division (B) of 2885
this section, no individual shall knowingly practice as a 2886
licensed midwife unless the individual holds a current, valid 2887
license to practice issued under section 4724.04 of the Revised 2888
Code. 2889

(B) Division (A) of this section does not apply to any of 2890
the following: 2891

(1) A physician; 2892

(2) A physician assistant authorized under Chapter 4730. 2893
of the Revised Code to practice as a physician assistant; 2894

(3) A registered nurse, advanced practice registered 2895
nurse, or licensed practical nurse authorized under Chapter 2896
4723. of the Revised Code to practice nursing as a registered 2897
nurse, advanced practice registered nurse, or licensed practical 2898
nurse; 2899

- (4) A certified midwife authorized under Chapter 4723. of 2900
the Revised Code to practice as a certified midwife; 2901
- (5) A student who is participating in a professional 2902
midwifery education program and who provides midwifery services 2903
under the auspices of the program and under the supervision of a 2904
licensed midwife serving for the program as a faculty member, 2905
instructor, teaching assistant, or preceptor; 2906
- (6) An individual who is participating in a professional 2907
midwifery apprenticeship and who provides midwifery services as 2908
part of the apprenticeship program and under the supervision of 2909
a licensed midwife serving for the program as an instructor, 2910
teaching assistant, or preceptor; 2911
- (7) An individual who provides midwifery services without 2912
a license while engaging in good faith in the practice of the 2913
religious tenets of any church or in any religious act; 2914
- (8) An individual who is not engaged in the practice of 2915
the religious tenets of any church or in any religious act but 2916
who provides midwifery services without a license to others 2917
engaging in good faith in the practice of the religious tenets 2918
of any church or in any religious act; 2919
- (9) An individual who is a member of a Native American 2920
community and provides midwifery services without a license to 2921
another member of the community; 2922
- (10) A traditional midwife; 2923
- (11) An individual who is participating in a midwifery 2924
apprenticeship under the supervision of a traditional midwife 2925
and who provides midwifery services as part of the 2926
apprenticeship program under the supervision of a traditional 2927
midwife; 2928

(12) A certified professional midwife or certified international midwife, but only if the certified professional midwife or certified international midwife does not, as a part of the midwife's practice, obtain or administer drugs or perform surgical suturing. 2929
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(C) No individual shall knowingly use the title "licensed midwife" or any other title implying that the individual is a licensed midwife unless the individual holds a current, valid license to practice issued under section 4724.04 of the Revised Code. 2934
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Sec. 4724.03. (A) An individual seeking a license to practice as a licensed midwife shall file with the department of commerce an application in a manner prescribed by the department. The application shall include all the information the department considers necessary to process the application, including evidence satisfactory to the department that the applicant meets the requirements specified in division (B)(1) or (2) of this section. 2939
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(B) (1) To be eligible to receive a license to practice as a licensed midwife, an applicant shall demonstrate to the department that the applicant meets all of the following requirements: 2947
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(a) Is at least eighteen years of age; 2951

(b) Has attained a high school degree or equivalent; 2952

(c) Is certified by the north American registry of midwives, international registry of midwives, or another certifying organization approved by the department in rules adopted under section 4724.11 of the Revised Code; 2953
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(d) Is certified in neonatal and adult cardiopulmonary 2957

resuscitation; 2958

(e) Has successfully completed a course of study in breech 2959
births approved by the department in rules adopted under section 2960
4724.11 of the Revised Code; 2961

(f) Has successfully completed a course of study in 2962
pharmacology approved by the department in rules adopted under 2963
section 4724.11 of the Revised Code. 2964

(2) In lieu of meeting the requirements described in 2965
division (B) (1) (c) of this section, an applicant may demonstrate 2966
either of the following: 2967

(a) That the applicant holds a current, valid license to 2968
practice as a licensed midwife issued by another state and the 2969
department has determined that the other state's requirements 2970
for licensure are substantially similar to those described in 2971
division (B) (1) of this section; 2972

(b) That the applicant is certified by the north American 2973
registry of midwives and holds a midwifery bridge certificate. 2974

(C) The department shall review all applications received 2975
under this section. After receiving an application it considers 2976
complete, the department shall determine whether the applicant 2977
meets the requirements for a license to practice as a licensed 2978
midwife. 2979

Sec. 4724.04. (A) If the department of commerce determines 2980
under section 4724.03 of the Revised Code that an applicant 2981
meets the requirements for a license to practice as a licensed 2982
midwife, the department shall issue the license to the 2983
applicant. 2984

(B) Each license shall be valid for a two-year period 2985

unless revoked or suspended, shall expire on the date that is 2986
two years after the date of issuance, and may be renewed for 2987
additional two-year periods in accordance with rules adopted 2988
under section 4724.11 of the Revised Code. 2989

(C) To renew a license to practice as a licensed midwife, 2990
an applicant for renewal shall demonstrate both of the following 2991
to the department: 2992

(1) That the applicant has maintained certification in 2993
neonatal and adult cardiopulmonary resuscitation; 2994

(2) That the applicant has maintained certification with 2995
the north American registry of midwives, international registry 2996
of midwives, or another certifying organization approved by the 2997
department in rules adopted under section 4724.11 of the Revised 2998
Code. 2999

(D) In the event a license issued under this section is 3000
not renewed and is therefore expired or inactive, the department 3001
shall reinstate or restore the license if the individual seeking 3002
reinstatement or restoration satisfies the conditions specified 3003
in rules adopted under section 4724.11 of the Revised Code. 3004

Sec. 4724.05. (A) An individual who holds a current, valid 3005
license to practice as a licensed midwife may engage in one or 3006
more of the following activities during the antepartum, 3007
intrapartum, postpartum, and newborn period as part of the scope 3008
of practice for a licensed midwife: 3009

(1) Offering care, education, counseling, and support to 3010
women and newborns during pregnancy, birth, and the postpartum 3011
period; 3012

(2) Attending births in hospitals, homes, medical offices, 3013
and freestanding birthing centers; 3014

<u>(3) Providing ongoing and routine prenatal care throughout pregnancy and hands on care during labor, birth, and the immediate postpartum period;</u>	3015
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<u>(4) Providing maternal and newborn assessment for the six- to eight-week period following delivery;</u>	3018
	3019
<u>(5) Providing initial and ongoing comprehensive assessment, diagnosis, and treatment;</u>	3020
	3021
<u>(6) Recognizing abnormal or dangerous conditions requiring consultations with or referrals to other licensed health care professionals;</u>	3022
	3023
	3024
<u>(7) Conducting maternal and newborn physical examinations;</u>	3025
<u>(8) Ordering and interpreting laboratory and diagnostic tests without a physician's order.</u>	3026
	3027
<u>(B) An individual who holds a current, valid license to practice as a licensed midwife shall not engage in any of the following activities:</u>	3028
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<u>(1) Administering cytotec or oxytocics, including pitocin and methergine, except when indicated during the postpartum period;</u>	3031
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<u>(2) Using forceps or vacuum extraction to assist with birth;</u>	3034
	3035
<u>(3) Performing any operative procedures or surgical repairs other than the following: artificial rupture of membranes; episiotomies; first or second degree perineal, vaginal, or labial repairs; clamping or cutting the umbilical cord; or frenotomies.</u>	3036
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<u>(C) For the purpose of engaging in one or more of the</u>	3041

activities permitted under division (A) of this section, the 3042
scope of practice for a licensed midwife shall include the 3043
ability to purchase, obtain, possess, and administer the 3044
following: 3045

(1) Subject to division (B) of this section, an 3046
antihemorrhagic agent or device, including tranexamic acid, 3047
pitocin, oxytocin, misoprostol, and methergine; 3048

(2) Intravenous fluids to stabilize the laboring or 3049
postpartum patient or as necessary to administer another drug 3050
authorized by this division; 3051

(3) Neonatal injectable vitamin K; 3052

(4) Newborn antibiotic eye prophylaxis; 3053

(5) Oxygen; 3054

(6) Intravenous antibiotics for group B streptococcal 3055
prophylaxis; 3056

(7) Rho (D) immune globulin; 3057

(8) Local anesthesia; 3058

(9) Epinephrine; 3059

(10) A drug prescribed for the patient by a prescriber. 3060

A licensed midwife also may obtain, without a physician's 3061
order, one or more supplies necessary to administer any of the 3062
drugs described in division (C) of this section. 3063

(D) This section does not authorize a licensed midwife to 3064
prescribe, personally furnish, obtain, or administer either of 3065
the following: 3066

(1) Any controlled substance as defined in section 3719.01 3067

of the Revised Code; 3068

(2) A drug or device to perform or induce an abortion. 3069

(E) When engaging in any of the activities permitted under 3070
this section, a licensed midwife shall maintain appropriate 3071
medical records regarding patient history, treatment, and 3072
outcomes. 3073

Sec. 4724.06. (A) The department of commerce shall limit, 3074
revoke, or suspend an individual's license to practice as a 3075
licensed midwife, refuse to issue a license to an applicant, 3076
refuse to renew a license, refuse to reinstate or restore a 3077
license, or reprimand or place on probation the holder of a 3078
license for any of the reasons specified in rules adopted under 3079
section 4724.11 of the Revised Code. 3080

(B) The department may limit, revoke, or suspend an 3081
individual's license to practice as a licensed midwife, refuse 3082
to issue a license to an applicant, refuse to renew a license, 3083
refuse to reinstate or restore a license, or reprimand or place 3084
on probation the holder of a license on the recommendation of 3085
the licensed midwifery advisory council pursuant to section 3086
4724.13 of the Revised Code. 3087

Sec. 4724.07. (A) This section establishes the process by 3088
which a licensed midwife obtains a patient's consent to 3089
treatment authorized by section 4724.05 of the Revised Code, 3090
including attending a home birth or providing care during a 3091
high-risk pregnancy. 3092

(B) The following information shall be exchanged in 3093
writing between a licensed midwife and patient when obtaining 3094
consent to treatment as described in division (A) of this 3095
section: 3096

<u>(1) The name and license number of the licensed midwife;</u>	3097
<u>(2) The patient's name, address, telephone number, and</u>	3098
<u>primary care provider, if the patient has one;</u>	3099
<u>(3) A description of the licensed midwife's education,</u>	3100
<u>training, and experience in midwifery;</u>	3101
<u>(4) The licensed midwife's practice philosophy;</u>	3102
<u>(5) A promise to provide the patient, upon request, with</u>	3103
<u>separate documents describing the rules governing the practice</u>	3104
<u>of midwifery, including a list of conditions indicating the need</u>	3105
<u>for consultation, referral, transfer, or mandatory transfer and</u>	3106
<u>the licensed midwife's personal written practice guidelines;</u>	3107
<u>(6) A written plan for medical consultation and transfer</u>	3108
<u>of care;</u>	3109
<u>(7) A description of any hospital care and procedures that</u>	3110
<u>may be necessary in the event of an emergency transfer or care;</u>	3111
<u>(8) A description of the services provided to the patient</u>	3112
<u>by the licensed midwife;</u>	3113
<u>(9) That the licensed midwife holds a current, valid</u>	3114
<u>license to practice issued under this chapter;</u>	3115
<u>(10) The availability of a grievance process;</u>	3116
<u>(11) Whether the licensed midwife is covered by</u>	3117
<u>professional liability insurance;</u>	3118
<u>(12) Any other information required in rules adopted by</u>	3119
<u>the department.</u>	3120
<u>(C) Once the required information has been exchanged and</u>	3121
<u>if the patient consents to treatment, the patient and licensed</u>	3122
<u>midwife shall sign a written document to indicate as such. The</u>	3123

licensed midwife shall retain a copy of the document for at 3124
least four years from the date on which the document was signed. 3125

Sec. 4724.08. (A) The department of commerce shall adopt 3126
rules establishing the circumstances in which a licensed midwife 3127
shall be prohibited from attending a home birth, which may 3128
include a high-risk pregnancy. In adopting the rules, the 3129
department shall allow a licensed midwife to attend a vaginal 3130
birth after cesarean, birth of twins, or breech birth as a home 3131
birth if the conditions described in division (B) of this 3132
section are satisfied. 3133

(B) In the event of a home birth described in division (A) 3134
of this section, a licensed midwife may attend the birth only if 3135
all of the following conditions are satisfied: 3136

(1) In addition to the informed consent required under 3137
section 4724.07 of the Revised Code, the licensed midwife 3138
obtains the patient's written informed consent for the vaginal 3139
birth after cesarean, birth of twins, or breech birth, including 3140
a description of risks associated with the procedure. 3141

(2) The licensed midwife consults with a physician, 3142
certified nurse-midwife, or certified midwife about the patient 3143
and together with the physician or midwife determines whether 3144
referral is appropriate for the patient. If a referral is 3145
determined to be appropriate and the patient consents to the 3146
referral, the licensed midwife shall refer the patient to the 3147
physician or provider. If the patient refuses the referral, the 3148
licensed midwife shall document the refusal and may continue to 3149
provide care to the patient, including attending the vaginal 3150
birth after cesarean, birth of twins, or breech birth. 3151

(3) The licensed midwife satisfies any other conditions 3152

required in rules adopted by the department. 3153

(C) In adopting rules under this section, the department 3154
shall do both of the following: 3155

(1) Adhere to the recommendations of the licensed 3156
midwifery advisory council and any relevant peer-reviewed 3157
medical literature; 3158

(2) Specify the content and format of the document to be 3159
used when obtaining informed consent as described in this 3160
section. 3161

Sec. 4724.09. (A) As used in this section and section 3162
4724.10 of the Revised Code, "emergency medical service," 3163
"emergency medical service personnel," and "emergency medical 3164
service organization" have the same meanings as in section 3165
4765.01 of the Revised Code. 3166

(B) For any pregnancy or childbirth in which a licensed 3167
midwife provides care and a home birth is planned, both of the 3168
following apply: 3169

(1) The licensed midwife shall create an individualized 3170
transfer of care plan with each patient. 3171

(2) The licensed midwife shall assess the status of the 3172
patient, fetus, and newborn throughout the maternity care cycle 3173
and shall determine when or if a transfer to a hospital is 3174
necessary. 3175

(C) Each individualized transfer of care plan shall 3176
contain all of the following: 3177

(1) The name and location of geographically adjacent 3178
hospitals that are appropriately equipped to provide emergency 3179
care, obstetrical care, and newborn care; 3180

<u>(2) The approximate travel time to each hospital;</u>	3181
<u>(3) A list of the modes of transport services available,</u>	3182
<u>including an emergency medical service organization available by</u>	3183
<u>calling 9-1-1;</u>	3184
<u>(4) The requirements for activating each mode of</u>	3185
<u>transportation;</u>	3186
<u>(5) The mechanism by which medical records and other</u>	3187
<u>information concerning the patient may be rapidly transmitted to</u>	3188
<u>each hospital;</u>	3189
<u>(6) Confirmation that the licensed midwife has recommended</u>	3190
<u>that the patient pre-register with the hospital closest to the</u>	3191
<u>patient's home that is appropriately equipped to provide</u>	3192
<u>emergency care, obstetrical care, and newborn care;</u>	3193
<u>(7) Contact information for either a health care provider</u>	3194
<u>or practice group who has agreed in advance to accept patients</u>	3195
<u>in transfer, or a hospital's preferred method of accessing care</u>	3196
<u>by the hospital's designated provider on call;</u>	3197
<u>(8) Any other information required in rules adopted by the</u>	3198
<u>department of commerce.</u>	3199
<u>(D) When it becomes necessary to transfer a patient, a</u>	3200
<u>licensed midwife shall notify the receiving provider or hospital</u>	3201
<u>of all of the following:</u>	3202
<u>(1) The incoming transfer;</u>	3203
<u>(2) The reason for the transfer;</u>	3204
<u>(3) A brief relevant clinical history;</u>	3205
<u>(4) The planned mode of transport;</u>	3206
<u>(5) The expected time of arrival;</u>	3207

(6) Any other information required in rules adopted by the 3208
department. 3209

The licensed midwife may continue to provide routine or 3210
urgent care en route in coordination with any emergency medical 3211
services personnel or emergency medical service organization 3212
and, if continued care is provided, the licensed midwife shall 3213
address the psychosocial needs of the patient during the change 3214
of birth setting. 3215

(E) On arrival at the hospital, the licensed midwife shall 3216
do all of the following: 3217

(1) Provide a verbal report that includes details on the 3218
patient's current health status and the need for urgent care; 3219

(2) Provide a legible copy of relevant prenatal and labor 3220
medical records; 3221

(3) Transfer clinical responsibility to the receiving 3222
provider or hospital; 3223

(4) Satisfy any other requirement established in rules 3224
adopted by the department. 3225

If the patient chooses, the licensed midwife may remain at 3226
the hospital to provide continuous support. The licensed midwife 3227
also may continue to provide midwifery services, but only if the 3228
hospital has granted the licensed midwife clinical privileges. 3229
Whenever possible, the patient and her newborn shall be together 3230
during the transfer and after admission to the hospital. 3231

Sec. 4724.10. (A) As used in this section, "adverse 3232
incident" means an incident over which a licensed midwife could 3233
exercise control, that is associated with an attempted or 3234
completed birth in a setting or facility other than a hospital, 3235

<u>and that results in one or more of the following injuries or</u>	3236
<u>conditions:</u>	3237
<u>(1) A maternal death that occurs during delivery or within</u>	3238
<u>forty-two days after delivery;</u>	3239
<u>(2) The transfer of a maternal patient to a hospital</u>	3240
<u>intensive care unit;</u>	3241
<u>(3) A maternal patient experiencing hemorrhagic shock or</u>	3242
<u>requiring a transfusion of more than two units of blood or blood</u>	3243
<u>products;</u>	3244
<u>(4) A fetal or neonatal death, including a stillbirth,</u>	3245
<u>associated with an obstetrical delivery;</u>	3246
<u>(5) A transfer of a newborn to a neonatal intensive care</u>	3247
<u>unit due to a traumatic physical or neurological birth injury,</u>	3248
<u>including any degree of a brachial plexus injury;</u>	3249
<u>(6) A transfer of a newborn to a neonatal intensive care</u>	3250
<u>unit within the first seventy-two hours after birth if the</u>	3251
<u>newborn remains in such unit for more than seventy-two hours;</u>	3252
<u>(7) Any other condition as determined by the department of</u>	3253
<u>commerce in rules adopted under section 4724.11 of the Revised</u>	3254
<u>Code.</u>	3255
<u>(B) Beginning July 1, 2027, a licensed midwife who attends</u>	3256
<u>a birth planned for a facility or setting other than a hospital</u>	3257
<u>must report any adverse incident, along with a medical summary</u>	3258
<u>of events, to the licensed midwifery advisory council within</u>	3259
<u>fifteen days after the adverse incident occurs.</u>	3260
<u>(C) Beginning July 1, 2027, each licensed midwife shall</u>	3261
<u>report annually to the licensed midwifery advisory council the</u>	3262
<u>following information regarding cases in which the licensed</u>	3263

<u>midwife provided services when the intended place of birth at</u>	3264
<u>the onset of care was in a facility or setting other than a</u>	3265
<u>hospital:</u>	3266
<u>(1) The total number of patients provided licensed</u>	3267
<u>midwifery services at the onset of care;</u>	3268
<u>(2) The number of live births attended;</u>	3269
<u>(3) The number of cases of fetal demise, newborn deaths,</u>	3270
<u>and maternal deaths attended as a licensed midwife at the</u>	3271
<u>discovery of the demise or death;</u>	3272
<u>(4) The number, reason for, and outcome of each transport</u>	3273
<u>of a patient in the antepartum, intrapartum period, or immediate</u>	3274
<u>postpartum period;</u>	3275
<u>(5) A brief description of any complications resulting in</u>	3276
<u>the morbidity or mortality of a maternal patient or a newborn;</u>	3277
<u>(6) The planned delivery setting and the actual setting;</u>	3278
<u>(7) Any other information required in rules adopted by the</u>	3279
<u>department of commerce.</u>	3280
<u>(D) The department shall adopt rules to implement this</u>	3281
<u>section and shall develop a form to be used for the reporting</u>	3282
<u>required under divisions (B) and (C) of this section.</u>	3283
Sec. 4724.11. <u>(A) In accordance with Chapter 119. of the</u>	3284
<u>Revised Code, the department of commerce shall adopt rules that</u>	3285
<u>establish all of the following:</u>	3286
<u>(1) Standards and procedures for applying for, renewing,</u>	3287
<u>reinstating, or restoring a license to practice as a licensed</u>	3288
<u>midwife;</u>	3289
<u>(2) Application, renewal, reinstatement, and restoration</u>	3290

<u>fee amounts for a license to practice as a licensed midwife,</u>	3291
<u>with the amount of the application fee not to exceed forty-five</u>	3292
<u>dollars and the amount of the renewal fee not to exceed twenty</u>	3293
<u>dollars;</u>	3294
<u>(3) Standards and procedures for approving and</u>	3295
<u>successfully completing a course of study in breech births and a</u>	3296
<u>course of study in pharmacology, each as described in section</u>	3297
<u>4724.03 of the Revised Code;</u>	3298
<u>(4) Subject to division (C) of this section, standards and</u>	3299
<u>procedures for approving certifying organizations as described</u>	3300
<u>in section 4724.03 of the Revised Code;</u>	3301
<u>(5) Reasons for which the department may refuse to issue,</u>	3302
<u>or renew, suspend, or revoke a license or otherwise impose</u>	3303
<u>discipline on a licensed midwife;</u>	3304
<u>(6) Conditions to be satisfied before the department</u>	3305
<u>reinstates or restores an expired or inactive license;</u>	3306
<u>(7) Procedures for reporting to the licensed midwifery</u>	3307
<u>advisory council license holder misconduct;</u>	3308
<u>(8) Procedures by which the department conducts</u>	3309
<u>disciplinary investigations.</u>	3310
<u>(B) In adopting rules establishing standards and</u>	3311
<u>procedures for the approval of certifying organizations, the</u>	3312
<u>department shall approve an organization only if its</u>	3313
<u>certification requirements meet or exceed those of the north</u>	3314
<u>American registry of midwives or the international registry of</u>	3315
<u>midwives.</u>	3316
<u>(C) The department also may adopt, in accordance with</u>	3317
<u>Chapter 119. of the Revised Code, any other rules it considers</u>	3318

necessary to implement and administer this chapter. The rules 3319
may require the completion of a criminal records check. 3320

Sec. 4724.12. This chapter does not abridge, change, or 3321
limit in any way the right of a parent to deliver the parent's 3322
baby where, when, how, and with whom the parent chooses, 3323
regardless of the licensure requirements established in this 3324
chapter. 3325

Sec. 4724.13. (A) There is hereby created within the 3326
department of commerce the licensed midwifery advisory council. 3327
The council shall consist of all of the following members: 3328

(1) One certified nurse-midwife and one certified midwife 3329
or certified nurse-midwife, preferably with experience attending 3330
a birth in a setting or facility other than a hospital; 3331

(2) Four licensed midwives, including one practicing in an 3332
urban setting and one serving a plain Amish or Mennonite 3333
community; 3334

(3) One physician who is board-certified in obstetrics and 3335
gynecology, as those designations are issued by a medical 3336
specialty certifying board recognized by the American board of 3337
medical specialties or American osteopathic association, and 3338
with experience consulting with midwives who provide midwifery 3339
services in locations other than hospitals; 3340

(4) One physician who is board-certified in neonatal 3341
medicine, as that designation is issued by a medical specialty 3342
certifying board recognized by the American board of medical 3343
specialties or American osteopathic association, and with 3344
experience consulting with midwives who provide midwifery 3345
services in locations other than hospitals; 3346

(5) One member of the public who has experience utilizing 3347

or receiving midwifery services in locations other than 3348
hospitals. 3349

Of the members who are licensed midwives, each shall 3350
obtain licensure as a licensed midwife under this chapter not 3351
later than January 1, 2028. 3352

(B) The department shall appoint the members described in 3353
division (A) of this section. The department may solicit 3354
nominations for initial appointments and for filling any 3355
vacancies from individuals or organizations with an interest in 3356
midwifery services. If the department does not receive any 3357
nominations or receives an insufficient number of nominations, 3358
the department shall appoint members and fill vacancies on its 3359
own advice. 3360

Of the physician members described in divisions (A) (3) and 3361
(4) of this section, if the department does not receive any 3362
nominations for physicians with experience consulting with 3363
midwives who provide midwifery services in locations other than 3364
hospitals, the department shall appoint physicians without such 3365
experience, but only if the department determines that each 3366
physician satisfies the other requirements of division (A) (3) or 3367
(4) of this section. 3368

Initial appointments to the council shall be made not 3369
later than ninety days after the effective date of this section. 3370
Of the initial appointments described in division (A) of this 3371
section, four shall be for terms of three years and five shall 3372
be for terms of four years. Thereafter, terms shall be for four 3373
years, with each term ending on the same day of the same month 3374
as did the term that it succeeds. Vacancies shall be filled in 3375
the same manner as appointments. 3376

When the term of any member expires, a successor shall be 3377
appointed in the same manner as the initial appointment. Any 3378
member appointed to fill a vacancy occurring prior to the 3379
expiration of the term for which the member's predecessor was 3380
appointed shall hold office for the remainder of that term. A 3381
member shall continue in office subsequent to the expiration 3382
date of the member's term until the member's successor takes 3383
office or until a period of sixty days has elapsed, whichever 3384
occurs first. A member may be reappointed. 3385

(C) The council shall organize by selecting a chairperson 3386
from among its members. The council may select a new chairperson 3387
at any time. Four members constitute a quorum for the 3388
transaction of official business. Members shall serve without 3389
compensation but shall receive payment for their actual and 3390
necessary expenses incurred in the performance of their official 3391
duties. The expenses shall be paid by the department. 3392

(D) The council shall advise and make recommendations to 3393
the department regarding the practice and regulation of licensed 3394
midwives. The department shall adhere to such advice and 3395
recommendations when adopting any rules governing the practice 3396
of licensed midwives, including rules to address the following: 3397

(1) Circumstances in which attending a home birth is 3398
prohibited, as described in section 4724.08 of the Revised Code; 3399

(2) Limitations on providing care during a high-risk 3400
pregnancy, including when a home birth is planned; 3401

(3) Adverse incident reporting and annual reporting, both 3402
required under section 4724.10 of the Revised Code; 3403

(4) Obtaining a patient's informed consent, as described 3404
in section 4724.07 of the Revised Code; 3405

(5) Creating an individualized transfer of care plan, as 3406
described in section 4724.09 of the Revised Code. 3407

(E) (1) The council shall review each adverse incident 3408
report submitted to the council as described in section 4724.10 3409
of the Revised Code. As soon as practicable after the required 3410
review, the council shall make a recommendation to the 3411
department regarding whether discipline should be imposed on the 3412
licensed midwife, and if so, the type of discipline to be 3413
imposed. 3414

The council shall develop a policy by which it addresses 3415
and considers adverse incident reports. 3416

(2) Beginning eighteen months after the effective date of 3417
this section, the council shall submit an annual report to the 3418
department of health that compiles all information submitted to 3419
the council pursuant to divisions (B) and (C) of section 4724.10 3420
of the Revised Code in the preceding calendar year. 3421

(F) (1) Any person who wishes to make a complaint against a 3422
licensed midwife shall submit the complaint in writing to the 3423
council within one year after the date of the action or event 3424
upon which the complaint is based. The council shall review each 3425
complaint submitted to the council. As soon as practicable after 3426
the required review, the council shall make a recommendation to 3427
the department of commerce regarding whether discipline should 3428
be imposed on the licensed midwife, and if so, the type of 3429
discipline to be imposed. 3430

(2) The council shall investigate any alleged 3431
irregularities in the practice of midwifery by a licensed 3432
midwife and any violations of this chapter or rules adopted by 3433
the department. 3434

(3) The council shall not investigate any person exempted 3435
from licensure under section 4724.02 of the Revised Code. 3436

Sec. 4724.14. A traditional midwife may engage in one or 3437
more of the following activities during the antepartum, 3438
intrapartum, postpartum, and newborn period as part of the scope 3439
of practice for a traditional midwife: 3440

(A) Offering care, education, counseling, and support 3441
during pregnancy, birth, and the postpartum period; 3442

(B) Attending births in locations other than hospitals; 3443

(C) Providing ongoing and routine prenatal care throughout 3444
pregnancy and hands on care during labor, birth, and the 3445
immediate postpartum period; 3446

(D) Providing maternal and newborn assessment for the six- 3447
to eight-week period following delivery; 3448

(E) Recognizing abnormal or dangerous conditions requiring 3449
consultations with or referrals to licensed health care 3450
professionals. 3451

Sec. 4724.15. (A) This section establishes the process by 3452
which a traditional midwife obtains a patient's consent to 3453
treatment authorized by section 4724.14 of the Revised Code. 3454

(B) The following information shall be exchanged in 3455
writing between a traditional midwife and patient when obtaining 3456
consent to treatment as described in division (A) of this 3457
section: 3458

(1) The name of the traditional midwife; 3459

(2) The patient's name, address, telephone number, and 3460
primary care provider, if the patient has one; 3461

<u>(3) A description of the traditional midwife's education,</u>	3462
<u>training, and experience in midwifery;</u>	3463
<u>(4) The traditional midwife's practice philosophy;</u>	3464
<u>(5) A promise to provide the patient, upon request, with</u>	3465
<u>separate documents describing a traditional midwife's scope of</u>	3466
<u>practice;</u>	3467
<u>(6) A written plan for medical consultation and transfer</u>	3468
<u>of care;</u>	3469
<u>(7) A description of any hospital care and procedures that</u>	3470
<u>may be necessary in the event of an emergency transfer of care;</u>	3471
<u>(8) A description of the services provided to the patient</u>	3472
<u>by the traditional midwife;</u>	3473
<u>(9) Whether the traditional midwife is covered by</u>	3474
<u>professional liability insurance;</u>	3475
<u>(10) Any other information required in rules adopted by</u>	3476
<u>the department.</u>	3477
<u>(C) Once the required information has been exchanged and</u>	3478
<u>if the patient consents to treatment, the patient and</u>	3479
<u>traditional midwife shall sign a written document to indicate as</u>	3480
<u>such. The traditional midwife shall retain a copy of the</u>	3481
<u>document for at least four years from the date on which the</u>	3482
<u>document was signed.</u>	3483
<u>(D) The rights and liabilities arising from the provision</u>	3484
<u>of traditional midwifery services shall be governed exclusively</u>	3485
<u>by the agreement between the traditional midwife and the patient</u>	3486
<u>entered pursuant to division (C) of this section.</u>	3487
<u>Sec. 4724.16. Emergency medical service personnel or an</u>	3488

emergency medical service organization, hospital, facility, 3489
physician, advanced practice registered nurse, licensed midwife, 3490
or traditional midwife that provides services or care following 3491
an adverse incident as defined in section 4724.10 of the Revised 3492
Code, or during and after a transfer of care as described in 3493
section 4724.09 of the Revised Code, are not liable in damages 3494
in a tort or other civil action for injury or loss to person or 3495
property arising from the services or care, unless the services 3496
or care are provided in a manner that constitutes willful or 3497
wanton misconduct. 3498

Sec. 4724.99. (A) Whoever violates division (A) of section 3499
4724.02 of the Revised Code is guilty of a felony of the fifth 3500
degree on a first offense and a felony of the fourth degree on 3501
each subsequent offense. 3502

(B) Whoever violates division (C) of section 4724.02 of 3503
the Revised Code is guilty of a misdemeanor of the first degree 3504
and is subject to a fine in the amount of one thousand dollars 3505
and a jail term of not more than one hundred eighty days. 3506

Sec. 4731.22. (A) The state medical board, by an 3507
affirmative vote of not fewer than six of its members, may 3508
limit, revoke, or suspend a license or certificate to practice 3509
or certificate to recommend, refuse to grant a license or 3510
certificate, refuse to renew a license or certificate, refuse to 3511
reinstate a license or certificate, or reprimand or place on 3512
probation the holder of a license or certificate if the 3513
individual applying for or holding the license or certificate is 3514
found by the board to have committed fraud during the 3515
administration of the examination for a license or certificate 3516
to practice or to have committed fraud, misrepresentation, or 3517
deception in applying for, renewing, or securing any license or 3518

certificate to practice or certificate to recommend issued by 3519
the board. 3520

(B) Except as provided in division (P) of this section, 3521
the board, by an affirmative vote of not fewer than six members, 3522
shall, to the extent permitted by law, limit, revoke, or suspend 3523
a license or certificate to practice or certificate to 3524
recommend, refuse to issue a license or certificate, refuse to 3525
renew a license or certificate, refuse to reinstate a license or 3526
certificate, or reprimand or place on probation the holder of a 3527
license or certificate for one or more of the following reasons: 3528

(1) Permitting one's name or one's license or certificate 3529
to practice to be used by a person, group, or corporation when 3530
the individual concerned is not actually directing the treatment 3531
given; 3532

(2) Failure to maintain minimal standards applicable to 3533
the selection or administration of drugs, or failure to employ 3534
acceptable scientific methods in the selection of drugs or other 3535
modalities for treatment of disease; 3536

(3) Except as provided in section 4731.97 of the Revised 3537
Code, selling, giving away, personally furnishing, prescribing, 3538
or administering drugs for other than legal and legitimate 3539
therapeutic purposes or a plea of guilty to, a judicial finding 3540
of guilt of, or a judicial finding of eligibility for 3541
intervention in lieu of conviction of, a violation of any 3542
federal or state law regulating the possession, distribution, or 3543
use of any drug; 3544

(4) Willfully betraying a professional confidence. 3545

For purposes of this division, "willfully betraying a 3546
professional confidence" does not include providing any 3547

information, documents, or reports under sections 307.621 to 3548
307.629 of the Revised Code to a child fatality review board; 3549
does not include providing any information, documents, or 3550
reports under sections 307.631 to 307.6410 of the Revised Code 3551
to a drug overdose fatality review committee, a suicide fatality 3552
review committee, or hybrid drug overdose fatality and suicide 3553
fatality review committee; does not include providing any 3554
information, documents, or reports under sections 307.651 to 3555
307.659 of the Revised Code to a domestic violence fatality 3556
review board; does not include providing any information, 3557
documents, or reports to the director of health pursuant to 3558
guidelines established under section 3701.70 of the Revised 3559
Code; does not include written notice to a mental health 3560
professional under section 4731.62 of the Revised Code; does not 3561
include making a report as described in division (F) of section 3562
2921.22 and section 4731.224 of the Revised Code; and does not 3563
include the making of a report of an employee's use of a drug of 3564
abuse, or a report of a condition of an employee other than one 3565
involving the use of a drug of abuse, to the employer of the 3566
employee as described in division (B) of section 2305.33 of the 3567
Revised Code. Nothing in this division affects the immunity from 3568
civil liability conferred by section 2305.33 or 4731.62 of the 3569
Revised Code upon a physician who makes a report in accordance 3570
with section 2305.33 or notifies a mental health professional in 3571
accordance with section 4731.62 of the Revised Code. As used in 3572
this division, "employee," "employer," and "physician" have the 3573
same meanings as in section 2305.33 of the Revised Code. 3574

(5) Making a false, fraudulent, deceptive, or misleading 3575
statement in the solicitation of or advertising for patients; in 3576
relation to the practice of medicine and surgery, osteopathic 3577
medicine and surgery, podiatric medicine and surgery, or a 3578

limited branch of medicine; or in securing or attempting to 3579
secure any license or certificate to practice issued by the 3580
board. 3581

As used in this division, "false, fraudulent, deceptive, 3582
or misleading statement" means a statement that includes a 3583
misrepresentation of fact, is likely to mislead or deceive 3584
because of a failure to disclose material facts, is intended or 3585
is likely to create false or unjustified expectations of 3586
favorable results, or includes representations or implications 3587
that in reasonable probability will cause an ordinarily prudent 3588
person to misunderstand or be deceived. 3589

(6) A departure from, or the failure to conform to, 3590
minimal standards of care of similar practitioners under the 3591
same or similar circumstances, whether or not actual injury to a 3592
patient is established; 3593

(7) Representing, with the purpose of obtaining 3594
compensation or other advantage as personal gain or for any 3595
other person, that an incurable disease or injury, or other 3596
incurable condition, can be permanently cured; 3597

(8) The obtaining of, or attempting to obtain, money or 3598
anything of value by fraudulent misrepresentations in the course 3599
of practice; 3600

(9) A plea of guilty to, a judicial finding of guilt of, 3601
or a judicial finding of eligibility for intervention in lieu of 3602
conviction for, a felony; 3603

(10) Commission of an act that constitutes a felony in 3604
this state, regardless of the jurisdiction in which the act was 3605
committed; 3606

(11) A plea of guilty to, a judicial finding of guilt of, 3607

or a judicial finding of eligibility for intervention in lieu of 3608
conviction for, a misdemeanor committed in the course of 3609
practice; 3610

(12) Commission of an act in the course of practice that 3611
constitutes a misdemeanor in this state, regardless of the 3612
jurisdiction in which the act was committed; 3613

(13) A plea of guilty to, a judicial finding of guilt of, 3614
or a judicial finding of eligibility for intervention in lieu of 3615
conviction for, a misdemeanor involving moral turpitude; 3616

(14) Commission of an act involving moral turpitude that 3617
constitutes a misdemeanor in this state, regardless of the 3618
jurisdiction in which the act was committed; 3619

(15) Violation of the conditions of limitation placed by 3620
the board upon a license or certificate to practice; 3621

(16) Failure to pay license renewal fees specified in this 3622
chapter; 3623

(17) Except as authorized in section 4731.31 of the 3624
Revised Code, engaging in the division of fees for referral of 3625
patients, or the receiving of a thing of value in return for a 3626
specific referral of a patient to utilize a particular service 3627
or business; 3628

(18) Subject to section 4731.226 of the Revised Code, 3629
violation of any provision of a code of ethics of the American 3630
medical association, the American osteopathic association, the 3631
American podiatric medical association, or any other national 3632
professional organizations that the board specifies by rule. The 3633
state medical board shall obtain and keep on file current copies 3634
of the codes of ethics of the various national professional 3635
organizations. The individual whose license or certificate is 3636

being suspended or revoked shall not be found to have violated 3637
any provision of a code of ethics of an organization not 3638
appropriate to the individual's profession. 3639

For purposes of this division, a "provision of a code of 3640
ethics of a national professional organization" does not include 3641
any provision that would preclude the making of a report by a 3642
physician of an employee's use of a drug of abuse, or of a 3643
condition of an employee other than one involving the use of a 3644
drug of abuse, to the employer of the employee as described in 3645
division (B) of section 2305.33 of the Revised Code. Nothing in 3646
this division affects the immunity from civil liability 3647
conferred by that section upon a physician who makes either type 3648
of report in accordance with division (B) of that section. As 3649
used in this division, "employee," "employer," and "physician" 3650
have the same meanings as in section 2305.33 of the Revised 3651
Code. 3652

(19) Inability to practice according to acceptable and 3653
prevailing standards of care by reason of mental illness or 3654
physical illness, including, but not limited to, physical 3655
deterioration that adversely affects cognitive, motor, or 3656
perceptive skills. 3657

In enforcing this division, the board, upon a showing of a 3658
possible violation, shall refer any individual who is authorized 3659
to practice by this chapter or who has submitted an application 3660
pursuant to this chapter to the monitoring organization that 3661
conducts the confidential monitoring program established under 3662
section 4731.25 of the Revised Code. The board also may compel 3663
the individual to submit to a mental examination, physical 3664
examination, including an HIV test, or both a mental and a 3665
physical examination. The expense of the examination is the 3666

responsibility of the individual compelled to be examined. 3667
Failure to submit to a mental or physical examination or consent 3668
to an HIV test ordered by the board constitutes an admission of 3669
the allegations against the individual unless the failure is due 3670
to circumstances beyond the individual's control, and a default 3671
and final order may be entered without the taking of testimony 3672
or presentation of evidence. If the board finds an individual 3673
unable to practice because of the reasons set forth in this 3674
division, the board shall require the individual to submit to 3675
care, counseling, or treatment by physicians approved or 3676
designated by the board, as a condition for initial, continued, 3677
reinstated, or renewed authority to practice. An individual 3678
affected under this division shall be afforded an opportunity to 3679
demonstrate to the board the ability to resume practice in 3680
compliance with acceptable and prevailing standards under the 3681
provisions of the individual's license or certificate. For the 3682
purpose of this division, any individual who applies for or 3683
receives a license or certificate to practice under this chapter 3684
accepts the privilege of practicing in this state and, by so 3685
doing, shall be deemed to have given consent to submit to a 3686
mental or physical examination when directed to do so in writing 3687
by the board, and to have waived all objections to the 3688
admissibility of testimony or examination reports that 3689
constitute a privileged communication. 3690

(20) Except as provided in division (F)(1)(b) of section 3691
4731.282 of the Revised Code or when civil penalties are imposed 3692
under section 4731.225 of the Revised Code, and subject to 3693
section 4731.226 of the Revised Code, violating or attempting to 3694
violate, directly or indirectly, or assisting in or abetting the 3695
violation of, or conspiring to violate, any provisions of this 3696
chapter or any rule promulgated by the board. 3697

This division does not apply to a violation or attempted 3698
violation of, assisting in or abetting the violation of, or a 3699
conspiracy to violate, any provision of this chapter or any rule 3700
adopted by the board that would preclude the making of a report 3701
by a physician of an employee's use of a drug of abuse, or of a 3702
condition of an employee other than one involving the use of a 3703
drug of abuse, to the employer of the employee as described in 3704
division (B) of section 2305.33 of the Revised Code. Nothing in 3705
this division affects the immunity from civil liability 3706
conferred by that section upon a physician who makes either type 3707
of report in accordance with division (B) of that section. As 3708
used in this division, "employee," "employer," and "physician" 3709
have the same meanings as in section 2305.33 of the Revised 3710
Code. 3711

(21) The violation of section 3701.79 of the Revised Code 3712
or of any abortion rule adopted by the director of health 3713
pursuant to section 3701.341 of the Revised Code; 3714

(22) Any of the following actions taken by an agency 3715
responsible for authorizing, certifying, or regulating an 3716
individual to practice a health care occupation or provide 3717
health care services in this state or another jurisdiction, for 3718
any reason other than the nonpayment of fees: the limitation, 3719
revocation, or suspension of an individual's license to 3720
practice; acceptance of an individual's license surrender; 3721
denial of a license; refusal to renew or reinstate a license; 3722
imposition of probation; or issuance of an order of censure or 3723
other reprimand; 3724

(23) The violation of section 2919.12 of the Revised Code 3725
or the performance or inducement of an abortion upon a pregnant 3726
woman with actual knowledge that the conditions specified in 3727

division (B) of section 2317.56 of the Revised Code have not 3728
been satisfied or with a heedless indifference as to whether 3729
those conditions have been satisfied, unless an affirmative 3730
defense as specified in division (H) (2) of that section would 3731
apply in a civil action authorized by division (H) (1) of that 3732
section; 3733

(24) The revocation, suspension, restriction, reduction, 3734
or termination of clinical privileges by the United States 3735
department of defense or department of veterans affairs or the 3736
termination or suspension of a certificate of registration to 3737
prescribe drugs by the drug enforcement administration of the 3738
United States department of justice; 3739

(25) Termination or suspension from participation in the 3740
medicare or medicaid programs by the department of health and 3741
human services or other responsible agency; 3742

(26) Impairment of ability to practice according to 3743
acceptable and prevailing standards of care because of substance 3744
use disorder or excessive use or abuse of drugs, alcohol, or 3745
other substances that may impair ability to practice. 3746

For the purposes of this division, any individual 3747
authorized to practice by this chapter accepts the privilege of 3748
practicing in this state subject to supervision by the board. By 3749
filing an application for or holding a license or certificate to 3750
practice under this chapter, an individual shall be deemed to 3751
have given consent to submit to a mental or physical examination 3752
when ordered to do so by the board in writing, and to have 3753
waived all objections to the admissibility of testimony or 3754
examination reports that constitute privileged communications. 3755

If it has reason to believe that any individual authorized 3756

to practice by this chapter or any applicant for licensure or 3757
certification to practice suffers such impairment, the board 3758
shall refer the individual to the monitoring organization that 3759
conducts the confidential monitoring program established under 3760
section 4731.25 of the Revised Code. The board also may compel 3761
the individual to submit to a mental or physical examination, or 3762
both. The expense of the examination is the responsibility of 3763
the individual compelled to be examined. Any mental or physical 3764
examination required under this division shall be undertaken by 3765
a treatment provider or physician who is qualified to conduct 3766
the examination and who is approved under section 4731.251 of 3767
the Revised Code. 3768

Failure to submit to a mental or physical examination 3769
ordered by the board constitutes an admission of the allegations 3770
against the individual unless the failure is due to 3771
circumstances beyond the individual's control, and a default and 3772
final order may be entered without the taking of testimony or 3773
presentation of evidence. If the board determines that the 3774
individual's ability to practice is impaired, the board shall 3775
suspend the individual's license or certificate or deny the 3776
individual's application and shall require the individual, as a 3777
condition for initial, continued, reinstated, or renewed 3778
licensure or certification to practice, to submit to treatment. 3779

Before being eligible to apply for reinstatement of a 3780
license or certificate suspended under this division, the 3781
impaired practitioner shall demonstrate to the board the ability 3782
to resume practice in compliance with acceptable and prevailing 3783
standards of care under the provisions of the practitioner's 3784
license or certificate. The demonstration shall include, but 3785
shall not be limited to, the following: 3786

(a) Certification from a treatment provider approved under 3787
section 4731.251 of the Revised Code that the individual has 3788
successfully completed any required inpatient treatment; 3789

(b) Evidence of continuing full compliance with an 3790
aftercare contract or consent agreement; 3791

(c) Two written reports indicating that the individual's 3792
ability to practice has been assessed and that the individual 3793
has been found capable of practicing according to acceptable and 3794
prevailing standards of care. The reports shall be made by 3795
individuals or providers approved by the board for making the 3796
assessments and shall describe the basis for their 3797
determination. 3798

The board may reinstate a license or certificate suspended 3799
under this division after that demonstration and after the 3800
individual has entered into a written consent agreement. 3801

When the impaired practitioner resumes practice, the board 3802
shall require continued monitoring of the individual. The 3803
monitoring shall include, but not be limited to, compliance with 3804
the written consent agreement entered into before reinstatement 3805
or with conditions imposed by board order after a hearing, and, 3806
upon termination of the consent agreement, submission to the 3807
board for at least two years of annual written progress reports 3808
made under penalty of perjury stating whether the individual has 3809
maintained sobriety. 3810

(27) A second or subsequent violation of section 4731.66 3811
or 4731.69 of the Revised Code; 3812

(28) Except as provided in division (N) of this section: 3813

(a) Waiving the payment of all or any part of a deductible 3814
or copayment that a patient, pursuant to a health insurance or 3815

health care policy, contract, or plan that covers the 3816
individual's services, otherwise would be required to pay if the 3817
waiver is used as an enticement to a patient or group of 3818
patients to receive health care services from that individual; 3819

(b) Advertising that the individual will waive the payment 3820
of all or any part of a deductible or copayment that a patient, 3821
pursuant to a health insurance or health care policy, contract, 3822
or plan that covers the individual's services, otherwise would 3823
be required to pay. 3824

(29) Failure to use universal blood and body fluid 3825
precautions established by rules adopted under section 4731.051 3826
of the Revised Code; 3827

(30) Failure to provide notice to, and receive 3828
acknowledgment of the notice from, a patient when required by 3829
section 4731.143 of the Revised Code prior to providing 3830
nonemergency professional services, or failure to maintain that 3831
notice in the patient's medical record; 3832

(31) Failure of a physician supervising a physician 3833
assistant to maintain supervision in accordance with the 3834
requirements of Chapter 4730. of the Revised Code and the rules 3835
adopted under that chapter; 3836

(32) Failure of a physician or podiatrist to enter into a 3837
standard care arrangement with a certified midwife, clinical 3838
nurse specialist, certified nurse-midwife, or certified nurse 3839
practitioner with whom the physician or podiatrist is in 3840
collaboration pursuant to section 4731.27 of the Revised Code or 3841
failure to fulfill the responsibilities of collaboration after 3842
entering into a standard care arrangement; 3843

(33) Failure to comply with the terms of a consult 3844

agreement entered into with a pharmacist pursuant to section	3845
4729.39 of the Revised Code;	3846
(34) Failure to cooperate in an investigation conducted by	3847
the board under division (F) of this section, including failure	3848
to comply with a subpoena or order issued by the board or	3849
failure to answer truthfully a question presented by the board	3850
in an investigative interview, an investigative office	3851
conference, at a deposition, or in written interrogatories,	3852
except that failure to cooperate with an investigation shall not	3853
constitute grounds for discipline under this section if a court	3854
of competent jurisdiction has issued an order that either	3855
quashes a subpoena or permits the individual to withhold the	3856
testimony or evidence in issue;	3857
(35) Failure to supervise an anesthesiologist assistant in	3858
accordance with Chapter 4760. of the Revised Code and the	3859
board's rules for supervision of an anesthesiologist assistant;	3860
(36) Assisting suicide, as defined in section 3795.01 of	3861
the Revised Code;	3862
(37) Failure to comply with the requirements of section	3863
2317.561 of the Revised Code;	3864
(38) Failure to supervise a radiologist assistant in	3865
accordance with Chapter 4774. of the Revised Code and the	3866
board's rules for supervision of radiologist assistants;	3867
(39) Performing or inducing an abortion at an office or	3868
facility with knowledge that the office or facility fails to	3869
post the notice required under section 3701.791 of the Revised	3870
Code;	3871
(40) Failure to comply with the standards and procedures	3872
established in rules under section 4731.054 of the Revised Code	3873

for the operation of or the provision of care at a pain management clinic; 3874
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(41) Failure to comply with the standards and procedures established in rules under section 4731.054 of the Revised Code for providing supervision, direction, and control of individuals at a pain management clinic; 3876
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(42) Failure to comply with the requirements of section 4729.79 or 4731.055 of the Revised Code, unless the state board of pharmacy no longer maintains a drug database pursuant to section 4729.75 of the Revised Code; 3880
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(43) Failure to comply with the requirements of section 2919.171, 2919.202, or 2919.203 of the Revised Code or failure to submit to the department of health in accordance with a court order a complete report as described in section 2919.171 or 2919.202 of the Revised Code; 3884
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(44) Practicing at a facility that is subject to licensure as a category III terminal distributor of dangerous drugs with a pain management clinic classification unless the person operating the facility has obtained and maintains the license with the classification; 3889
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(45) Owning a facility that is subject to licensure as a category III terminal distributor of dangerous drugs with a pain management clinic classification unless the facility is licensed with the classification; 3894
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(46) Failure to comply with any of the requirements regarding making or maintaining medical records or documents described in division (A) of section 2919.192, division (C) of section 2919.193, division (B) of section 2919.195, or division (A) of section 2919.196 of the Revised Code; 3898
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(47) Failure to comply with the requirements in section 3719.061 of the Revised Code before issuing for a minor a prescription for an opioid analgesic, as defined in section 3719.01 of the Revised Code;	3903 3904 3905 3906
(48) Failure to comply with the requirements of section 4731.30 of the Revised Code or rules adopted under section 4731.301 of the Revised Code when recommending treatment with medical marijuana;	3907 3908 3909 3910
(49) A pattern of continuous or repeated violations of division (E) (2) or (3) of section 3963.02 of the Revised Code;	3911 3912
(50) Failure to fulfill the responsibilities of a collaboration agreement entered into with an athletic trainer as described in section 4755.621 of the Revised Code;	3913 3914 3915
(51) Failure to take the steps specified in section 4731.911 of the Revised Code following an abortion or attempted abortion in an ambulatory surgical facility or other location that is not a hospital when a child is born alive;	3916 3917 3918 3919
(52) Violation of section 4731.77 of the Revised Code;	3920
(53) Failure of a physician supervising a certified mental health assistant to maintain supervision in accordance with the requirements of Chapter 4772. of the Revised Code and the rules adopted under that chapter;	3921 3922 3923 3924
(54) Failure to comply with the requirements of section 3705.16 of the Revised Code when certifying a decedent's cause of death and completing and signing the medical certificate of death.	3925 3926 3927 3928
(C) Disciplinary actions taken by the board under divisions (A) and (B) of this section shall be taken pursuant to	3929 3930

an adjudication under Chapter 119. of the Revised Code, except 3931
that in lieu of an adjudication, the board may enter into a 3932
consent agreement with an individual to resolve an allegation of 3933
a violation of this chapter or any rule adopted under it. A 3934
consent agreement, when ratified by an affirmative vote of not 3935
fewer than six members of the board, shall constitute the 3936
findings and order of the board with respect to the matter 3937
addressed in the agreement. If the board refuses to ratify a 3938
consent agreement, the admissions and findings contained in the 3939
consent agreement shall be of no force or effect. 3940

A telephone conference call may be utilized for 3941
ratification of a consent agreement that revokes or suspends an 3942
individual's license or certificate to practice or certificate 3943
to recommend. The telephone conference call shall be considered 3944
a special meeting under division (F) of section 121.22 of the 3945
Revised Code. 3946

If the board takes disciplinary action against an 3947
individual under division (B) of this section for a second or 3948
subsequent plea of guilty to, or judicial finding of guilt of, a 3949
violation of section 2919.123 or 2919.124 of the Revised Code, 3950
the disciplinary action shall consist of a suspension of the 3951
individual's license or certificate to practice for a period of 3952
at least one year or, if determined appropriate by the board, a 3953
more serious sanction involving the individual's license or 3954
certificate to practice. Any consent agreement entered into 3955
under this division with an individual that pertains to a second 3956
or subsequent plea of guilty to, or judicial finding of guilt 3957
of, a violation of that section shall provide for a suspension 3958
of the individual's license or certificate to practice for a 3959
period of at least one year or, if determined appropriate by the 3960
board, a more serious sanction involving the individual's 3961

license or certificate to practice. 3962

(D) For purposes of divisions (B) (10), (12), and (14) of 3963
this section, the commission of the act may be established by a 3964
finding by the board, pursuant to an adjudication under Chapter 3965
119. of the Revised Code, that the individual committed the act. 3966
The board does not have jurisdiction under those divisions if 3967
the trial court renders a final judgment in the individual's 3968
favor and that judgment is based upon an adjudication on the 3969
merits. The board has jurisdiction under those divisions if the 3970
trial court issues an order of dismissal upon technical or 3971
procedural grounds. 3972

(E) The sealing or expungement of conviction records by 3973
any court shall have no effect upon a prior board order entered 3974
under this section or upon the board's jurisdiction to take 3975
action under this section if, based upon a plea of guilty, a 3976
judicial finding of guilt, or a judicial finding of eligibility 3977
for intervention in lieu of conviction, the board issued a 3978
notice of opportunity for a hearing prior to the court's order 3979
to seal or expunge the records. The board shall not be required 3980
to seal, expunge, destroy, redact, or otherwise modify its 3981
records to reflect the court's sealing of conviction records. 3982

(F) (1) The board shall investigate evidence that appears 3983
to show that a person has violated any provision of this chapter 3984
or any rule adopted under it. Any person may report to the board 3985
in a signed writing any information that the person may have 3986
that appears to show a violation of any provision of this 3987
chapter or any rule adopted under it. In the absence of bad 3988
faith, any person who reports information of that nature or who 3989
testifies before the board in any adjudication conducted under 3990
Chapter 119. of the Revised Code shall not be liable in damages 3991

in a civil action as a result of the report or testimony. Each 3992
complaint or allegation of a violation received by the board 3993
shall be assigned a case number and shall be recorded by the 3994
board. 3995

(2) Investigations of alleged violations of this chapter 3996
or any rule adopted under it shall be supervised by the 3997
supervising member elected by the board in accordance with 3998
section 4731.02 of the Revised Code and by the secretary as 3999
provided in section 4731.39 of the Revised Code. The president 4000
may designate another member of the board to supervise the 4001
investigation in place of the supervising member. Upon a vote of 4002
the majority of the board to authorize the addition of a 4003
consumer member in the supervision of any part of any 4004
investigation, the president shall designate a consumer member 4005
for supervision of investigations as determined by the 4006
president. The authorization of consumer member participation in 4007
investigation supervision may be rescinded by a majority vote of 4008
the board. No member of the board who supervises the 4009
investigation of a case shall participate in further 4010
adjudication of the case. 4011

(3) In investigating a possible violation of this chapter 4012
or any rule adopted under this chapter, or in conducting an 4013
inspection under division (E) of section 4731.054 of the Revised 4014
Code, the board may question witnesses, conduct interviews, 4015
administer oaths, order the taking of depositions, inspect and 4016
copy any books, accounts, papers, records, or documents, issue 4017
subpoenas, and compel the attendance of witnesses and production 4018
of books, accounts, papers, records, documents, and testimony, 4019
except that a subpoena for patient record information shall not 4020
be issued without consultation with the attorney general's 4021
office and approval of the secretary of the board. 4022

(a) Before issuance of a subpoena for patient record information, the secretary shall determine whether there is probable cause to believe that the complaint filed alleges a violation of this chapter or any rule adopted under it and that the records sought are relevant to the alleged violation and material to the investigation. The subpoena may apply only to records that cover a reasonable period of time surrounding the alleged violation.

(b) On failure to comply with any subpoena issued by the board and after reasonable notice to the person being subpoenaed, the board may move for an order compelling the production of persons or records pursuant to the Rules of Civil Procedure.

(c) A subpoena issued by the board may be served by a sheriff, the sheriff's deputy, or a board employee or agent designated by the board. Service of a subpoena issued by the board may be made by delivering a copy of the subpoena to the person named therein, reading it to the person, or leaving it at the person's usual place of residence, usual place of business, or address on file with the board. When serving a subpoena to an applicant for or the holder of a license or certificate issued under this chapter, service of the subpoena may be made by certified mail, return receipt requested, and the subpoena shall be deemed served on the date delivery is made or the date the person refuses to accept delivery. If the person being served refuses to accept the subpoena or is not located, service may be made to an attorney who notifies the board that the attorney is representing the person.

(d) A sheriff's deputy who serves a subpoena shall receive the same fees as a sheriff. Each witness who appears before the

board in obedience to a subpoena shall receive the fees and 4053
mileage provided for under section 119.094 of the Revised Code. 4054

(4) All hearings, investigations, and inspections of the 4055
board shall be considered civil actions for the purposes of 4056
section 2305.252 of the Revised Code. 4057

(5) A report required to be submitted to the board under 4058
this chapter, a complaint, or information received by the board 4059
pursuant to an investigation or pursuant to an inspection under 4060
division (E) of section 4731.054 of the Revised Code is 4061
confidential and not subject to discovery in any civil action. 4062

The board shall conduct all investigations or inspections 4063
and proceedings in a manner that protects the confidentiality of 4064
patients and persons who file complaints with the board. The 4065
board shall not make public the names or any other identifying 4066
information about patients or complainants unless proper consent 4067
is given or, in the case of a patient, a waiver of the patient 4068
privilege exists under division (B) of section 2317.02 of the 4069
Revised Code, except that consent or a waiver of that nature is 4070
not required if the board possesses reliable and substantial 4071
evidence that no bona fide physician-patient relationship 4072
exists. 4073

The board may share any information it receives pursuant 4074
to an investigation or inspection, including patient records and 4075
patient record information, with law enforcement agencies, other 4076
licensing boards, and other governmental agencies that are 4077
prosecuting, adjudicating, or investigating alleged violations 4078
of statutes or administrative rules. An agency or board that 4079
receives the information shall comply with the same requirements 4080
regarding confidentiality as those with which the state medical 4081
board must comply, notwithstanding any conflicting provision of 4082

the Revised Code or procedure of the agency or board that 4083
applies when it is dealing with other information in its 4084
possession. In a judicial proceeding, the information may be 4085
admitted into evidence only in accordance with the Rules of 4086
Evidence, but the court shall require that appropriate measures 4087
are taken to ensure that confidentiality is maintained with 4088
respect to any part of the information that contains names or 4089
other identifying information about patients or complainants 4090
whose confidentiality was protected by the state medical board 4091
when the information was in the board's possession. Measures to 4092
ensure confidentiality that may be taken by the court include 4093
sealing its records or deleting specific information from its 4094
records. 4095

No person shall knowingly access, use, or disclose 4096
confidential investigatory information in a manner prohibited by 4097
law. 4098

(6) On a quarterly basis, the board shall prepare a report 4099
that documents the disposition of all cases during the preceding 4100
three months. The report shall contain the following information 4101
for each case with which the board has completed its activities: 4102

(a) The case number assigned to the complaint or alleged 4103
violation; 4104

(b) The type of license or certificate to practice, if 4105
any, held by the individual against whom the complaint is 4106
directed; 4107

(c) A description of the allegations contained in the 4108
complaint; 4109

(d) Whether witnesses were interviewed; 4110

(e) Whether the individual against whom the complaint is 4111

directed is the subject of any pending complaints; 4112

(f) The disposition of the case. 4113

The report shall state how many cases are still pending 4114
and shall be prepared in a manner that protects the identity of 4115
each person involved in each case. The report shall be a public 4116
record under section 149.43 of the Revised Code. 4117

(7) The board may provide a status update regarding an 4118
investigation to a complainant on request if the board verifies 4119
the complainant's identity. 4120

(G) (1) If either of the following circumstances occur, the 4121
secretary and supervising member may recommend that the board 4122
suspend an individual's license or certificate to practice or 4123
certificate to recommend without a prior hearing: 4124

(a) The secretary and supervising member determine both of 4125
the following: 4126

(i) That there is clear and convincing evidence that an 4127
individual has violated division (B) of this section; 4128

(ii) That the individual's continued practice presents a 4129
danger of immediate and serious harm to the public. 4130

(b) The board receives verifiable information that a 4131
licensee has been charged in any state or federal court with a 4132
crime classified as a felony under the charging court's law and 4133
the conduct constitutes a violation of division (B) of this 4134
section. 4135

(2) If a recommendation is made to suspend without a prior 4136
hearing pursuant to division (G) (1) of this section, written 4137
allegations shall be prepared for consideration by the board. 4138
The board, upon review of those allegations and by an 4139

affirmative vote of not fewer than six of its members, excluding 4140
the secretary and supervising member, may suspend a license or 4141
certificate without a prior hearing. A telephone conference call 4142
may be utilized for reviewing the allegations and taking the 4143
vote on the summary suspension. 4144

The board shall serve a written order of suspension in 4145
accordance with sections 119.05 and 119.07 of the Revised Code. 4146
If the individual subject to the summary suspension requests an 4147
adjudicatory hearing by the board, the date set for the hearing 4148
shall be within fifteen days, but not earlier than seven days, 4149
after the individual requests the hearing, unless otherwise 4150
agreed to by both the board and the individual. 4151

(3) Any summary suspension imposed under division (G) (2) 4152
of this section is not a final appealable order and is not an 4153
adjudication that may be appealed under section 119.12 of the 4154
Revised Code. The summary suspension shall remain in effect 4155
until a final adjudicative order issued by the board pursuant to 4156
this section and Chapter 119. of the Revised Code becomes 4157
effective. Once a final adjudicative order has been issued by 4158
the board, any party adversely affected by it may file an appeal 4159
in accordance with the requirements of Chapter 119. of the 4160
Revised Code. 4161

The board shall issue its final adjudicative order within 4162
seventy-five days after completion of its hearing. A failure to 4163
issue the order within seventy-five days shall result in 4164
dissolution of the summary suspension order but shall not 4165
invalidate any subsequent, final adjudicative order. 4166

(H) If the board takes action under division (B) (9), (11), 4167
or (13) of this section and the judicial finding of guilt, 4168
guilty plea, or judicial finding of eligibility for intervention 4169

in lieu of conviction is overturned on appeal, upon exhaustion 4170
of the criminal appeal, a petition for reconsideration of the 4171
order may be filed with the board along with appropriate court 4172
documents. Upon receipt of a petition of that nature and 4173
supporting court documents, the board shall reinstate the 4174
individual's license or certificate to practice. The board may 4175
then hold an adjudication under Chapter 119. of the Revised Code 4176
to determine whether the individual committed the act in 4177
question. Notice of an opportunity for a hearing shall be given 4178
in accordance with Chapter 119. of the Revised Code. If the 4179
board finds, pursuant to an adjudication held under this 4180
division, that the individual committed the act or if no hearing 4181
is requested, the board may order any of the sanctions 4182
identified under division (B) of this section. 4183

(I) The license or certificate to practice issued to an 4184
individual under this chapter and the individual's practice in 4185
this state are automatically suspended as of the date of the 4186
individual's second or subsequent plea of guilty to, or judicial 4187
finding of guilt of, a violation of section 2919.123 or 2919.124 4188
of the Revised Code. In addition, the license or certificate to 4189
practice or certificate to recommend issued to an individual 4190
under this chapter and the individual's practice in this state 4191
are automatically suspended as of the date the individual pleads 4192
guilty to, is found by a judge or jury to be guilty of, or is 4193
subject to a judicial finding of eligibility for intervention in 4194
lieu of conviction in this state or treatment or intervention in 4195
lieu of conviction in another jurisdiction for any of the 4196
following criminal offenses in this state or a substantially 4197
equivalent criminal offense in another jurisdiction: aggravated 4198
murder, murder, voluntary manslaughter, felonious assault, 4199
trafficking in persons, kidnapping, rape, sexual battery, gross 4200

sexual imposition, aggravated arson, aggravated robbery, or 4201
aggravated burglary. Continued practice after suspension shall 4202
be considered practicing without a license or certificate. 4203

The board shall notify the individual subject to the 4204
suspension in accordance with sections 119.05 and 119.07 of the 4205
Revised Code. If an individual whose license or certificate is 4206
automatically suspended under this division fails to make a 4207
timely request for an adjudication under Chapter 119. of the 4208
Revised Code, the board shall do whichever of the following is 4209
applicable: 4210

(1) If the automatic suspension under this division is for 4211
a second or subsequent plea of guilty to, or judicial finding of 4212
guilt of, a violation of section 2919.123 or 2919.124 of the 4213
Revised Code, the board shall enter an order suspending the 4214
individual's license or certificate to practice for a period of 4215
at least one year or, if determined appropriate by the board, 4216
imposing a more serious sanction involving the individual's 4217
license or certificate to practice. 4218

(2) In all circumstances in which division (I)(1) of this 4219
section does not apply, enter a final order permanently revoking 4220
the individual's license or certificate to practice. 4221

(J) If the board is required by Chapter 119. of the 4222
Revised Code to give notice of an opportunity for a hearing and 4223
if the individual subject to the notice does not timely request 4224
a hearing in accordance with section 119.07 of the Revised Code, 4225
the board is not required to hold a hearing, but may adopt, by 4226
an affirmative vote of not fewer than six of its members, a 4227
final order that contains the board's findings. In that final 4228
order, the board may order any of the sanctions identified under 4229
division (A) or (B) of this section. 4230

(K) Any action taken by the board under division (B) of 4231
this section resulting in a suspension from practice shall be 4232
accompanied by a written statement of the conditions under which 4233
the individual's license or certificate to practice may be 4234
reinstated. The board shall adopt rules governing conditions to 4235
be imposed for reinstatement. Reinstatement of a license or 4236
certificate suspended pursuant to division (B) of this section 4237
requires an affirmative vote of not fewer than six members of 4238
the board. 4239

(L) When the board refuses to grant or issue a license or 4240
certificate to practice to an applicant, revokes an individual's 4241
license or certificate to practice, refuses to renew an 4242
individual's license or certificate to practice, or refuses to 4243
reinstate an individual's license or certificate to practice, 4244
the board may specify that its action is permanent. An 4245
individual subject to a permanent action taken by the board is 4246
forever thereafter ineligible to hold a license or certificate 4247
to practice and the board shall not accept an application for 4248
reinstatement of the license or certificate or for issuance of a 4249
new license or certificate. 4250

(M) Notwithstanding any other provision of the Revised 4251
Code, all of the following apply: 4252

(1) The surrender of a license or certificate issued under 4253
this chapter shall not be effective unless or until accepted by 4254
the board. A telephone conference call may be utilized for 4255
acceptance of the surrender of an individual's license or 4256
certificate to practice. The telephone conference call shall be 4257
considered a special meeting under division (F) of section 4258
121.22 of the Revised Code. Reinstatement of a license or 4259
certificate surrendered to the board requires an affirmative 4260

vote of not fewer than six members of the board. 4261

(2) An application for a license or certificate made under 4262
the provisions of this chapter may not be withdrawn without 4263
approval of the board. 4264

(3) Failure by an individual to renew a license or 4265
certificate to practice in accordance with this chapter or a 4266
certificate to recommend in accordance with rules adopted under 4267
section 4731.301 of the Revised Code does not remove or limit 4268
the board's jurisdiction to take any disciplinary action under 4269
this section against the individual. 4270

(4) The placement of an individual's license on retired 4271
status, as described in section 4731.283 of the Revised Code, 4272
does not remove or limit the board's jurisdiction to take any 4273
disciplinary action against the individual with regard to the 4274
license as it existed before being placed on retired status. 4275

(5) At the request of the board, a license or certificate 4276
holder shall immediately surrender to the board a license or 4277
certificate that the board has suspended, revoked, or 4278
permanently revoked. 4279

(N) Sanctions shall not be imposed under division (B) (28) 4280
of this section against any person who waives deductibles and 4281
copayments as follows: 4282

(1) In compliance with the health benefit plan that 4283
expressly allows such a practice. Waiver of the deductibles or 4284
copayments shall be made only with the full knowledge and 4285
consent of the plan purchaser, payer, and third-party 4286
administrator. Documentation of the consent shall be made 4287
available to the board upon request. 4288

(2) For professional services rendered to any other person 4289

authorized to practice pursuant to this chapter, to the extent 4290
allowed by this chapter and rules adopted by the board. 4291

(O) Under the board's investigative duties described in 4292
this section and subject to division (F) of this section, the 4293
board shall develop and implement a quality intervention program 4294
designed to improve through remedial education the clinical and 4295
communication skills of individuals authorized under this 4296
chapter to practice medicine and surgery, osteopathic medicine 4297
and surgery, and podiatric medicine and surgery. In developing 4298
and implementing the quality intervention program, the board may 4299
do all of the following: 4300

(1) Offer in appropriate cases as determined by the board 4301
an educational and assessment program pursuant to an 4302
investigation the board conducts under this section; 4303

(2) Select providers of educational and assessment 4304
services, including a quality intervention program panel of case 4305
reviewers; 4306

(3) Make referrals to educational and assessment service 4307
providers and approve individual educational programs 4308
recommended by those providers. The board shall monitor the 4309
progress of each individual undertaking a recommended individual 4310
educational program. 4311

(4) Determine what constitutes successful completion of an 4312
individual educational program and require further monitoring of 4313
the individual who completed the program or other action that 4314
the board determines to be appropriate; 4315

(5) Adopt rules in accordance with Chapter 119. of the 4316
Revised Code to further implement the quality intervention 4317
program. 4318

An individual who participates in an individual 4319
educational program pursuant to this division shall pay the 4320
financial obligations arising from that educational program. 4321

(P) The board shall not refuse to issue a license to an 4322
applicant because of a conviction, plea of guilty, judicial 4323
finding of guilt, judicial finding of eligibility for 4324
intervention in lieu of conviction, or the commission of an act 4325
that constitutes a criminal offense, unless the refusal is in 4326
accordance with section 9.79 of the Revised Code. 4327

(Q) A license or certificate to practice or certificate to 4328
recommend issued to an individual under this chapter and an 4329
individual's practice under this chapter in this state are 4330
automatically suspended if the individual's license or 4331
certificate to practice a health care occupation or provide 4332
health care services is suspended, revoked, or surrendered or 4333
relinquished in lieu of discipline by an agency responsible for 4334
authorizing, certifying, or regulating an individual to practice 4335
a health care occupation or provide health care services in this 4336
state or another jurisdiction. The automatic suspension begins 4337
immediately upon entry of the order by the agency and lasts for 4338
ninety days to permit the board to investigate the basis for the 4339
action under this chapter. Continued practice during the 4340
automatic suspension shall be considered practicing without a 4341
license or certificate. 4342

The board shall notify the individual subject to the 4343
automatic suspension by certified mail or in person in 4344
accordance with section 119.07 of the Revised Code. If an 4345
individual subject to an automatic suspension under this 4346
division fails to make a timely request for an adjudication 4347
under Chapter 119. of the Revised Code, the board is not 4348

required to hold a hearing, but may adopt, by an affirmative 4349
vote of not fewer than six of its members, a final order that 4350
contains the board's findings. In that final order, the board 4351
may order any of the sanctions identified under division (A) or 4352
(B) of this section. 4353

Sec. 4731.27. (A) As used in this section, 4354
"collaboration," "physician," "standard care arrangement," and 4355
"supervision" have the same meanings as in section 4723.01 of 4356
the Revised Code. 4357

(B) A physician or podiatrist shall enter into a standard 4358
care arrangement with each certified midwife, clinical nurse 4359
specialist, certified nurse-midwife, or certified nurse 4360
practitioner with whom the physician or podiatrist is in 4361
collaboration. 4362

The collaborating physician or podiatrist shall fulfill 4363
the responsibilities of collaboration, as specified in the 4364
arrangement and in accordance with division (A) of section 4365
4723.431 of the Revised Code. A copy of the standard care 4366
arrangement shall be retained on file by the certified midwife's 4367
or nurse's employer. Prior approval of the standard care 4368
arrangement by the state medical board is not required, but the 4369
board may periodically review it. 4370

A physician or podiatrist who terminates collaboration 4371
with a certified midwife, certified nurse-midwife, certified 4372
nurse practitioner, or clinical nurse specialist before their 4373
standard care arrangement expires shall give the certified 4374
midwife or nurse the written or electronic notice of termination 4375
required by division (D)(1) of section 4723.431 of the Revised 4376
Code. 4377

Nothing in this division prohibits a hospital from hiring 4378
a certified midwife, clinical nurse specialist, certified nurse- 4379
midwife, or certified nurse practitioner as an employee and 4380
negotiating standard care arrangements on behalf of the employee 4381
as necessary to meet the requirements of this section. A 4382
standard care arrangement between the hospital's employee and 4383
the employee's collaborating physician is subject to approval by 4384
the medical staff and governing body of the hospital prior to 4385
implementation of the arrangement at the hospital. 4386

(C) A physician or podiatrist shall cooperate with the 4387
board of nursing in any investigation the board conducts with 4388
respect to a certified midwife, clinical nurse specialist, 4389
certified nurse-midwife, or certified nurse practitioner who 4390
collaborates with the physician or podiatrist or with respect to 4391
a certified registered nurse anesthetist who practices with the 4392
supervision of the physician or podiatrist. 4393

Section 2. That existing sections 3701.351, 3702.30, 4394
3702.301, 4723.01, 4723.02, 4723.03, 4723.06, 4723.07, 4723.08, 4395
4723.271, 4723.28, 4723.282, 4723.33, 4723.34, 4723.341, 4396
4723.35, 4723.41, 4723.43, 4723.431, 4723.432, 4723.481, 4397
4723.483, 4723.487, 4723.488, 4723.4810, 4723.4811, 4723.50, 4398
4723.91, 4723.99, 4731.22, and 4731.27 of the Revised Code are 4399
hereby repealed. 4400

Section 3. Sections 4723.54 and 4724.02 of the Revised 4401
Code, as enacted by this act, take effect January 1, 2028. 4402

Section 4. The General Assembly, applying the principle 4403
stated in division (B) of section 1.52 of the Revised Code that 4404
amendments are to be harmonized if reasonably capable of 4405
simultaneous operation, finds that the following sections, 4406
presented in this act as composites of the sections as amended 4407

by the acts indicated, are the resulting versions of the	4408
sections in effect prior to the effective date of the sections	4409
as presented in this act:	4410
Section 4723.08 of the Revised Code as amended by both	4411
H.B. 509 and S.B. 131 of the 134th General Assembly.	4412
Section 4723.431 of the Revised Code as amended by both	4413
H.B. 497 and S.B. 196 of the 135th General Assembly.	4414
Section 4723.481 of the Revised Code as amended by H.B. 33	4415
of the 135th General Assembly and by H.B. 110 and H.B. 509 of	4416
the 134th General Assembly.	4417