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**Representative Pelanda**

**Cosponsors: Representatives Brinkman, Becker, Roegner, Buchy, Brenner, Scherer, Schaffer, Burkley, Ryan, Maag, Schuring, Slaby, Ruhl, Reece, Hill, Thompson, Celebrezze, Hood, Barnes, Bishoff, Brown, Ginter, Anielski, Antonio, Arndt, Boose, Boyd, Clyde, Curtin, Derickson, Dovilla, Grossman, Hambley, Kuhns, Leland, Lepore-Hagan, O'Brien, M., O'Brien, S., Patterson, Rezabek, Rogers, Smith, K., Smith, R., Sprague, Sweeney**

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**A BILL**

To amend sections 1.64, 1751.67, 2133.211, 1  
2305.113, 2305.234, 2317.02, 2919.171, 2921.22, 2  
2925.61, 3701.351, 3701.926, 3719.121, 3727.08, 3  
3923.233, 3923.301, 3923.63, 3923.64, 4713.02, 4  
4723.01, 4723.02, 4723.03, 4723.06, 4723.07, 5  
4723.08, 4723.09, 4723.151, 4723.16, 4723.24, 6  
4723.25, 4723.271, 4723.28, 4723.32, 4723.341, 7  
4723.41, 4723.42, 4723.43, 4723.431, 4723.432, 8  
4723.44, 4723.46, 4723.47, 4723.48, 4723.481, 9  
4723.482, 4723.486, 4723.487, 4723.488, 10  
4723.489, 4723.4810, 4723.491, 4723.492, 11  
4723.50, 4723.71, 4723.88, 4723.99, 4729.01, 12  
4731.27, 4755.48, 4755.481, 4761.17, 5120.55, 13  
and 5164.07, to enact new section 4723.49 and 14  
sections 4723.011 and 4723.493, and to repeal 15  
sections 4723.484, 4723.485, and 4723.49 of the 16  
Revised Code to revise the law governing 17  
advanced practice registered nurses. 18

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

**Section 1.** That sections 1.64, 1751.67, 2133.211, 19  
2305.113, 2305.234, 2317.02, 2919.171, 2921.22, 2925.61, 20  
3701.351, 3701.926, 3719.121, 3727.08, 3923.233, 3923.301, 21  
3923.63, 3923.64, 4713.02, 4723.01, 4723.02, 4723.03, 4723.06, 22  
4723.07, 4723.08, 4723.09, 4723.151, 4723.16, 4723.24, 4723.25, 23  
4723.271, 4723.28, 4723.32, 4723.341, 4723.41, 4723.42, 4723.43, 24  
4723.431, 4723.432, 4723.44, 4723.46, 4723.47, 4723.48, 25  
4723.481, 4723.482, 4723.486, 4723.487, 4723.488, 4723.489, 26  
4723.4810, 4723.491, 4723.492, 4723.50, 4723.71, 4723.88, 27  
4723.99, 4729.01, 4731.27, 4755.48, 4755.481, 4761.17, 5120.55, 28  
and 5164.07 be amended and new section 4723.49 and sections 29  
4723.011 and 4723.493 of the Revised Code be enacted to read as 30  
follows: 31

**Sec. 1.64.** As used in the Revised Code: 32

(A) "Certified nurse-midwife" means an advanced practice 33  
registered nurse who holds a current, valid ~~certificate of~~ 34  
authority license issued under Chapter 4723. of the Revised Code 35  
~~that authorizes the practice of nursing and is designated as a~~ 36  
certified nurse-midwife in accordance with section ~~4723.43~~ 37  
4723.42 of the Revised Code and rules adopted by the board of 38  
nursing. 39

(B) "Certified nurse practitioner" means an advanced 40  
practice registered nurse who holds a current, valid ~~certificate~~ 41  
of authority license issued under Chapter 4723. of the Revised 42  
Code ~~that authorizes the practice of nursing and is designated~~ 43  
as a certified nurse practitioner in accordance with section 44  
~~4723.43~~ 4723.42 of the Revised Code and rules adopted by the 45

board of nursing. 46

(C) "Clinical nurse specialist" means ~~an advanced~~ 47  
~~practice~~ registered nurse who holds a current, valid certificate 48  
~~of authority license~~ issued under Chapter 4723. of the Revised 49  
~~Code that authorizes the practice of nursing and is designated~~ 50  
as a clinical nurse specialist in accordance with section 51  
~~4723.43-4723.42~~ of the Revised Code and rules adopted by the 52  
board of nursing. 53

(D) "Physician assistant" means an individual who is 54  
licensed under Chapter 4730. of the Revised Code to provide 55  
services as a physician assistant to patients under the 56  
supervision, control, and direction of one or more physicians. 57

**Sec. 1751.67.** (A) Each individual or group health insuring 58  
corporation policy, contract, or agreement delivered, issued for 59  
delivery, or renewed in this state that provides maternity 60  
benefits shall provide coverage of inpatient care and follow-up 61  
care for a mother and her newborn as follows: 62

(1) The policy, contract, or agreement shall cover a 63  
minimum of forty-eight hours of inpatient care following a 64  
normal vaginal delivery and a minimum of ninety-six hours of 65  
inpatient care following a cesarean delivery. Services covered 66  
as inpatient care shall include medical, educational, and any 67  
other services that are consistent with the inpatient care 68  
recommended in the protocols and guidelines developed by 69  
national organizations that represent pediatric, obstetric, and 70  
nursing professionals. 71

(2) The policy, contract, or agreement shall cover a 72  
physician-directed source of follow-up care or a source of 73  
follow-up care directed by an advanced practice registered 74

nurse. Services covered as follow-up care shall include physical 75  
assessment of the mother and newborn, parent education, 76  
assistance and training in breast or bottle feeding, assessment 77  
of the home support system, performance of any medically 78  
necessary and appropriate clinical tests, and any other services 79  
that are consistent with the follow-up care recommended in the 80  
protocols and guidelines developed by national organizations 81  
that represent pediatric, obstetric, and nursing professionals. 82  
The coverage shall apply to services provided in a medical 83  
setting or through home health care visits. The coverage shall 84  
apply to a home health care visit only if the provider who 85  
conducts the visit is knowledgeable and experienced in maternity 86  
and newborn care. 87

When a decision is made in accordance with division (B) of 88  
this section to discharge a mother or newborn prior to the 89  
expiration of the applicable number of hours of inpatient care 90  
required to be covered, the coverage of follow-up care shall 91  
apply to all follow-up care that is provided within seventy-two 92  
hours after discharge. When a mother or newborn receives at 93  
least the number of hours of inpatient care required to be 94  
covered, the coverage of follow-up care shall apply to follow-up 95  
care that is determined to be medically necessary by the 96  
provider responsible for discharging the mother or newborn. 97

(B) Any decision to shorten the length of inpatient stay 98  
to less than that specified under division (A)(1) of this 99  
section shall be made by the physician attending the mother or 100  
newborn, except that if a certified nurse-midwife is attending 101  
the mother in collaboration with a physician, the decision may 102  
be made by the nurse-midwife. Decisions regarding early 103  
discharge shall be made only after conferring with the mother or 104  
a person responsible for the mother or newborn. For purposes of 105

this division, a person responsible for the mother or newborn 106  
may include a parent, guardian, or any other person with 107  
authority to make medical decisions for the mother or newborn. 108

(C) (1) No health insuring corporation may do either of the 109  
following: 110

(a) Terminate the participation of a provider or health 111  
care facility in an individual or group health care plan solely 112  
for making recommendations for inpatient or follow-up care for a 113  
particular mother or newborn that are consistent with the care 114  
required to be covered by this section; 115

(b) Establish or offer monetary or other financial 116  
incentives for the purpose of encouraging a person to decline 117  
the inpatient or follow-up care required to be covered by this 118  
section. 119

(2) Whoever violates division (C) (1) (a) or (b) of this 120  
section has engaged in an unfair and deceptive act or practice 121  
in the business of insurance under sections 3901.19 to 3901.26 122  
of the Revised Code. 123

(D) This section does not do any of the following: 124

(1) Require a policy, contract, or agreement to cover 125  
inpatient or follow-up care that is not received in accordance 126  
with the policy's, contract's, or agreement's terms pertaining 127  
to the providers and facilities from which an individual is 128  
authorized to receive health care services; 129

(2) Require a mother or newborn to stay in a hospital or 130  
other inpatient setting for a fixed period of time following 131  
delivery; 132

(3) Require a child to be delivered in a hospital or other 133

inpatient setting; 134

(4) Authorize a certified nurse-midwife to practice beyond 135  
the authority to practice nurse-midwifery in accordance with 136  
Chapter 4723. of the Revised Code; 137

(5) Establish minimum standards of medical diagnosis, 138  
care, or treatment for inpatient or follow-up care for a mother 139  
or newborn. A deviation from the care required to be covered 140  
under this section shall not, solely on the basis of this 141  
section, give rise to a medical claim or to derivative claims 142  
for relief, as those terms are defined in section 2305.113 of 143  
the Revised Code. 144

**Sec. 2133.211.** A person who holds a ~~certificate of~~ 145  
~~authority as a certified nurse practitioner or clinical nurse-~~ 146  
~~specialist~~ current, valid license issued under Chapter 4723. of 147  
the Revised Code to practice as an advanced practice registered 148  
nurse may take any action that may be taken by an attending 149  
physician under sections 2133.21 to 2133.26 of the Revised Code 150  
and has the immunity provided by section 2133.22 of the Revised 151  
Code if the action is taken pursuant to a standard care 152  
arrangement with a collaborating physician. 153

A person who holds a license to practice as a physician 154  
assistant issued under Chapter 4730. of the Revised Code may 155  
take any action that may be taken by an attending physician 156  
under sections 2133.21 to 2133.26 of the Revised Code and has 157  
the immunity provided by section 2133.22 of the Revised Code if 158  
the action is taken pursuant to a supervision agreement entered 159  
into under section 4730.19 of the Revised Code, including, if 160  
applicable, the policies of a health care facility in which the 161  
physician assistant is practicing. 162

**Sec. 2305.113.** (A) Except as otherwise provided in this 163  
section, an action upon a medical, dental, optometric, or 164  
chiropractic claim shall be commenced within one year after the 165  
cause of action accrued. 166

(B) (1) If prior to the expiration of the one-year period 167  
specified in division (A) of this section, a claimant who 168  
allegedly possesses a medical, dental, optometric, or 169  
chiropractic claim gives to the person who is the subject of 170  
that claim written notice that the claimant is considering 171  
bringing an action upon that claim, that action may be commenced 172  
against the person notified at any time within one hundred 173  
eighty days after the notice is so given. 174

(2) An insurance company shall not consider the existence 175  
or nonexistence of a written notice described in division (B) (1) 176  
of this section in setting the liability insurance premium rates 177  
that the company may charge the company's insured person who is 178  
notified by that written notice. 179

(C) Except as to persons within the age of minority or of 180  
unsound mind as provided by section 2305.16 of the Revised Code, 181  
and except as provided in division (D) of this section, both of 182  
the following apply: 183

(1) No action upon a medical, dental, optometric, or 184  
chiropractic claim shall be commenced more than four years after 185  
the occurrence of the act or omission constituting the alleged 186  
basis of the medical, dental, optometric, or chiropractic claim. 187

(2) If an action upon a medical, dental, optometric, or 188  
chiropractic claim is not commenced within four years after the 189  
occurrence of the act or omission constituting the alleged basis 190  
of the medical, dental, optometric, or chiropractic claim, then, 191

any action upon that claim is barred. 192

(D) (1) If a person making a medical claim, dental claim, 193  
optometric claim, or chiropractic claim, in the exercise of 194  
reasonable care and diligence, could not have discovered the 195  
injury resulting from the act or omission constituting the 196  
alleged basis of the claim within three years after the 197  
occurrence of the act or omission, but, in the exercise of 198  
reasonable care and diligence, discovers the injury resulting 199  
from that act or omission before the expiration of the four-year 200  
period specified in division (C) (1) of this section, the person 201  
may commence an action upon the claim not later than one year 202  
after the person discovers the injury resulting from that act or 203  
omission. 204

(2) If the alleged basis of a medical claim, dental claim, 205  
optometric claim, or chiropractic claim is the occurrence of an 206  
act or omission that involves a foreign object that is left in 207  
the body of the person making the claim, the person may commence 208  
an action upon the claim not later than one year after the 209  
person discovered the foreign object or not later than one year 210  
after the person, with reasonable care and diligence, should 211  
have discovered the foreign object. 212

(3) A person who commences an action upon a medical claim, 213  
dental claim, optometric claim, or chiropractic claim under the 214  
circumstances described in division (D) (1) or (2) of this 215  
section has the affirmative burden of proving, by clear and 216  
convincing evidence, that the person, with reasonable care and 217  
diligence, could not have discovered the injury resulting from 218  
the act or omission constituting the alleged basis of the claim 219  
within the three-year period described in division (D) (1) of 220  
this section or within the one-year period described in division 221



(D) (2) of this section, whichever is applicable.	222
(E) As used in this section:	223
(1) "Hospital" includes any person, corporation,	224
association, board, or authority that is responsible for the	225
operation of any hospital licensed or registered in the state,	226
including, but not limited to, those that are owned or operated	227
by the state, political subdivisions, any person, any	228
corporation, or any combination of the state, political	229
subdivisions, persons, and corporations. "Hospital" also	230
includes any person, corporation, association, board, entity, or	231
authority that is responsible for the operation of any clinic	232
that employs a full-time staff of physicians practicing in more	233
than one recognized medical specialty and rendering advice,	234
diagnosis, care, and treatment to individuals. "Hospital" does	235
not include any hospital operated by the government of the	236
United States or any of its branches.	237
(2) "Physician" means a person who is licensed to practice	238
medicine and surgery or osteopathic medicine and surgery by the	239
state medical board or a person who otherwise is authorized to	240
practice medicine and surgery or osteopathic medicine and	241
surgery in this state.	242
(3) "Medical claim" means any claim that is asserted in	243
any civil action against a physician, podiatrist, hospital,	244
home, or residential facility, against any employee or agent of	245
a physician, podiatrist, hospital, home, or residential	246
facility, or against a licensed practical nurse, registered	247
nurse, advanced practice registered nurse, physical therapist,	248
physician assistant, emergency medical technician-basic,	249
emergency medical technician-intermediate, or emergency medical	250
technician-paramedic, and that arises out of the medical	251

diagnosis, care, or treatment of any person. "Medical claim"	252
includes the following:	253
(a) Derivative claims for relief that arise from the plan	254
of care, medical diagnosis, or treatment of a person;	255
(b) Claims that arise out of the plan of care, medical	256
diagnosis, or treatment of any person and to which either of the	257
following applies:	258
(i) The claim results from acts or omissions in providing	259
medical care.	260
(ii) The claim results from the hiring, training,	261
supervision, retention, or termination of caregivers providing	262
medical diagnosis, care, or treatment.	263
(c) Claims that arise out of the plan of care, medical	264
diagnosis, or treatment of any person and that are brought under	265
section 3721.17 of the Revised Code;	266
(d) Claims that arise out of skilled nursing care or	267
personal care services provided in a home pursuant to the plan	268
of care, medical diagnosis, or treatment.	269
(4) "Podiatrist" means any person who is licensed to	270
practice podiatric medicine and surgery by the state medical	271
board.	272
(5) "Dentist" means any person who is licensed to practice	273
dentistry by the state dental board.	274
(6) "Dental claim" means any claim that is asserted in any	275
civil action against a dentist, or against any employee or agent	276
of a dentist, and that arises out of a dental operation or the	277
dental diagnosis, care, or treatment of any person. "Dental	278
claim" includes derivative claims for relief that arise from a	279

dental operation or the dental diagnosis, care, or treatment of 280  
a person. 281

(7) "Derivative claims for relief" include, but are not 282  
limited to, claims of a parent, guardian, custodian, or spouse 283  
of an individual who was the subject of any medical diagnosis, 284  
care, or treatment, dental diagnosis, care, or treatment, dental 285  
operation, optometric diagnosis, care, or treatment, or 286  
chiropractic diagnosis, care, or treatment, that arise from that 287  
diagnosis, care, treatment, or operation, and that seek the 288  
recovery of damages for any of the following: 289

(a) Loss of society, consortium, companionship, care, 290  
assistance, attention, protection, advice, guidance, counsel, 291  
instruction, training, or education, or any other intangible 292  
loss that was sustained by the parent, guardian, custodian, or 293  
spouse; 294

(b) Expenditures of the parent, guardian, custodian, or 295  
spouse for medical, dental, optometric, or chiropractic care or 296  
treatment, for rehabilitation services, or for other care, 297  
treatment, services, products, or accommodations provided to the 298  
individual who was the subject of the medical diagnosis, care, 299  
or treatment, the dental diagnosis, care, or treatment, the 300  
dental operation, the optometric diagnosis, care, or treatment, 301  
or the chiropractic diagnosis, care, or treatment. 302

(8) "Registered nurse" means any person who is licensed to 303  
practice nursing as a registered nurse by the board of nursing. 304

(9) "Chiropractic claim" means any claim that is asserted 305  
in any civil action against a chiropractor, or against any 306  
employee or agent of a chiropractor, and that arises out of the 307  
chiropractic diagnosis, care, or treatment of any person. 308

"Chiropractic claim" includes derivative claims for relief that 309  
arise from the chiropractic diagnosis, care, or treatment of a 310  
person. 311

(10) "Chiropractor" means any person who is licensed to 312  
practice chiropractic by the state chiropractic board. 313

(11) "Optometric claim" means any claim that is asserted 314  
in any civil action against an optometrist, or against any 315  
employee or agent of an optometrist, and that arises out of the 316  
optometric diagnosis, care, or treatment of any person. 317

"Optometric claim" includes derivative claims for relief that 318  
arise from the optometric diagnosis, care, or treatment of a 319  
person. 320

(12) "Optometrist" means any person licensed to practice 321  
optometry by the state board of optometry. 322

(13) "Physical therapist" means any person who is licensed 323  
to practice physical therapy under Chapter 4755. of the Revised 324  
Code. 325

(14) "Home" has the same meaning as in section 3721.10 of 326  
the Revised Code. 327

(15) "Residential facility" means a facility licensed 328  
under section 5123.19 of the Revised Code. 329

(16) "Advanced practice registered nurse" ~~means any~~ 330  
~~certified nurse practitioner, clinical nurse specialist,~~ 331  
~~certified registered nurse anesthetist, or certified nurse~~ 332  
~~midwife who holds a certificate of authority issued by the board~~ 333  
~~of nursing under Chapter 4723. has the same meaning as in~~ 334  
section 4723.01 of the Revised Code. 335

(17) "Licensed practical nurse" means any person who is 336

licensed to practice nursing as a licensed practical nurse by 337  
the board of nursing pursuant to Chapter 4723. of the Revised 338  
Code. 339

(18) "Physician assistant" means any person who is 340  
licensed as a physician assistant under Chapter 4730. of the 341  
Revised Code. 342

(19) "Emergency medical technician-basic," "emergency 343  
medical technician-intermediate," and "emergency medical 344  
technician-paramedic" means any person who is certified under 345  
Chapter 4765. of the Revised Code as an emergency medical 346  
technician-basic, emergency medical technician-intermediate, or 347  
emergency medical technician-paramedic, whichever is applicable. 348

(20) "Skilled nursing care" and "personal care services" 349  
have the same meanings as in section 3721.01 of the Revised 350  
Code. 351

**Sec. 2305.234.** (A) As used in this section: 352

(1) "Chiropractic claim," "medical claim," and "optometric 353  
claim" have the same meanings as in section 2305.113 of the 354  
Revised Code. 355

(2) "Dental claim" has the same meaning as in section 356  
2305.113 of the Revised Code, except that it does not include 357  
any claim arising out of a dental operation or any derivative 358  
claim for relief that arises out of a dental operation. 359

(3) "Governmental health care program" has the same 360  
meaning as in section 4731.65 of the Revised Code. 361

(4) "Health care facility or location" means a hospital, 362  
clinic, ambulatory surgical facility, office of a health care 363  
professional or associated group of health care professionals, 364

training institution for health care professionals, a free 365  
clinic or other nonprofit shelter or health care facility as 366  
those terms are defined in section 3701.071 of the Revised Code, 367  
or any other place where medical, dental, or other health- 368  
related diagnosis, care, or treatment is provided to a person. 369

(5) "Health care professional" means any of the following 370  
who provide medical, dental, or other health-related diagnosis, 371  
care, or treatment: 372

(a) Physicians authorized under Chapter 4731. of the 373  
Revised Code to practice medicine and surgery or osteopathic 374  
medicine and surgery; 375

(b) ~~Registered Advanced practice registered nurses, 376  
registered nurses, and licensed practical nurses licensed under 377  
Chapter 4723. of the Revised Code and individuals who hold a 378  
certificate of authority issued under that chapter that 379  
authorizes the practice of nursing as a certified registered 380  
nurse anesthetist, clinical nurse specialist, certified nurse 381  
midwife, or certified nurse practitioner;~~ 382

(c) Physician assistants authorized to practice under 383  
Chapter 4730. of the Revised Code; 384

(d) Dentists and dental hygienists licensed under Chapter 385  
4715. of the Revised Code; 386

(e) Physical therapists, physical therapist assistants, 387  
occupational therapists, occupational therapy assistants, and 388  
athletic trainers licensed under Chapter 4755. of the Revised 389  
Code; 390

(f) Chiropractors licensed under Chapter 4734. of the 391  
Revised Code; 392

(g) Optometrists licensed under Chapter 4725. of the Revised Code;	393 394
(h) Podiatrists authorized under Chapter 4731. of the Revised Code to practice podiatry;	395 396
(i) Dietitians licensed under Chapter 4759. of the Revised Code;	397 398
(j) Pharmacists licensed under Chapter 4729. of the Revised Code;	399 400
(k) Emergency medical technicians-basic, emergency medical technicians-intermediate, and emergency medical technicians-paramedic, certified under Chapter 4765. of the Revised Code;	401 402 403
(l) Respiratory care professionals licensed under Chapter 4761. of the Revised Code;	404 405
(m) Speech-language pathologists and audiologists licensed under Chapter 4753. of the Revised Code;	406 407
(n) Licensed professional clinical counselors, licensed professional counselors, independent social workers, social workers, independent marriage and family therapists, and marriage and family therapists, licensed under Chapter 4757. of the Revised Code;	408 409 410 411 412
(o) Psychologists licensed under Chapter 4732. of the Revised Code;	413 414
(p) Individuals licensed or certified under Chapter 4758. of the Revised Code who are acting within the scope of their license or certificate as members of the profession of chemical dependency counseling or alcohol and other drug prevention services.	415 416 417 418 419

(6) "Health care worker" means a person other than a health care professional who provides medical, dental, or other health-related care or treatment under the direction of a health care professional with the authority to direct that individual's activities, including medical technicians, medical assistants, dental assistants, orderlies, aides, and individuals acting in similar capacities.

(7) "Indigent and uninsured person" means a person who meets both of the following requirements:

(a) Relative to being indigent, the person's income is not greater than two hundred per cent of the federal poverty line, as defined by the United States office of management and budget and revised in accordance with section 673(2) of the "Omnibus Budget Reconciliation Act of 1981," 95 Stat. 511, 42 U.S.C. 9902, as amended, except in any case in which division (A) (7) (b) (iii) of this section includes a person whose income is greater than two hundred per cent of the federal poverty line.

(b) Relative to being uninsured, one of the following applies:

(i) The person is not a policyholder, certificate holder, insured, contract holder, subscriber, enrollee, member, beneficiary, or other covered individual under a health insurance or health care policy, contract, or plan.

(ii) The person is a policyholder, certificate holder, insured, contract holder, subscriber, enrollee, member, beneficiary, or other covered individual under a health insurance or health care policy, contract, or plan, but the insurer, policy, contract, or plan denies coverage or is the subject of insolvency or bankruptcy proceedings in any



jurisdiction. 449

(iii) Until June 30, 2019, the person is eligible for the 450  
medicaid program or is a medicaid recipient. 451

(iv) Except as provided in division (A) (7) (b) (iii) of this 452  
section, the person is not eligible for or a recipient, 453  
enrollee, or beneficiary of any governmental health care 454  
program. 455

(8) "Nonprofit health care referral organization" means an 456  
entity that is not operated for profit and refers patients to, 457  
or arranges for the provision of, health-related diagnosis, 458  
care, or treatment by a health care professional or health care 459  
worker. 460

(9) "Operation" means any procedure that involves cutting 461  
or otherwise infiltrating human tissue by mechanical means, 462  
including surgery, laser surgery, ionizing radiation, 463  
therapeutic ultrasound, or the removal of intraocular foreign 464  
bodies. "Operation" does not include the administration of 465  
medication by injection, unless the injection is administered in 466  
conjunction with a procedure infiltrating human tissue by 467  
mechanical means other than the administration of medicine by 468  
injection. "Operation" does not include routine dental 469  
restorative procedures, the scaling of teeth, or extractions of 470  
teeth that are not impacted. 471

(10) "Tort action" means a civil action for damages for 472  
injury, death, or loss to person or property other than a civil 473  
action for damages for a breach of contract or another agreement 474  
between persons or government entities. 475

(11) "Volunteer" means an individual who provides any 476  
medical, dental, or other health-care related diagnosis, care, 477

or treatment without the expectation of receiving and without 478  
receipt of any compensation or other form of remuneration from 479  
an indigent and uninsured person, another person on behalf of an 480  
indigent and uninsured person, any health care facility or 481  
location, any nonprofit health care referral organization, or 482  
any other person or government entity. 483

(12) "Community control sanction" has the same meaning as 484  
in section 2929.01 of the Revised Code. 485

(13) "Deep sedation" means a drug-induced depression of 486  
consciousness during which a patient cannot be easily aroused 487  
but responds purposefully following repeated or painful 488  
stimulation, a patient's ability to independently maintain 489  
ventilatory function may be impaired, a patient may require 490  
assistance in maintaining a patent airway and spontaneous 491  
ventilation may be inadequate, and cardiovascular function is 492  
usually maintained. 493

(14) "General anesthesia" means a drug-induced loss of 494  
consciousness during which a patient is not arousable, even by 495  
painful stimulation, the ability to independently maintain 496  
ventilatory function is often impaired, a patient often requires 497  
assistance in maintaining a patent airway, positive pressure 498  
ventilation may be required because of depressed spontaneous 499  
ventilation or drug-induced depression of neuromuscular 500  
function, and cardiovascular function may be impaired. 501

(B) (1) Subject to divisions (F) and (G) (3) of this 502  
section, a health care professional who is a volunteer and 503  
complies with division (B) (2) of this section is not liable in 504  
damages to any person or government entity in a tort or other 505  
civil action, including an action on a medical, dental, 506  
chiropractic, optometric, or other health-related claim, for 507

injury, death, or loss to person or property that allegedly 508  
arises from an action or omission of the volunteer in the 509  
provision to an indigent and uninsured person of medical, 510  
dental, or other health-related diagnosis, care, or treatment, 511  
including the provision of samples of medicine and other medical 512  
products, unless the action or omission constitutes willful or 513  
wanton misconduct. 514

(2) To qualify for the immunity described in division (B) 515  
(1) of this section, a health care professional shall do all of 516  
the following prior to providing diagnosis, care, or treatment: 517

(a) Determine, in good faith, that the indigent and 518  
uninsured person is mentally capable of giving informed consent 519  
to the provision of the diagnosis, care, or treatment and is not 520  
subject to duress or under undue influence; 521

(b) Inform the person of the provisions of this section, 522  
including notifying the person that, by giving informed consent 523  
to the provision of the diagnosis, care, or treatment, the 524  
person cannot hold the health care professional liable for 525  
damages in a tort or other civil action, including an action on 526  
a medical, dental, chiropractic, optometric, or other health- 527  
related claim, unless the action or omission of the health care 528  
professional constitutes willful or wanton misconduct; 529

(c) Obtain the informed consent of the person and a 530  
written waiver, signed by the person or by another individual on 531  
behalf of and in the presence of the person, that states that 532  
the person is mentally competent to give informed consent and, 533  
without being subject to duress or under undue influence, gives 534  
informed consent to the provision of the diagnosis, care, or 535  
treatment subject to the provisions of this section. A written 536  
waiver under division (B) (2) (c) of this section shall state 537

clearly and in conspicuous type that the person or other 538  
individual who signs the waiver is signing it with full 539  
knowledge that, by giving informed consent to the provision of 540  
the diagnosis, care, or treatment, the person cannot bring a 541  
tort or other civil action, including an action on a medical, 542  
dental, chiropractic, optometric, or other health-related claim, 543  
against the health care professional unless the action or 544  
omission of the health care professional constitutes willful or 545  
wanton misconduct. 546

(3) A physician or podiatrist who is not covered by 547  
medical malpractice insurance, but complies with division (B) (2) 548  
of this section, is not required to comply with division (A) of 549  
section 4731.143 of the Revised Code. 550

(C) Subject to divisions (F) and (G) (3) of this section, 551  
health care workers who are volunteers are not liable in damages 552  
to any person or government entity in a tort or other civil 553  
action, including an action upon a medical, dental, 554  
chiropractic, optometric, or other health-related claim, for 555  
injury, death, or loss to person or property that allegedly 556  
arises from an action or omission of the health care worker in 557  
the provision to an indigent and uninsured person of medical, 558  
dental, or other health-related diagnosis, care, or treatment, 559  
unless the action or omission constitutes willful or wanton 560  
misconduct. 561

(D) Subject to divisions (F) and (G) (3) of this section, a 562  
nonprofit health care referral organization is not liable in 563  
damages to any person or government entity in a tort or other 564  
civil action, including an action on a medical, dental, 565  
chiropractic, optometric, or other health-related claim, for 566  
injury, death, or loss to person or property that allegedly 567

arises from an action or omission of the nonprofit health care 568  
referral organization in referring indigent and uninsured 569  
persons to, or arranging for the provision of, medical, dental, 570  
or other health-related diagnosis, care, or treatment by a 571  
health care professional described in division (B) (1) of this 572  
section or a health care worker described in division (C) of 573  
this section, unless the action or omission constitutes willful 574  
or wanton misconduct. 575

(E) Subject to divisions (F) and (G) (3) of this section 576  
and to the extent that the registration requirements of section 577  
3701.071 of the Revised Code apply, a health care facility or 578  
location associated with a health care professional described in 579  
division (B) (1) of this section, a health care worker described 580  
in division (C) of this section, or a nonprofit health care 581  
referral organization described in division (D) of this section 582  
is not liable in damages to any person or government entity in a 583  
tort or other civil action, including an action on a medical, 584  
dental, chiropractic, optometric, or other health-related claim, 585  
for injury, death, or loss to person or property that allegedly 586  
arises from an action or omission of the health care 587  
professional or worker or nonprofit health care referral 588  
organization relative to the medical, dental, or other health- 589  
related diagnosis, care, or treatment provided to an indigent 590  
and uninsured person on behalf of or at the health care facility 591  
or location, unless the action or omission constitutes willful 592  
or wanton misconduct. 593

(F) (1) Except as provided in division (F) (2) of this 594  
section, the immunities provided by divisions (B), (C), (D), and 595  
(E) of this section are not available to a health care 596  
professional, health care worker, nonprofit health care referral 597  
organization, or health care facility or location if, at the 598

time of an alleged injury, death, or loss to person or property, 599  
the health care professionals or health care workers involved 600  
are providing one of the following: 601

(a) Any medical, dental, or other health-related 602  
diagnosis, care, or treatment pursuant to a community service 603  
work order entered by a court under division (B) of section 604  
2951.02 of the Revised Code or imposed by a court as a community 605  
control sanction; 606

(b) Performance of an operation to which any one of the 607  
following applies: 608

(i) The operation requires the administration of deep 609  
sedation or general anesthesia. 610

(ii) The operation is a procedure that is not typically 611  
performed in an office. 612

(iii) The individual involved is a health care 613  
professional, and the operation is beyond the scope of practice 614  
or the education, training, and competence, as applicable, of 615  
the health care professional. 616

(c) Delivery of a baby or any other purposeful termination 617  
of a human pregnancy. 618

(2) Division (F)(1) of this section does not apply when a 619  
health care professional or health care worker provides medical, 620  
dental, or other health-related diagnosis, care, or treatment 621  
that is necessary to preserve the life of a person in a medical 622  
emergency. 623

(G)(1) This section does not create a new cause of action 624  
or substantive legal right against a health care professional, 625  
health care worker, nonprofit health care referral organization, 626

or health care facility or location. 627

(2) This section does not affect any immunities from civil 628  
liability or defenses established by another section of the 629  
Revised Code or available at common law to which a health care 630  
professional, health care worker, nonprofit health care referral 631  
organization, or health care facility or location may be 632  
entitled in connection with the provision of emergency or other 633  
medical, dental, or other health-related diagnosis, care, or 634  
treatment. 635

(3) This section does not grant an immunity from tort or 636  
other civil liability to a health care professional, health care 637  
worker, nonprofit health care referral organization, or health 638  
care facility or location for actions that are outside the scope 639  
of authority of health care professionals or health care 640  
workers. 641

In the case of the diagnosis, care, or treatment of an 642  
indigent and uninsured person who is eligible for the medicaid 643  
program or is a medicaid recipient, this section grants an 644  
immunity from tort or other civil liability only if the person's 645  
diagnosis, care, or treatment is provided in a free clinic, as 646  
defined in section 3701.071 of the Revised Code. 647

(4) This section does not affect any legal responsibility 648  
of a health care professional, health care worker, or nonprofit 649  
health care referral organization to comply with any applicable 650  
law of this state or rule of an agency of this state. 651

(5) This section does not affect any legal responsibility 652  
of a health care facility or location to comply with any 653  
applicable law of this state, rule of an agency of this state, 654  
or local code, ordinance, or regulation that pertains to or 655

regulates building, housing, air pollution, water pollution, 656  
sanitation, health, fire, zoning, or safety. 657

**Sec. 2317.02.** The following persons shall not testify in 658  
certain respects: 659

(A) (1) An attorney, concerning a communication made to the 660  
attorney by a client in that relation or concerning the 661  
attorney's advice to a client, except that the attorney may 662  
testify by express consent of the client or, if the client is 663  
deceased, by the express consent of the surviving spouse or the 664  
executor or administrator of the estate of the deceased client. 665  
However, if the client voluntarily reveals the substance of 666  
attorney-client communications in a nonprivileged context or is 667  
deemed by section 2151.421 of the Revised Code to have waived 668  
any testimonial privilege under this division, the attorney may 669  
be compelled to testify on the same subject. 670

The testimonial privilege established under this division 671  
does not apply concerning either of the following: 672

(a) A communication between a client in a capital case, as 673  
defined in section 2901.02 of the Revised Code, and the client's 674  
attorney if the communication is relevant to a subsequent 675  
ineffective assistance of counsel claim by the client alleging 676  
that the attorney did not effectively represent the client in 677  
the case; 678

(b) A communication between a client who has since died 679  
and the deceased client's attorney if the communication is 680  
relevant to a dispute between parties who claim through that 681  
deceased client, regardless of whether the claims are by testate 682  
or intestate succession or by inter vivos transaction, and the 683  
dispute addresses the competency of the deceased client when the 684



deceased client executed a document that is the basis of the 685  
dispute or whether the deceased client was a victim of fraud, 686  
undue influence, or duress when the deceased client executed a 687  
document that is the basis of the dispute. 688

(2) An attorney, concerning a communication made to the 689  
attorney by a client in that relationship or the attorney's 690  
advice to a client, except that if the client is an insurance 691  
company, the attorney may be compelled to testify, subject to an 692  
in camera inspection by a court, about communications made by 693  
the client to the attorney or by the attorney to the client that 694  
are related to the attorney's aiding or furthering an ongoing or 695  
future commission of bad faith by the client, if the party 696  
seeking disclosure of the communications has made a prima-facie 697  
showing of bad faith, fraud, or criminal misconduct by the 698  
client. 699

(B) (1) A physician, advanced practice registered nurse, or 700  
~~a~~ dentist concerning a communication made to the physician,  701  
~~advanced practice registered nurse,~~ or dentist by a patient in 702  
that relation or the ~~physician's or dentist's~~ advice of a 703  
physician, advanced practice registered nurse, or dentist given 704  
to a patient, except as otherwise provided in this division, 705  
division (B) (2), and division (B) (3) of this section, and except 706  
that, if the patient is deemed by section 2151.421 of the 707  
Revised Code to have waived any testimonial privilege under this 708  
division, the physician or advanced practice registered nurse 709  
may be compelled to testify on the same subject. 710

The testimonial privilege established under this division 711  
does not apply, and a physician, advanced practice registered 712  
nurse, or dentist may testify or may be compelled to testify, in 713  
any of the following circumstances: 714

(a) In any civil action, in accordance with the discovery 715  
provisions of the Rules of Civil Procedure in connection with a 716  
civil action, or in connection with a claim under Chapter 4123. 717  
of the Revised Code, under any of the following circumstances: 718

(i) If the patient or the guardian or other legal 719  
representative of the patient gives express consent; 720

(ii) If the patient is deceased, the spouse of the patient 721  
or the executor or administrator of the patient's estate gives 722  
express consent; 723

(iii) If a medical claim, dental claim, chiropractic 724  
claim, or optometric claim, as defined in section 2305.113 of 725  
the Revised Code, an action for wrongful death, any other type 726  
of civil action, or a claim under Chapter 4123. of the Revised 727  
Code is filed by the patient, the personal representative of the 728  
estate of the patient if deceased, or the patient's guardian or 729  
other legal representative. 730

(b) In any civil action concerning court-ordered treatment 731  
or services received by a patient, if the court-ordered 732  
treatment or services were ordered as part of a case plan 733  
journalized under section 2151.412 of the Revised Code or the 734  
court-ordered treatment or services are necessary or relevant to 735  
dependency, neglect, or abuse or temporary or permanent custody 736  
proceedings under Chapter 2151. of the Revised Code. 737

(c) In any criminal action concerning any test or the 738  
results of any test that determines the presence or 739  
concentration of alcohol, a drug of abuse, a combination of 740  
them, a controlled substance, or a metabolite of a controlled 741  
substance in the patient's whole blood, blood serum or plasma, 742  
breath, urine, or other bodily substance at any time relevant to 743

the criminal offense in question. 744

(d) In any criminal action against a physician, advanced 745  
practice registered nurse, or dentist. In such an action, the 746  
testimonial privilege established under this division does not 747  
prohibit the admission into evidence, in accordance with the 748  
Rules of Evidence, of a patient's medical or dental records or 749  
other communications between a patient and the physician,  750  
advanced practice registered nurse, or dentist that are related 751  
to the action and obtained by subpoena, search warrant, or other 752  
lawful means. A court that permits or compels a physician,  753  
advanced practice registered nurse, or dentist to testify in 754  
such an action or permits the introduction into evidence of 755  
patient records or other communications in such an action shall 756  
require that appropriate measures be taken to ensure that the 757  
confidentiality of any patient named or otherwise identified in 758  
the records is maintained. Measures to ensure confidentiality 759  
that may be taken by the court include sealing its records or 760  
deleting specific information from its records. 761

(e) (i) If the communication was between a patient who has 762  
since died and the deceased patient's physician, advanced 763  
practice registered nurse, or dentist, the communication is 764  
relevant to a dispute between parties who claim through that 765  
deceased patient, regardless of whether the claims are by 766  
testate or intestate succession or by inter vivos transaction, 767  
and the dispute addresses the competency of the deceased patient 768  
when the deceased patient executed a document that is the basis 769  
of the dispute or whether the deceased patient was a victim of 770  
fraud, undue influence, or duress when the deceased patient 771  
executed a document that is the basis of the dispute. 772

(ii) If neither the spouse of a patient nor the executor 773

or administrator of that patient's estate gives consent under 774  
division (B) (1) (a) (ii) of this section, testimony or the 775  
disclosure of the patient's medical records by a physician, 776  
advanced practice registered nurse, dentist, or other health 777  
care provider under division (B) (1) (e) (i) of this section is a 778  
permitted use or disclosure of protected health information, as 779  
defined in 45 C.F.R. 160.103, and an authorization or 780  
opportunity to be heard shall not be required. 781

(iii) Division (B) (1) (e) (i) of this section does not 782  
require a mental health professional to disclose psychotherapy 783  
notes, as defined in 45 C.F.R. 164.501. 784

(iv) An interested person who objects to testimony or 785  
disclosure under division (B) (1) (e) (i) of this section may seek 786  
a protective order pursuant to Civil Rule 26. 787

(v) A person to whom protected health information is 788  
disclosed under division (B) (1) (e) (i) of this section shall not 789  
use or disclose the protected health information for any purpose 790  
other than the litigation or proceeding for which the 791  
information was requested and shall return the protected health 792  
information to the covered entity or destroy the protected 793  
health information, including all copies made, at the conclusion 794  
of the litigation or proceeding. 795

(2) (a) If any law enforcement officer submits a written 796  
statement to a health care provider that states that an official 797  
criminal investigation has begun regarding a specified person or 798  
that a criminal action or proceeding has been commenced against 799  
a specified person, that requests the provider to supply to the 800  
officer copies of any records the provider possesses that 801  
pertain to any test or the results of any test administered to 802  
the specified person to determine the presence or concentration 803

of alcohol, a drug of abuse, a combination of them, a controlled 804  
substance, or a metabolite of a controlled substance in the 805  
person's whole blood, blood serum or plasma, breath, or urine at 806  
any time relevant to the criminal offense in question, and that 807  
conforms to section 2317.022 of the Revised Code, the provider, 808  
except to the extent specifically prohibited by any law of this 809  
state or of the United States, shall supply to the officer a 810  
copy of any of the requested records the provider possesses. If 811  
the health care provider does not possess any of the requested 812  
records, the provider shall give the officer a written statement 813  
that indicates that the provider does not possess any of the 814  
requested records. 815

(b) If a health care provider possesses any records of the 816  
type described in division (B) (2) (a) of this section regarding 817  
the person in question at any time relevant to the criminal 818  
offense in question, in lieu of personally testifying as to the 819  
results of the test in question, the custodian of the records 820  
may submit a certified copy of the records, and, upon its 821  
submission, the certified copy is qualified as authentic 822  
evidence and may be admitted as evidence in accordance with the 823  
Rules of Evidence. Division (A) of section 2317.422 of the 824  
Revised Code does not apply to any certified copy of records 825  
submitted in accordance with this division. Nothing in this 826  
division shall be construed to limit the right of any party to 827  
call as a witness the person who administered the test to which 828  
the records pertain, the person under whose supervision the test 829  
was administered, the custodian of the records, the person who 830  
made the records, or the person under whose supervision the 831  
records were made. 832

(3) (a) If the testimonial privilege described in division 833  
(B) (1) of this section does not apply as provided in division 834

(B) (1) (a) (iii) of this section, a physician, advanced practice registered nurse, or dentist may be compelled to testify or to submit to discovery under the Rules of Civil Procedure only as to a communication made to the physician, advanced practice registered nurse, or dentist by the patient in question in that relation, or the ~~physician's or dentist's~~ advice of the physician, advanced practice registered nurse, or dentist given to the patient in question, that related causally or historically to physical or mental injuries that are relevant to issues in the medical claim, dental claim, chiropractic claim, or optometric claim, action for wrongful death, other civil action, or claim under Chapter 4123. of the Revised Code.

(b) If the testimonial privilege described in division (B) (1) of this section does not apply to a physician, advanced practice registered nurse, or dentist as provided in division (B) (1) (c) of this section, the physician, advanced practice registered nurse, or dentist, in lieu of personally testifying as to the results of the test in question, may submit a certified copy of those results, and, upon its submission, the certified copy is qualified as authentic evidence and may be admitted as evidence in accordance with the Rules of Evidence. Division (A) of section 2317.422 of the Revised Code does not apply to any certified copy of results submitted in accordance with this division. Nothing in this division shall be construed to limit the right of any party to call as a witness the person who administered the test in question, the person under whose supervision the test was administered, the custodian of the results of the test, the person who compiled the results, or the person under whose supervision the results were compiled.

(4) The testimonial privilege described in division (B) (1) of this section is not waived when a communication is made by a

physician or advanced practice registered nurse to a pharmacist 866  
or when there is communication between a patient and a 867  
pharmacist in furtherance of the physician-patient or advanced 868  
practice registered nurse-patient relation. 869

(5) (a) As used in divisions (B) (1) to (4) of this section, 870  
"communication" means acquiring, recording, or transmitting any 871  
information, in any manner, concerning any facts, opinions, or 872  
statements necessary to enable a physician, advanced practice 873  
registered nurse, or dentist to diagnose, treat, prescribe, or 874  
act for a patient. A "communication" may include, but is not 875  
limited to, any medical or dental, office, or hospital 876  
communication such as a record, chart, letter, memorandum, 877  
laboratory test and results, x-ray, photograph, financial 878  
statement, diagnosis, or prognosis. 879

(b) As used in division (B) (2) of this section, "health 880  
care provider" means a hospital, ambulatory care facility, long- 881  
term care facility, pharmacy, emergency facility, or health care 882  
practitioner. 883

(c) As used in division (B) (5) (b) of this section: 884

(i) "Ambulatory care facility" means a facility that 885  
provides medical, diagnostic, or surgical treatment to patients 886  
who do not require hospitalization, including a dialysis center, 887  
ambulatory surgical facility, cardiac catheterization facility, 888  
diagnostic imaging center, extracorporeal shock wave lithotripsy 889  
center, home health agency, inpatient hospice, birthing center, 890  
radiation therapy center, emergency facility, and an urgent care 891  
center. "Ambulatory health care facility" does not include the 892  
private office of a physician, advanced practice registered 893  
nurse, or dentist, whether the office is for an individual or 894  
group practice. 895

(ii) "Emergency facility" means a hospital emergency department or any other facility that provides emergency medical services. 896  
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(iii) "Health care practitioner" has the same meaning as in section 4769.01 of the Revised Code. 899  
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(iv) "Hospital" has the same meaning as in section 3727.01 of the Revised Code. 901  
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(v) "Long-term care facility" means a nursing home, residential care facility, or home for the aging, as those terms are defined in section 3721.01 of the Revised Code; a residential facility licensed under section 5119.34 of the Revised Code that provides accommodations, supervision, and personal care services for three to sixteen unrelated adults; a nursing facility, as defined in section 5165.01 of the Revised Code; a skilled nursing facility, as defined in section 5165.01 of the Revised Code; and an intermediate care facility for individuals with intellectual disabilities, as defined in section 5124.01 of the Revised Code. 903  
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(vi) "Pharmacy" has the same meaning as in section 4729.01 of the Revised Code. 914  
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(d) As used in divisions (B)(1) and (2) of this section, "drug of abuse" has the same meaning as in section 4506.01 of the Revised Code. 916  
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(6) Divisions (B)(1), (2), (3), (4), and (5) of this section apply to doctors of medicine, doctors of osteopathic medicine, doctors of podiatry, advanced practice registered nurses, and dentists. 919  
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(7) Nothing in divisions (B)(1) to (6) of this section affects, or shall be construed as affecting, the immunity from 923  
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civil liability conferred by section 307.628 of the Revised Code 925  
or the immunity from civil liability conferred by section 926  
2305.33 of the Revised Code upon physicians or advanced practice 927  
registered nurses who report an employee's use of a drug of 928  
abuse, or a condition of an employee other than one involving 929  
the use of a drug of abuse, to the employer of the employee in 930  
accordance with division (B) of that section. As used in 931  
division (B) (7) of this section, "employee," "employer," and 932  
"physician" have the same meanings as in section 2305.33 of the 933  
Revised Code and "advanced practice registered nurse" has the 934  
same meaning as in section 4723.01 of the Revised Code. 935

(C) (1) A cleric, when the cleric remains accountable to 936  
the authority of that cleric's church, denomination, or sect, 937  
concerning a confession made, or any information confidentially 938  
communicated, to the cleric for a religious counseling purpose 939  
in the cleric's professional character. The cleric may testify 940  
by express consent of the person making the communication, 941  
except when the disclosure of the information is in violation of 942  
a sacred trust and except that, if the person voluntarily 943  
testifies or is deemed by division (A) (4) (c) of section 2151.421 944  
of the Revised Code to have waived any testimonial privilege 945  
under this division, the cleric may be compelled to testify on 946  
the same subject except when disclosure of the information is in 947  
violation of a sacred trust. 948

(2) As used in division (C) of this section: 949

(a) "Cleric" means a member of the clergy, rabbi, priest, 950  
Christian Science practitioner, or regularly ordained, 951  
accredited, or licensed minister of an established and legally 952  
cognizable church, denomination, or sect. 953

(b) "Sacred trust" means a confession or confidential 954

communication made to a cleric in the cleric's ecclesiastical 955  
capacity in the course of discipline enjoined by the church to 956  
which the cleric belongs, including, but not limited to, the 957  
Catholic Church, if both of the following apply: 958

(i) The confession or confidential communication was made 959  
directly to the cleric. 960

(ii) The confession or confidential communication was made 961  
in the manner and context that places the cleric specifically 962  
and strictly under a level of confidentiality that is considered 963  
inviolable by canon law or church doctrine. 964

(D) Husband or wife, concerning any communication made by 965  
one to the other, or an act done by either in the presence of 966  
the other, during coverture, unless the communication was made, 967  
or act done, in the known presence or hearing of a third person 968  
competent to be a witness; and such rule is the same if the 969  
marital relation has ceased to exist; 970

(E) A person who assigns a claim or interest, concerning 971  
any matter in respect to which the person would not, if a party, 972  
be permitted to testify; 973

(F) A person who, if a party, would be restricted under 974  
section 2317.03 of the Revised Code, when the property or thing 975  
is sold or transferred by an executor, administrator, guardian, 976  
trustee, heir, devisee, or legatee, shall be restricted in the 977  
same manner in any action or proceeding concerning the property 978  
or thing. 979

(G) (1) A school guidance counselor who holds a valid 980  
educator license from the state board of education as provided 981  
for in section 3319.22 of the Revised Code, a person licensed 982  
under Chapter 4757. of the Revised Code as a licensed 983

professional clinical counselor, licensed professional	984
counselor, social worker, independent social worker, marriage	985
and family therapist or independent marriage and family	986
therapist, or registered under Chapter 4757. of the Revised Code	987
as a social work assistant concerning a confidential	988
communication received from a client in that relation or the	989
person's advice to a client unless any of the following applies:	990
(a) The communication or advice indicates clear and	991
present danger to the client or other persons. For the purposes	992
of this division, cases in which there are indications of	993
present or past child abuse or neglect of the client constitute	994
a clear and present danger.	995
(b) The client gives express consent to the testimony.	996
(c) If the client is deceased, the surviving spouse or the	997
executor or administrator of the estate of the deceased client	998
gives express consent.	999
(d) The client voluntarily testifies, in which case the	1000
school guidance counselor or person licensed or registered under	1001
Chapter 4757. of the Revised Code may be compelled to testify on	1002
the same subject.	1003
(e) The court in camera determines that the information	1004
communicated by the client is not germane to the counselor-	1005
client, marriage and family therapist-client, or social worker-	1006
client relationship.	1007
(f) A court, in an action brought against a school, its	1008
administration, or any of its personnel by the client, rules	1009
after an in-camera inspection that the testimony of the school	1010
guidance counselor is relevant to that action.	1011
(g) The testimony is sought in a civil action and concerns	1012

court-ordered treatment or services received by a patient as 1013  
part of a case plan journalized under section 2151.412 of the 1014  
Revised Code or the court-ordered treatment or services are 1015  
necessary or relevant to dependency, neglect, or abuse or 1016  
temporary or permanent custody proceedings under Chapter 2151. 1017  
of the Revised Code. 1018

(2) Nothing in division (G) (1) of this section shall 1019  
relieve a school guidance counselor or a person licensed or 1020  
registered under Chapter 4757. of the Revised Code from the 1021  
requirement to report information concerning child abuse or 1022  
neglect under section 2151.421 of the Revised Code. 1023

(H) A mediator acting under a mediation order issued under 1024  
division (A) of section 3109.052 of the Revised Code or 1025  
otherwise issued in any proceeding for divorce, dissolution, 1026  
legal separation, annulment, or the allocation of parental 1027  
rights and responsibilities for the care of children, in any 1028  
action or proceeding, other than a criminal, delinquency, child 1029  
abuse, child neglect, or dependent child action or proceeding, 1030  
that is brought by or against either parent who takes part in 1031  
mediation in accordance with the order and that pertains to the 1032  
mediation process, to any information discussed or presented in 1033  
the mediation process, to the allocation of parental rights and 1034  
responsibilities for the care of the parents' children, or to 1035  
the awarding of parenting time rights in relation to their 1036  
children; 1037

(I) A communications assistant, acting within the scope of 1038  
the communication assistant's authority, when providing 1039  
telecommunications relay service pursuant to section 4931.06 of 1040  
the Revised Code or Title II of the "Communications Act of 1041  
1934," 104 Stat. 366 (1990), 47 U.S.C. 225, concerning a 1042

communication made through a telecommunications relay service. 1043  
Nothing in this section shall limit the obligation of a 1044  
communications assistant to divulge information or testify when 1045  
mandated by federal law or regulation or pursuant to subpoena in 1046  
a criminal proceeding. 1047

Nothing in this section shall limit any immunity or 1048  
privilege granted under federal law or regulation. 1049

(J) (1) A chiropractor in a civil proceeding concerning a 1050  
communication made to the chiropractor by a patient in that 1051  
relation or the chiropractor's advice to a patient, except as 1052  
otherwise provided in this division. The testimonial privilege 1053  
established under this division does not apply, and a 1054  
chiropractor may testify or may be compelled to testify, in any 1055  
civil action, in accordance with the discovery provisions of the 1056  
Rules of Civil Procedure in connection with a civil action, or 1057  
in connection with a claim under Chapter 4123. of the Revised 1058  
Code, under any of the following circumstances: 1059

(a) If the patient or the guardian or other legal 1060  
representative of the patient gives express consent. 1061

(b) If the patient is deceased, the spouse of the patient 1062  
or the executor or administrator of the patient's estate gives 1063  
express consent. 1064

(c) If a medical claim, dental claim, chiropractic claim, 1065  
or optometric claim, as defined in section 2305.113 of the 1066  
Revised Code, an action for wrongful death, any other type of 1067  
civil action, or a claim under Chapter 4123. of the Revised Code 1068  
is filed by the patient, the personal representative of the 1069  
estate of the patient if deceased, or the patient's guardian or 1070  
other legal representative. 1071

(2) If the testimonial privilege described in division (J) 1072  
(1) of this section does not apply as provided in division (J) 1073  
(1)(c) of this section, a chiropractor may be compelled to 1074  
testify or to submit to discovery under the Rules of Civil 1075  
Procedure only as to a communication made to the chiropractor by 1076  
the patient in question in that relation, or the chiropractor's 1077  
advice to the patient in question, that related causally or 1078  
historically to physical or mental injuries that are relevant to 1079  
issues in the medical claim, dental claim, chiropractic claim, 1080  
or optometric claim, action for wrongful death, other civil 1081  
action, or claim under Chapter 4123. of the Revised Code. 1082

(3) The testimonial privilege established under this 1083  
division does not apply, and a chiropractor may testify or be 1084  
compelled to testify, in any criminal action or administrative 1085  
proceeding. 1086

(4) As used in this division, "communication" means 1087  
acquiring, recording, or transmitting any information, in any 1088  
manner, concerning any facts, opinions, or statements necessary 1089  
to enable a chiropractor to diagnose, treat, or act for a 1090  
patient. A communication may include, but is not limited to, any 1091  
chiropractic, office, or hospital communication such as a 1092  
record, chart, letter, memorandum, laboratory test and results, 1093  
x-ray, photograph, financial statement, diagnosis, or prognosis. 1094

(K)(1) Except as provided under division (K)(2) of this 1095  
section, a critical incident stress management team member 1096  
concerning a communication received from an individual who 1097  
receives crisis response services from the team member, or the 1098  
team member's advice to the individual, during a debriefing 1099  
session. 1100

(2) The testimonial privilege established under division 1101

(K) (1) of this section does not apply if any of the following 1102  
are true: 1103

(a) The communication or advice indicates clear and 1104  
present danger to the individual who receives crisis response 1105  
services or to other persons. For purposes of this division, 1106  
cases in which there are indications of present or past child 1107  
abuse or neglect of the individual constitute a clear and 1108  
present danger. 1109

(b) The individual who received crisis response services 1110  
gives express consent to the testimony. 1111

(c) If the individual who received crisis response 1112  
services is deceased, the surviving spouse or the executor or 1113  
administrator of the estate of the deceased individual gives 1114  
express consent. 1115

(d) The individual who received crisis response services 1116  
voluntarily testifies, in which case the team member may be 1117  
compelled to testify on the same subject. 1118

(e) The court in camera determines that the information 1119  
communicated by the individual who received crisis response 1120  
services is not germane to the relationship between the 1121  
individual and the team member. 1122

(f) The communication or advice pertains or is related to 1123  
any criminal act. 1124

(3) As used in division (K) of this section: 1125

(a) "Crisis response services" means consultation, risk 1126  
assessment, referral, and on-site crisis intervention services 1127  
provided by a critical incident stress management team to 1128  
individuals affected by crisis or disaster. 1129

(b) "Critical incident stress management team member" or 1130  
"team member" means an individual specially trained to provide 1131  
crisis response services as a member of an organized community 1132  
or local crisis response team that holds membership in the Ohio 1133  
critical incident stress management network. 1134

(c) "Debriefing session" means a session at which crisis 1135  
response services are rendered by a critical incident stress 1136  
management team member during or after a crisis or disaster. 1137

(L) (1) Subject to division (L) (2) of this section and 1138  
except as provided in division (L) (3) of this section, an 1139  
employee assistance professional, concerning a communication 1140  
made to the employee assistance professional by a client in the 1141  
employee assistance professional's official capacity as an 1142  
employee assistance professional. 1143

(2) Division (L) (1) of this section applies to an employee 1144  
assistance professional who meets either or both of the 1145  
following requirements: 1146

(a) Is certified by the employee assistance certification 1147  
commission to engage in the employee assistance profession; 1148

(b) Has education, training, and experience in all of the 1149  
following: 1150

(i) Providing workplace-based services designed to address 1151  
employer and employee productivity issues; 1152

(ii) Providing assistance to employees and employees' 1153  
dependents in identifying and finding the means to resolve 1154  
personal problems that affect the employees or the employees' 1155  
performance; 1156

(iii) Identifying and resolving productivity problems 1157



associated with an employee's concerns about any of the 1158  
following matters: health, marriage, family, finances, substance 1159  
abuse or other addiction, workplace, law, and emotional issues; 1160

(iv) Selecting and evaluating available community 1161  
resources; 1162

(v) Making appropriate referrals; 1163

(vi) Local and national employee assistance agreements; 1164

(vii) Client confidentiality. 1165

(3) Division (L)(1) of this section does not apply to any 1166  
of the following: 1167

(a) A criminal action or proceeding involving an offense 1168  
under sections 2903.01 to 2903.06 of the Revised Code if the 1169  
employee assistance professional's disclosure or testimony 1170  
relates directly to the facts or immediate circumstances of the 1171  
offense; 1172

(b) A communication made by a client to an employee 1173  
assistance professional that reveals the contemplation or 1174  
commission of a crime or serious, harmful act; 1175

(c) A communication that is made by a client who is an 1176  
unemancipated minor or an adult adjudicated to be incompetent 1177  
and indicates that the client was the victim of a crime or 1178  
abuse; 1179

(d) A civil proceeding to determine an individual's mental 1180  
competency or a criminal action in which a plea of not guilty by 1181  
reason of insanity is entered; 1182

(e) A civil or criminal malpractice action brought against 1183  
the employee assistance professional; 1184

(f) When the employee assistance professional has the 1185  
express consent of the client or, if the client is deceased or 1186  
disabled, the client's legal representative; 1187

(g) When the testimonial privilege otherwise provided by 1188  
division (L) (1) of this section is abrogated under law. 1189

**Sec. 2919.171.** (A) A physician who performs or induces or 1190  
attempts to perform or induce an abortion on a pregnant woman 1191  
shall submit a report to the department of health in accordance 1192  
with the forms, rules, and regulations adopted by the department 1193  
that includes all of the information the physician is required 1194  
to certify in writing or determine under sections 2919.17 and 1195  
2919.18 of the Revised Code: 1196

(B) By September 30 of each year, the department of health 1197  
shall issue a public report that provides statistics for the 1198  
previous calendar year compiled from all of the reports covering 1199  
that calendar year submitted to the department in accordance 1200  
with this section for each of the items listed in division (A) 1201  
of this section. The report shall also provide the statistics 1202  
for each previous calendar year in which a report was filed with 1203  
the department pursuant to this section, adjusted to reflect any 1204  
additional information that a physician provides to the 1205  
department in a late or corrected report. The department shall 1206  
ensure that none of the information included in the report could 1207  
reasonably lead to the identification of any pregnant woman upon 1208  
whom an abortion is performed. 1209

(C) (1) The physician shall submit the report described in 1210  
division (A) of this section to the department of health within 1211  
fifteen days after the woman is discharged. If the physician 1212  
fails to submit the report more than thirty days after that 1213  
fifteen-day deadline, the physician shall be subject to a late 1214

fee of five hundred dollars for each additional thirty-day 1215  
period or portion of a thirty-day period the report is overdue. 1216  
A physician who is required to submit to the department of 1217  
health a report under division (A) of this section and who has 1218  
not submitted a report or has submitted an incomplete report 1219  
more than one year following the fifteen-day deadline may, in an 1220  
action brought by the department of health, be directed by a 1221  
court of competent jurisdiction to submit a complete report to 1222  
the department of health within a period of time stated in a 1223  
court order or be subject to contempt of court. 1224

(2) If a physician fails to comply with the requirements 1225  
of this section, other than filing a late report with the 1226  
department of health, or fails to submit a complete report to 1227  
the department of health in accordance with a court order, the 1228  
physician is subject to division (B) ~~(41)~~ (44) of section 4731.22 1229  
of the Revised Code. 1230

(3) No person shall falsify any report required under this 1231  
section. Whoever violates this division is guilty of abortion 1232  
report falsification, a misdemeanor of the first degree. 1233

(D) Within ninety days of ~~the effective date of this~~ 1234  
~~section~~ October 20, 2011, the department of health shall adopt 1235  
rules pursuant to section 111.15 of the Revised Code to assist 1236  
in compliance with this section. 1237

**Sec. 2921.22.** (A) (1) Except as provided in division (A) (2) 1238  
of this section, no person, knowing that a felony has been or is 1239  
being committed, shall knowingly fail to report such information 1240  
to law enforcement authorities. 1241

(2) No person, knowing that a violation of division (B) of 1242  
section 2913.04 of the Revised Code has been, or is being 1243

committed or that the person has received information derived 1244  
from such a violation, shall knowingly fail to report the 1245  
violation to law enforcement authorities. 1246

(B) Except for conditions that are within the scope of 1247  
division (E) of this section, no ~~physician, limited-~~ 1248  
~~practitioner, nurse, or other~~ person giving aid to a sick or 1249  
injured person shall negligently fail to report to law 1250  
enforcement authorities any gunshot or stab wound treated or 1251  
observed by the ~~physician, limited practitioner, nurse, or-~~ 1252  
person, or any serious physical harm to persons that the 1253  
~~physician, limited practitioner, nurse, or~~ person knows or has 1254  
reasonable cause to believe resulted from an offense of 1255  
violence. 1256

(C) No person who discovers the body or acquires the first 1257  
knowledge of the death of a person shall fail to report the 1258  
death immediately to a physician or advanced practice registered 1259  
nurse whom the person knows to be treating the deceased for a 1260  
condition from which death at such time would not be unexpected, 1261  
or to a law enforcement officer, an ambulance service, an 1262  
emergency squad, or the coroner in a political subdivision in 1263  
which the body is discovered, the death is believed to have 1264  
occurred, or knowledge concerning the death is obtained. For 1265  
purposes of this division, "advanced practice registered nurse" 1266  
does not include a certified registered nurse anesthetist. 1267

(D) No person shall fail to provide upon request of the 1268  
person to whom a report required by division (C) of this section 1269  
was made, or to any law enforcement officer who has reasonable 1270  
cause to assert the authority to investigate the circumstances 1271  
surrounding the death, any facts within the person's knowledge 1272  
that may have a bearing on the investigation of the death. 1273

(E) (1) As used in this division, "burn injury" means any	1274
of the following:	1275
(a) Second or third degree burns;	1276
(b) Any burns to the upper respiratory tract or laryngeal	1277
edema due to the inhalation of superheated air;	1278
(c) Any burn injury or wound that may result in death;	1279
(d) Any physical harm to persons caused by or as the	1280
result of the use of fireworks, novelties and trick noisemakers,	1281
and wire sparklers, as each is defined by section 3743.01 of the	1282
Revised Code.	1283
(2) No physician, nurse, <u>physician assistant</u> , or limited	1284
practitioner who, outside a hospital, sanitarium, or other	1285
medical facility, attends or treats a person who has sustained a	1286
burn injury that is inflicted by an explosion or other	1287
incendiary device or that shows evidence of having been	1288
inflicted in a violent, malicious, or criminal manner shall fail	1289
to report the burn injury immediately to the local arson, or	1290
fire and explosion investigation, bureau, if there is a bureau	1291
of this type in the jurisdiction in which the person is attended	1292
or treated, or otherwise to local law enforcement authorities.	1293
(3) No manager, superintendent, or other person in charge	1294
of a hospital, sanitarium, or other medical facility in which a	1295
person is attended or treated for any burn injury that is	1296
inflicted by an explosion or other incendiary device or that	1297
shows evidence of having been inflicted in a violent, malicious,	1298
or criminal manner shall fail to report the burn injury	1299
immediately to the local arson, or fire and explosion	1300
investigation, bureau, if there is a bureau of this type in the	1301
jurisdiction in which the person is attended or treated, or	1302

otherwise to local law enforcement authorities. 1303

(4) No person who is required to report any burn injury 1304  
under division (E) (2) or (3) of this section shall fail to file, 1305  
within three working days after attending or treating the 1306  
victim, a written report of the burn injury with the office of 1307  
the state fire marshal. The report shall comply with the uniform 1308  
standard developed by the state fire marshal pursuant to 1309  
division (A) (15) of section 3737.22 of the Revised Code. 1310

(5) Anyone participating in the making of reports under 1311  
division (E) of this section or anyone participating in a 1312  
judicial proceeding resulting from the reports is immune from 1313  
any civil or criminal liability that otherwise might be incurred 1314  
or imposed as a result of such actions. Notwithstanding section 1315  
4731.22 of the Revised Code, the physician-patient relationship 1316  
or advanced practice registered nurse-patient relationship is 1317  
not a ground for excluding evidence regarding a person's burn 1318  
injury or the cause of the burn injury in any judicial 1319  
proceeding resulting from a report submitted under division (E) 1320  
of this section. 1321

(F) (1) Any doctor of medicine or osteopathic medicine, 1322  
hospital intern or resident, ~~registered or licensed practical~~ 1323  
nurse, psychologist, social worker, independent social worker, 1324  
social work assistant, licensed professional clinical counselor, 1325  
licensed professional counselor, independent marriage and family 1326  
therapist, or marriage and family therapist who knows or has 1327  
reasonable cause to believe that a patient or client has been 1328  
the victim of domestic violence, as defined in section 3113.31 1329  
of the Revised Code, shall note that knowledge or belief and the 1330  
basis for it in the patient's or client's records. 1331

(2) Notwithstanding section 4731.22 of the Revised Code, 1332

the ~~doctor-patient-physician-patient~~ privilege or advanced 1333  
practice registered nurse-patient privilege shall not be a 1334  
ground for excluding any information regarding the report 1335  
containing the knowledge or belief noted under division (F) (1) 1336  
of this section, and the information may be admitted as evidence 1337  
in accordance with the Rules of Evidence. 1338

(G) Divisions (A) and (D) of this section do not require 1339  
disclosure of information, when any of the following applies: 1340

(1) The information is privileged by reason of the 1341  
relationship between attorney and client; ~~doctor-physician~~ and 1342  
patient; advanced practice registered nurse and patient; 1343  
licensed psychologist or licensed school psychologist and 1344  
client; licensed professional clinical counselor, licensed 1345  
professional counselor, independent social worker, social 1346  
worker, independent marriage and family therapist, or marriage 1347  
and family therapist and client; member of the clergy, rabbi, 1348  
minister, or priest and any person communicating information 1349  
confidentially to the member of the clergy, rabbi, minister, or 1350  
priest for a religious counseling purpose of a professional 1351  
character; husband and wife; or a communications assistant and 1352  
those who are a party to a telecommunications relay service 1353  
call. 1354

(2) The information would tend to incriminate a member of 1355  
the actor's immediate family. 1356

(3) Disclosure of the information would amount to 1357  
revealing a news source, privileged under section 2739.04 or 1358  
2739.12 of the Revised Code. 1359

(4) Disclosure of the information would amount to 1360  
disclosure by a member of the ordained clergy of an organized 1361

religious body of a confidential communication made to that 1362  
member of the clergy in that member's capacity as a member of 1363  
the clergy by a person seeking the aid or counsel of that member 1364  
of the clergy. 1365

(5) Disclosure would amount to revealing information 1366  
acquired by the actor in the course of the actor's duties in 1367  
connection with a bona fide program of treatment or services for 1368  
drug dependent persons or persons in danger of drug dependence, 1369  
which program is maintained or conducted by a hospital, clinic, 1370  
person, agency, or services provider certified pursuant to 1371  
section 5119.36 of the Revised Code. 1372

(6) Disclosure would amount to revealing information 1373  
acquired by the actor in the course of the actor's duties in 1374  
connection with a bona fide program for providing counseling 1375  
services to victims of crimes that are violations of section 1376  
2907.02 or 2907.05 of the Revised Code or to victims of 1377  
felonious sexual penetration in violation of former section 1378  
2907.12 of the Revised Code. As used in this division, 1379  
"counseling services" include services provided in an informal 1380  
setting by a person who, by education or experience, is 1381  
competent to provide those services. 1382

(H) No disclosure of information pursuant to this section 1383  
gives rise to any liability or recrimination for a breach of 1384  
privilege or confidence. 1385

(I) Whoever violates division (A) or (B) of this section 1386  
is guilty of failure to report a crime. Violation of division 1387  
(A) (1) of this section is a misdemeanor of the fourth degree. 1388  
Violation of division (A) (2) or (B) of this section is a 1389  
misdemeanor of the second degree. 1390



(J) Whoever violates division (C) or (D) of this section 1391  
is guilty of failure to report knowledge of a death, a 1392  
misdemeanor of the fourth degree. 1393

(K) (1) Whoever negligently violates division (E) of this 1394  
section is guilty of a minor misdemeanor. 1395

(2) Whoever knowingly violates division (E) of this 1396  
section is guilty of a misdemeanor of the second degree. 1397

(L) As used in this section, "nurse" includes an advanced 1398  
practice registered nurse, registered nurse, and licensed 1399  
practical nurse. 1400

**Sec. 2925.61.** (A) As used in this section: 1401

(1) "Law enforcement agency" means a government entity 1402  
that employs peace officers to perform law enforcement duties. 1403

(2) "Licensed health professional" means all of the 1404  
following: 1405

(a) A physician; 1406

(b) A physician assistant who is licensed under Chapter 1407  
4730. of the Revised Code, holds a valid prescriber number 1408  
issued by the state medical board, and has been granted 1409  
physician-delegated prescriptive authority; 1410

~~(c) A clinical nurse specialist, certified nurse-midwife,~~ 1411  
~~or certified~~ An advanced practice registered nurse practitioner 1412  
who holds a ~~certificate to prescribe~~ current, valid license 1413  
issued under ~~section 4723.48~~ Chapter 4723. of the Revised Code 1414  
and is designated as a clinical nurse specialist, certified 1415  
nurse-midwife, or certified nurse practitioner. 1416

(3) "Peace officer" has the same meaning as in section 1417

2921.51 of the Revised Code. 1418

(4) "Physician" means an individual who is authorized 1419  
under Chapter 4731. of the Revised Code to practice medicine and 1420  
surgery, osteopathic medicine and surgery, or podiatric medicine 1421  
and surgery. 1422

(B) A family member, friend, or other individual who is in 1423  
a position to assist an individual who is apparently 1424  
experiencing or at risk of experiencing an opioid-related 1425  
overdose, is not subject to criminal prosecution for a violation 1426  
of section 4731.41 of the Revised Code or criminal prosecution 1427  
under this chapter if the individual, acting in good faith, does 1428  
all of the following: 1429

(1) Obtains naloxone pursuant to a prescription issued by 1430  
a licensed health professional or obtains naloxone from one of 1431  
the following: a licensed health professional, an individual who 1432  
is authorized by a physician under section 4731.941 of the 1433  
Revised Code to personally furnish naloxone, or a pharmacist or 1434  
pharmacy intern who is authorized by a physician or board of 1435  
health under section 4729.44 of the Revised Code to dispense 1436  
naloxone without a prescription; 1437

(2) Administers the naloxone obtained as described in 1438  
division (B)(1) of this section to an individual who is 1439  
apparently experiencing an opioid-related overdose; 1440

(3) Attempts to summon emergency services as soon as 1441  
practicable either before or after administering the naloxone. 1442

(C) Division (B) of this section does not apply to a peace 1443  
officer or to an emergency medical technician-basic, emergency 1444  
medical technician-intermediate, or emergency medical 1445  
technician-paramedic, as defined in section 4765.01 of the 1446

Revised Code. 1447

(D) A peace officer employed by a law enforcement agency 1448  
is not subject to administrative action, criminal prosecution 1449  
for a violation of section 4731.41 of the Revised Code, or 1450  
criminal prosecution under this chapter if the peace officer, 1451  
acting in good faith, obtains naloxone from the peace officer's 1452  
law enforcement agency and administers the naloxone to an 1453  
individual who is apparently experiencing an opioid-related 1454  
overdose. 1455

**Sec. 3701.351.** (A) The governing body of every hospital 1456  
shall set standards and procedures to be applied by the hospital 1457  
and its medical staff in considering and acting upon 1458  
applications for staff membership or professional privileges. 1459  
These standards and procedures shall be available for public 1460  
inspection. 1461

(B) The governing body of any hospital, in considering and 1462  
acting upon applications for staff membership or professional 1463  
privileges within the scope of the applicants' respective 1464  
licensures, shall not discriminate against a qualified person 1465  
solely on the basis of whether that person is certified to 1466  
practice medicine, osteopathic medicine, or podiatry, ~~or is~~ 1467  
licensed to practice dentistry or psychology, or is licensed to 1468  
practice nursing as an advanced practice registered nurse. Staff 1469  
membership or professional privileges shall be considered and 1470  
acted on in accordance with standards and procedures established 1471  
under division (A) of this section. This section does not permit 1472  
a psychologist to admit a patient to a hospital in violation of 1473  
section 3727.06 of the Revised Code. 1474

(C) The governing body of any hospital that is licensed to 1475  
provide maternity services, in considering and acting upon 1476

applications for clinical privileges, shall not discriminate 1477  
against a qualified person solely on the basis that the person 1478  
is authorized to practice nurse-midwifery. An application from a 1479  
certified nurse-midwife who is not employed by the hospital 1480  
shall contain the name of a physician member of the hospital's 1481  
medical staff who holds clinical privileges in obstetrics at 1482  
that hospital and who has agreed to be the collaborating 1483  
physician for the applicant in accordance with section 4723.43 1484  
of the Revised Code. 1485

(D) Any person may apply to the court of common pleas for 1486  
temporary or permanent injunctions restraining a violation of 1487  
division (A), (B), or (C) of this section. This action is an 1488  
additional remedy not dependent on the adequacy of the remedy at 1489  
law. 1490

(E) (1) If a hospital does not provide or permit the 1491  
provision of any diagnostic or treatment service for mental or 1492  
emotional disorders or any other service that may be legally 1493  
performed by a psychologist licensed under Chapter 4732. of the 1494  
Revised Code, this section does not require the hospital to 1495  
provide or permit the provision of any such service and the 1496  
hospital shall be exempt from requirements of this section 1497  
pertaining to psychologists. 1498

(2) This section does not impair the right of a hospital 1499  
to enter into an employment, personal service, or any other kind 1500  
of contract with a licensed psychologist, upon any such terms as 1501  
the parties may mutually agree, for the provision of any service 1502  
that may be legally performed by a licensed psychologist. 1503

**Sec. 3701.926.** (A) To be eligible for inclusion in the 1504  
patient centered medical home education pilot project, a primary 1505  
care practice led by physicians shall meet all of the following 1506

requirements: 1507

(1) Consist of physicians who are board-certified in 1508  
family medicine, general pediatrics, or internal medicine, as 1509  
those designations are issued by a medical specialty certifying 1510  
board recognized by the American board of medical specialties or 1511  
American osteopathic association; 1512

(2) Be capable of adapting the practice during the period 1513  
in which the practice participates in the patient centered 1514  
medical home education pilot project in such a manner that the 1515  
practice is fully compliant with the minimum standards for 1516  
operation of a patient centered medical home, as those standards 1517  
are established by the director of health; 1518

(3) Have submitted an application to participate in the 1519  
project established under former section 185.05 of the Revised 1520  
Code not later than April 15, 2011. 1521

(4) Meet any other criteria established by the director as 1522  
part of the selection process. 1523

(B) To be eligible for inclusion in the pilot project, a 1524  
primary care practice led by advanced practice registered nurses 1525  
shall meet all of the following requirements: 1526

(1) Consist of advanced practice registered nurses, each 1527  
of whom meets all both of the following requirements: 1528

(a)  ~~Holds a certificate to prescribe issued under section-~~ 1529  
 ~~4723.48 of the Revised Code;~~ Is authorized to prescribe drugs and 1530  
therapeutic devices under section 4723.43 of the Revised Code; 1531

(b) Is board-certified by a national certifying 1532  
organization approved by the board of nursing pursuant to 1533  
section 4723.46 of the Revised Code as a family nurse 1534

~~practitioner or, adult nurse practitioner by the American~~ 1535  
~~academy of nurse practitioners or American nurses credentialing~~ 1536  
~~center, board certified as a geriatric adult-gerontology nurse~~ 1537  
~~practitioner or, women's health nurse practitioner by the~~ 1538  
~~American nurses credentialing center, or is board certified as a~~ 1539  
~~pediatric nurse practitioner by the American nurses~~ 1540  
~~credentialing center or pediatric nursing certification board;~~ 1541

(c) Collaborates under a standard care arrangement with a 1542  
physician with board certification as specified in division (A) 1543  
(1) of this section and who is an active participant on the 1544  
health care team. 1545

(2) Be capable of adapting the practice during the period 1546  
in which the practice participates in the project in such a 1547  
manner that the practice is fully compliant with the minimum 1548  
standards for operation of a patient centered medical home, as 1549  
those standards are established by the director; 1550

(3) Have submitted an application to participate in the 1551  
project established under former section 185.05 of the Revised 1552  
Code not later than April 15, 2011. 1553

(4) Meet any other criteria established by the director as 1554  
part of the selection process. 1555

**Sec. 3719.121.** (A) Except as otherwise provided in section 1556  
4723.28, 4723.35, 4730.25, 4731.22, 4734.39, or 4734.41 of the 1557  
Revised Code, the license, certificate, or registration of any 1558  
dentist, chiropractor, physician, podiatrist, registered nurse, 1559  
advanced practice registered nurse, licensed practical nurse, 1560  
physician assistant, pharmacist, pharmacy intern, optometrist, 1561  
or veterinarian who is or becomes addicted to the use of 1562  
controlled substances shall be suspended by the board that 1563

authorized the person's license, certificate, or registration 1564  
until the person offers satisfactory proof to the board that the 1565  
person no longer is addicted to the use of controlled 1566  
substances. 1567

(B) If the board under which a person has been issued a 1568  
license, certificate, or evidence of registration determines 1569  
that there is clear and convincing evidence that continuation of 1570  
the person's professional practice or method of prescribing or 1571  
personally furnishing controlled substances presents a danger of 1572  
immediate and serious harm to others, the board may suspend the 1573  
person's license, certificate, or registration without a 1574  
hearing. Except as otherwise provided in sections 4715.30, 1575  
4723.281, 4729.16, 4730.25, 4731.22, and 4734.36 of the Revised 1576  
Code, the board shall follow the procedure for suspension 1577  
without a prior hearing in section 119.07 of the Revised Code. 1578  
The suspension shall remain in effect, unless removed by the 1579  
board, until the board's final adjudication order becomes 1580  
effective, except that if the board does not issue its final 1581  
adjudication order within ninety days after the hearing, the 1582  
suspension shall be void on the ninety-first day after the 1583  
hearing. 1584

(C) On receiving notification pursuant to section 2929.42 1585  
or 3719.12 of the Revised Code, the board under which a person 1586  
has been issued a license, certificate, or evidence of 1587  
registration immediately shall suspend the license, certificate, 1588  
or registration of that person on a plea of guilty to, a finding 1589  
by a jury or court of the person's guilt of, or conviction of a 1590  
felony drug abuse offense; a finding by a court of the person's 1591  
eligibility for intervention in lieu of conviction; a plea of 1592  
guilty to, or a finding by a jury or court of the person's guilt 1593  
of, or the person's conviction of an offense in another 1594

jurisdiction that is essentially the same as a felony drug abuse 1595  
offense; or a finding by a court of the person's eligibility for 1596  
treatment or intervention in lieu of conviction in another 1597  
jurisdiction. The board shall notify the holder of the license, 1598  
certificate, or registration of the suspension, which shall 1599  
remain in effect until the board holds an adjudicatory hearing 1600  
under Chapter 119. of the Revised Code. 1601

**Sec. 3727.08.** Not later than ninety days after the 1602  
effective date of this section, every hospital shall adopt 1603  
protocols providing for conducting an interview with the 1604  
patient, for conducting one or more interviews, separate and 1605  
apart from the interview with the patient, with any family or 1606  
household member present, and for creating whenever possible a 1607  
photographic record of the patient's injuries, in situations in 1608  
which a doctor of medicine or osteopathic medicine, hospital 1609  
intern or resident, or registered, advanced practice registered, 1610  
or licensed practical nurse knows or has reasonable cause to 1611  
believe that the patient has been the victim of domestic 1612  
violence, as defined in section 3113.31 of the Revised Code. 1613

**Sec. 3923.233.** Notwithstanding any provision of any 1614  
certificate furnished by an insurer in connection with or 1615  
pursuant to any group sickness and accident insurance policy 1616  
delivered, issued, renewed, or used, in or outside this state, 1617  
on or after January 1, 1985, and notwithstanding any provision 1618  
of any policy of insurance delivered, issued for delivery, 1619  
renewed, or used, in or outside this state, on or after January 1620  
1, 1985, whenever the policy or certificate is subject to the 1621  
jurisdiction of this state and provides for reimbursement for 1622  
any service that may be legally performed by an advanced 1623  
practice registered nurse who holds a current, valid license 1624  
issued under Chapter 4723. of the Revised Code and is designated 1625



as a certified nurse-midwife ~~who is authorized under in~~ 1626  
accordance with section 4723.42 of the Revised Code ~~to practice~~ 1627  
~~nurse-midwifery~~, reimbursement under the policy or certificate 1628  
shall not be denied to a certified nurse-midwife performing the 1629  
service in collaboration with a licensed physician. The 1630  
collaborating physician shall be identified on an insurance 1631  
claim form. 1632

The cost of collaboration with a certified nurse-midwife 1633  
by a licensed physician as required under section 4723.43 of the 1634  
Revised Code is a reimbursable expense. 1635

The division of any reimbursement payment for services 1636  
performed by a certified nurse-midwife between the certified 1637  
nurse-midwife and the certified nurse-midwife's collaborating 1638  
physician shall be determined and mutually agreed upon by the 1639  
certified nurse-midwife and the physician. The division of fees 1640  
shall not be considered a violation of division (B) (17) of 1641  
section 4731.22 of the Revised Code. In no case shall the total 1642  
fees charged exceed the fee the physician would have charged had 1643  
the physician provided the entire service. 1644

**Sec. 3923.301.** Every person, the state and any of its 1645  
instrumentalities, any county, township, school district, or 1646  
other political subdivision and any of its instrumentalities, 1647  
and any municipal corporation and any of its instrumentalities 1648  
that provides payment for health care benefits for any of its 1649  
employees resident in this state, which benefits are not 1650  
provided by contract with an insurer qualified to provide 1651  
sickness and accident insurance or a health insuring 1652  
corporation, and that includes reimbursement for any service 1653  
that may be legally performed by an advanced practice registered 1654  
nurse who holds a current, valid license issued under Chapter 1655

4723. of the Revised Code and is designated as a certified 1656  
nurse-midwife ~~who is authorized under in accordance with~~ section 1657  
4723.42 of the Revised Code to practice nurse-midwifery, shall 1658  
not deny reimbursement to a certified nurse-midwife performing 1659  
the service if the service is performed in collaboration with a 1660  
licensed physician. The collaborating physician shall be 1661  
identified on the claim form. 1662

The cost of collaboration with a certified nurse-midwife 1663  
by a licensed physician as required under section 4723.43 of the 1664  
Revised Code is a reimbursable expense. 1665

The division of any reimbursement payment for services 1666  
performed by a certified nurse-midwife between the certified 1667  
nurse-midwife and the certified nurse-midwife's collaborating 1668  
physician shall be determined and mutually agreed upon by the 1669  
certified nurse-midwife and the physician. The division of fees 1670  
shall not be considered a violation of division (B) (17) of 1671  
section 4731.22 of the Revised Code. In no case shall the total 1672  
fees charged exceed the fee the physician would have charged had 1673  
the physician provided the entire service. 1674

**Sec. 3923.63.** (A) Notwithstanding section 3901.71 of the 1675  
Revised Code, each individual or group policy of sickness and 1676  
accident insurance delivered, issued for delivery, or renewed in 1677  
this state that provides maternity benefits shall provide 1678  
coverage of inpatient care and follow-up care for a mother and 1679  
her newborn as follows: 1680

(1) The policy shall cover a minimum of forty-eight hours 1681  
of inpatient care following a normal vaginal delivery and a 1682  
minimum of ninety-six hours of inpatient care following a 1683  
cesarean delivery. Services covered as inpatient care shall 1684  
include medical, educational, and any other services that are 1685

consistent with the inpatient care recommended in the protocols 1686  
and guidelines developed by national organizations that 1687  
represent pediatric, obstetric, and nursing professionals. 1688

(2) The policy shall cover a physician-directed source of 1689  
follow-up care or a source of follow-up care directed by an 1690  
advanced practice registered nurse. Services covered as follow- 1691  
up care shall include physical assessment of the mother and 1692  
newborn, parent education, assistance and training in breast or 1693  
bottle feeding, assessment of the home support system, 1694  
performance of any medically necessary and appropriate clinical 1695  
tests, and any other services that are consistent with the 1696  
follow-up care recommended in the protocols and guidelines 1697  
developed by national organizations that represent pediatric, 1698  
obstetric, and nursing professionals. The coverage shall apply 1699  
to services provided in a medical setting or through home health 1700  
care visits. The coverage shall apply to a home health care 1701  
visit only if the health care professional who conducts the 1702  
visit is knowledgeable and experienced in maternity and newborn 1703  
care. 1704

When a decision is made in accordance with division (B) of 1705  
this section to discharge a mother or newborn prior to the 1706  
expiration of the applicable number of hours of inpatient care 1707  
required to be covered, the coverage of follow-up care shall 1708  
apply to all follow-up care that is provided within seventy-two 1709  
hours after discharge. When a mother or newborn receives at 1710  
least the number of hours of inpatient care required to be 1711  
covered, the coverage of follow-up care shall apply to follow-up 1712  
care that is determined to be medically necessary by the health 1713  
care professionals responsible for discharging the mother or 1714  
newborn. 1715

(B) Any decision to shorten the length of inpatient stay 1716  
to less than that specified under division (A) (1) of this 1717  
section shall be made by the physician attending the mother or 1718  
newborn, except that if a certified nurse-midwife is attending 1719  
the mother in collaboration with a physician, the decision may 1720  
be made by the certified nurse-midwife. Decisions regarding 1721  
early discharge shall be made only after conferring with the 1722  
mother or a person responsible for the mother or newborn. For 1723  
purposes of this division, a person responsible for the mother 1724  
or newborn may include a parent, guardian, or any other person 1725  
with authority to make medical decisions for the mother or 1726  
newborn. 1727

(C) (1) No sickness and accident insurer may do either of 1728  
the following: 1729

(a) Terminate the participation of a health care 1730  
professional or health care facility as a provider under a 1731  
sickness and accident insurance policy solely for making 1732  
recommendations for inpatient or follow-up care for a particular 1733  
mother or newborn that are consistent with the care required to 1734  
be covered by this section; 1735

(b) Establish or offer monetary or other financial 1736  
incentives for the purpose of encouraging a person to decline 1737  
the inpatient or follow-up care required to be covered by this 1738  
section. 1739

(2) Whoever violates division (C) (1) (a) or (b) of this 1740  
section has engaged in an unfair and deceptive act or practice 1741  
in the business of insurance under sections 3901.19 to 3901.26 1742  
of the Revised Code. 1743

(D) This section does not do any of the following: 1744

(1) Require a policy to cover inpatient or follow-up care 1745  
that is not received in accordance with the policy's terms 1746  
pertaining to the health care professionals and facilities from 1747  
which an individual is authorized to receive health care 1748  
services; 1749

(2) Require a mother or newborn to stay in a hospital or 1750  
other inpatient setting for a fixed period of time following 1751  
delivery; 1752

(3) Require a child to be delivered in a hospital or other 1753  
inpatient setting; 1754

(4) Authorize a certified nurse-midwife to practice beyond 1755  
the authority to practice nurse-midwifery in accordance with 1756  
Chapter 4723. of the Revised Code; 1757

(5) Establish minimum standards of medical diagnosis, care 1758  
or treatment for inpatient or follow-up care for a mother or 1759  
newborn. A deviation from the care required to be covered under 1760  
this section shall not, solely on the basis of this section, 1761  
give rise to a medical claim or derivative medical claim, as 1762  
those terms are defined in section 2305.113 of the Revised Code. 1763

**Sec. 3923.64.** (A) Notwithstanding section 3901.71 of the 1764  
Revised Code, each public employee benefit plan established or 1765  
modified in this state that provides maternity benefits shall 1766  
provide coverage of inpatient care and follow-up care for a 1767  
mother and her newborn as follows: 1768

(1) The plan shall cover a minimum of forty-eight hours of 1769  
inpatient care following a normal vaginal delivery and a minimum 1770  
of ninety-six hours of inpatient care following a cesarean 1771  
delivery. Services covered as inpatient care shall include 1772  
medical, educational, and any other services that are consistent 1773

with the inpatient care recommended in the protocols and 1774  
guidelines developed by national organizations that represent 1775  
pediatric, obstetric, and nursing professionals. 1776

(2) The plan shall cover a physician-directed source of 1777  
follow-up care or a source of follow-up care directed by an 1778  
advanced practice registered nurse. Services covered as follow- 1779  
up care shall include physical assessment of the mother and 1780  
newborn, parent education, assistance and training in breast or 1781  
bottle feeding, assessment of the home support system, 1782  
performance of any medically necessary and appropriate clinical 1783  
tests, and any other services that are consistent with the 1784  
follow-up care recommended in the protocols and guidelines 1785  
developed by national organizations that represent pediatric, 1786  
obstetric, and nursing professionals. The coverage shall apply 1787  
to services provided in a medical setting or through home health 1788  
care visits. The coverage shall apply to a home health care 1789  
visit only if the health care professional who conducts the 1790  
visit is knowledgeable and experienced in maternity and newborn 1791  
care. 1792

When a decision is made in accordance with division (B) of 1793  
this section to discharge a mother or newborn prior to the 1794  
expiration of the applicable number of hours of inpatient care 1795  
required to be covered, the coverage of follow-up care shall 1796  
apply to all follow-up care that is provided within seventy-two 1797  
hours after discharge. When a mother or newborn receives at 1798  
least the number of hours of inpatient care required to be 1799  
covered, the coverage of follow-up care shall apply to follow-up 1800  
care that is determined to be medically necessary by the health 1801  
care professionals responsible for discharging the mother or 1802  
newborn. 1803

(B) Any decision to shorten the length of inpatient stay 1804  
to less than that specified under division (A) (1) of this 1805  
section shall be made by the physician attending the mother or 1806  
newborn, except that if a certified nurse-midwife is attending 1807  
the mother in collaboration with a physician, the decision may 1808  
be made by the certified nurse-midwife. Decisions regarding 1809  
early discharge shall be made only after conferring with the 1810  
mother or a person responsible for the mother or newborn. For 1811  
purposes of this division, a person responsible for the mother 1812  
or newborn may include a parent, guardian, or any other person 1813  
with authority to make medical decisions for the mother or 1814  
newborn. 1815

(C) (1) No public employer who offers an employee benefit 1816  
plan may do either of the following: 1817

(a) Terminate the participation of a health care 1818  
professional or health care facility as a provider under the 1819  
plan solely for making recommendations for inpatient or follow- 1820  
up care for a particular mother or newborn that are consistent 1821  
with the care required to be covered by this section; 1822

(b) Establish or offer monetary or other financial 1823  
incentives for the purpose of encouraging a person to decline 1824  
the inpatient or follow-up care required to be covered by this 1825  
section. 1826

(2) Whoever violates division (C) (1) (a) or (b) of this 1827  
section has engaged in an unfair and deceptive act or practice 1828  
in the business of insurance under sections 3901.19 to 3901.26 1829  
of the Revised Code. 1830

(D) This section does not do any of the following: 1831

(1) Require a plan to cover inpatient or follow-up care 1832

that is not received in accordance with the plan's terms 1833  
pertaining to the health care professionals and facilities from 1834  
which an individual is authorized to receive health care 1835  
services; 1836

(2) Require a mother or newborn to stay in a hospital or 1837  
other inpatient setting for a fixed period of time following 1838  
delivery; 1839

(3) Require a child to be delivered in a hospital or other 1840  
inpatient setting; 1841

(4) Authorize a certified nurse-midwife to practice beyond 1842  
the authority to practice nurse-midwifery in accordance with 1843  
Chapter 4723. of the Revised Code; 1844

(5) Establish minimum standards of medical diagnosis, 1845  
care, or treatment for inpatient or follow-up care for a mother 1846  
or newborn. A deviation from the care required to be covered 1847  
under this section shall not, solely on the basis of this 1848  
section, give rise to a medical claim or derivative medical 1849  
claim, as those terms are defined in section 2305.113 of the 1850  
Revised Code. 1851

**Sec. 4713.02.** (A) There is hereby created the state board 1852  
of cosmetology, consisting of all of the following members 1853  
appointed by the governor, with the advice and consent of the 1854  
senate: 1855

(1) One person holding a current, valid cosmetologist, 1856  
managing cosmetologist, or cosmetology instructor license at the 1857  
time of appointment; 1858

(2) Two persons holding current, valid managing 1859  
cosmetologist licenses and actively engaged in managing beauty 1860  
salons at the time of appointment; 1861



(3) One person who holds a current, valid independent contractor license at the time of appointment or the owner or manager of a licensed salon in which at least one person holding a current, valid independent contractor license practices a branch of cosmetology;

(4) One person who represents individuals who teach the theory and practice of a branch of cosmetology at a vocational school;

(5) One owner of a licensed school of cosmetology;

(6) One owner of at least five licensed salons;

(7) One person who is either a certified nurse practitioner or clinical nurse specialist holding a ~~certificate of authority~~ current, valid license to practice nursing as an advanced practice registered nurse issued under Chapter 4723. of the Revised Code, or a physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery;

(8) One person representing the general public.

(B) The superintendent of public instruction shall nominate three persons for the governor to choose from when making an appointment under division (A) (4) of this section.

(C) All members shall be at least twenty-five years of age, residents of the state, and citizens of the United States. No more than two members, at any time, shall be graduates of the same school of cosmetology.

Except for the initial members appointed under divisions (A) (3) and (4) of this section, terms of office are for five years. The term of the initial member appointed under division

(A) (3) of this section shall be three years. The term of the 1890  
initial member appointed under division (A) (4) of this section 1891  
shall be four years. Terms shall commence on the first day of 1892  
November and end on the thirty-first day of October. Each member 1893  
shall hold office from the date of appointment until the end of 1894  
the term for which appointed. In case of a vacancy occurring on 1895  
the board, the governor shall, in the same manner prescribed for 1896  
the regular appointment to the board, fill the vacancy by 1897  
appointing a member. Any member appointed to fill a vacancy 1898  
occurring prior to the expiration of the term for which the 1899  
member's predecessor was appointed shall hold office for the 1900  
remainder of such term. Any member shall continue in office 1901  
subsequent to the expiration date of the member's term until the 1902  
member's successor takes office, or until a period of sixty days 1903  
has elapsed, whichever occurs first. Before entering upon the 1904  
discharge of the duties of the office of member, each member 1905  
shall take, and file with the secretary of state, the oath of 1906  
office required by Section 7 of Article XV, Ohio Constitution. 1907

The members of the board shall receive an amount fixed 1908  
pursuant to Chapter 124. of the Revised Code per diem for every 1909  
meeting of the board which they attend, together with their 1910  
necessary expenses, and mileage for each mile necessarily 1911  
traveled. 1912

The members of the board shall annually elect, from among 1913  
their number, a chairperson. 1914

The board shall prescribe the duties of its officers and 1915  
establish an office within ~~Franklin County~~ county. The board 1916  
shall keep all records and files at the office and have the 1917  
records and files at all reasonable hours open to public 1918  
inspection. The board also shall adopt a seal. 1919

<b>Sec. 4723.01.</b> As used in this chapter:	1920
(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.	1921 1922 1923
(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:	1924 1925 1926 1927 1928
(1) Identifying patterns of human responses to actual or potential health problems amenable to a nursing regimen;	1929 1930
(2) Executing a nursing regimen through the selection, performance, management, and evaluation of nursing actions;	1931 1932
(3) Assessing health status for the purpose of providing nursing care;	1933 1934
(4) Providing health counseling and health teaching;	1935
(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;	1936 1937 1938 1939
(6) Teaching, administering, supervising, delegating, and evaluating nursing practice.	1940 1941
(C) "Nursing regimen" may include preventative, restorative, and health-promotion activities.	1942 1943
(D) "Assessing health status" means the collection of data through nursing assessment techniques, which may include interviews, observation, and physical evaluations for the	1944 1945 1946

purpose of providing nursing care. 1947

(E) "Licensed practical nurse" means an individual who 1948  
holds a current, valid license issued under this chapter that 1949  
authorizes the practice of nursing as a licensed practical 1950  
nurse. 1951

(F) "The practice of nursing as a licensed practical 1952  
nurse" means providing to individuals and groups nursing care 1953  
requiring the application of basic knowledge of the biological, 1954  
physical, behavioral, social, and nursing sciences at the 1955  
direction of a registered nurse or any of the following who is 1956  
authorized to practice in this state: a physician, physician 1957  
assistant, dentist, podiatrist, optometrist, or chiropractor. 1958  
Such nursing care includes: 1959

(1) Observation, patient teaching, and care in a diversity 1960  
of health care settings; 1961

(2) Contributions to the planning, implementation, and 1962  
evaluation of nursing; 1963

(3) Administration of medications and treatments 1964  
authorized by an individual who is authorized to practice in 1965  
this state and is acting within the course of the individual's 1966  
professional practice on the condition that the licensed 1967  
practical nurse is authorized under section 4723.17 of the 1968  
Revised Code to administer medications; 1969

(4) Administration to an adult of intravenous therapy 1970  
authorized by an individual who is authorized to practice in 1971  
this state and is acting within the course of the individual's 1972  
professional practice, on the condition that the licensed 1973  
practical nurse is authorized under section 4723.18 or 4723.181 1974  
of the Revised Code to perform intravenous therapy and performs 1975

intravenous therapy only in accordance with those sections;	1976
(5) Delegation of nursing tasks as directed by a registered nurse;	1977 1978
(6) Teaching nursing tasks to licensed practical nurses and individuals to whom the licensed practical nurse is authorized to delegate nursing tasks as directed by a registered nurse.	1979 1980 1981 1982
(G) "Certified registered nurse anesthetist" means <u>an advanced practice</u> registered nurse who holds a <u>current, valid</u> <del>certificate of authority license</del> issued under this chapter <del>that authorizes the practice of nursing and is designated</del> as a certified registered nurse anesthetist in accordance with section <del>4723.43-4723.42</del> of the Revised Code and rules adopted by the board of nursing.	1983 1984 1985 1986 1987 1988 1989
(H) "Clinical nurse specialist" means <u>an advanced practice</u> registered nurse who holds a <u>current, valid</u> <del>certificate of authority license</del> issued under this chapter <del>that authorizes the practice of nursing and is designated</del> as a clinical nurse specialist in accordance with section <del>4723.43-4723.42</del> of the Revised Code and rules adopted by the board of nursing.	1990 1991 1992 1993 1994 1995
(I) "Certified nurse-midwife" means <u>an advanced practice</u> registered nurse who holds a <u>current, valid</u> <del>certificate of authority license</del> issued under this chapter <del>that authorizes the practice of nursing and is designated</del> as a certified nurse-midwife in accordance with section <del>4723.43-4723.42</del> of the Revised Code and rules adopted by the board of nursing.	1996 1997 1998 1999 2000 2001
(J) "Certified nurse practitioner" means <u>an advanced practice</u> registered nurse who holds a <u>current, valid</u> <del>certificate of authority license</del> issued under this chapter <del>that authorizes</del>	2002 2003 2004

~~the practice of nursing and is designated as~~ a certified nurse 2005  
practitioner in accordance with section ~~4723.43-4723.42~~ of the 2006  
Revised Code and rules adopted by the board of nursing. 2007

(K) "Physician" means an individual authorized under 2008  
Chapter 4731. of the Revised Code to practice medicine and 2009  
surgery or osteopathic medicine and surgery. 2010

(L) "Collaboration" or "collaborating" means the 2011  
following: 2012

(1) In the case of a clinical nurse specialist, ~~except as~~ 2013  
~~provided in division (L) (3) of this section,~~ or a certified 2014  
nurse practitioner, that one or more podiatrists acting within 2015  
the scope of practice of podiatry in accordance with section 2016  
4731.51 of the Revised Code and with whom the nurse has entered 2017  
into a standard care arrangement or one or more physicians with 2018  
whom the nurse has entered into a standard care arrangement are 2019  
continuously available to communicate with the clinical nurse 2020  
specialist or certified nurse practitioner either in person or 2021  
by ~~radio, telephone, or other form of telecommunication-~~ 2022  
electronic communication; 2023

(2) In the case of a certified nurse-midwife, that one or 2024  
more physicians with whom the certified nurse-midwife has 2025  
entered into a standard care arrangement are continuously 2026  
available to communicate with the certified nurse-midwife either 2027  
in person or by ~~radio, telephone, or other form of-~~ 2028  
~~telecommunication;~~ 2029

~~(3) In the case of a clinical nurse specialist who~~ 2030  
~~practices the nursing specialty of mental health or psychiatric-~~ 2031  
~~mental health without being authorized to prescribe drugs and-~~ 2032  
~~therapeutic devices, that one or more physicians are-~~ 2033

~~continuously available to communicate with the nurse either in-~~ 2034  
~~person or by radio, telephone, or other form of-~~ 2035  
~~telecommunication, electronic communication.~~ 2036

(M) "Supervision," as it pertains to a certified 2037  
registered nurse anesthetist, means that the certified 2038  
registered nurse anesthetist is under the direction of a 2039  
podiatrist acting within the podiatrist's scope of practice in 2040  
accordance with section 4731.51 of the Revised Code, a dentist 2041  
acting within the dentist's scope of practice in accordance with 2042  
Chapter 4715. of the Revised Code, or a physician, and, when 2043  
administering anesthesia, the certified registered nurse 2044  
anesthetist is in the immediate presence of the podiatrist, 2045  
dentist, or physician. 2046

(N) "Standard care arrangement" means a written, formal 2047  
guide for planning and evaluating a patient's health care that 2048  
is developed by one or more collaborating physicians or 2049  
podiatrists and a clinical nurse specialist, certified nurse- 2050  
midwife, or certified nurse practitioner and meets the 2051  
requirements of section 4723.431 of the Revised Code. 2052

(O) "Advanced practice registered nurse" means ~~a certified-~~ 2053  
~~registered nurse anesthetist, clinical nurse specialist,~~ 2054  
~~certified nurse midwife, or certified nurse practitioner~~ an 2055  
individual who holds a current, valid license issued under this 2056  
chapter that authorizes the practice of nursing as an advanced 2057  
practice registered nurse and is designated as any of the 2058  
following: 2059

(1) A certified registered nurse anesthetist; 2060

(2) A clinical nurse specialist; 2061

(3) A certified nurse-midwife; 2062

<u>(4) A certified nurse practitioner.</u>	2063
<u>(P) "Practice of nursing as an advanced practice registered nurse" means providing to individuals and groups nursing care that requires knowledge and skill obtained from advanced formal education, training, and clinical experience. Such nursing care includes the care described in section 4723.43 of the Revised Code.</u>	2064 2065 2066 2067 2068 2069
<del>(P)</del> <u>(Q)</u> "Dialysis care" means the care and procedures that a dialysis technician or dialysis technician intern is authorized to provide and perform, as specified in section 4723.72 of the Revised Code.	2070 2071 2072 2073
<del>(Q)</del> <u>(R)</u> "Dialysis technician" means an individual who holds a current, valid certificate to practice as a dialysis technician issued under section 4723.75 of the Revised Code.	2074 2075 2076
<del>(R)</del> <u>(S)</u> "Dialysis technician intern" means an individual who holds a current, valid certificate to practice as a dialysis technician intern issued under section 4723.75 of the Revised Code.	2077 2078 2079 2080
<del>(S)</del> <u>(T)</u> "Certified community health worker" means an individual who holds a current, valid certificate as a community health worker issued under section 4723.85 of the Revised Code.	2081 2082 2083
<del>(T)</del> <u>(U)</u> "Medication aide" means an individual who holds a current, valid certificate issued under this chapter that authorizes the individual to administer medication in accordance with section 4723.67 of the Revised Code.	2084 2085 2086 2087
<u>(V) "Nursing specialty" means a specialty in practice as a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner.</u>	2088 2089 2090 2091



Sec. 4723.011. As used in this chapter, unless otherwise 2092  
specified, "registered nurse" includes a registered nurse who is 2093  
also licensed under this chapter as an advanced practice 2094  
registered nurse. 2095

**Sec. 4723.02.** The board of nursing shall assume and 2096  
exercise all the powers and perform all the duties conferred and 2097  
imposed on it by this chapter. 2098

The board shall consist of thirteen members who shall be 2099  
citizens of the United States and residents of Ohio. Eight 2100  
members shall be registered nurses, each of whom shall be a 2101  
graduate of an approved program of nursing education that 2102  
prepares persons for licensure as a registered nurse, shall hold 2103  
a currently active license issued under this chapter to practice 2104  
nursing as a registered nurse, and shall have been actively 2105  
engaged in the practice of nursing as a registered nurse for the 2106  
five years immediately preceding the member's initial 2107  
appointment to the board. Of the eight members who are 2108  
registered nurses, at least ~~one~~ two shall hold a current, valid 2109  
~~certificate of authority license~~ issued under this chapter that 2110  
authorizes the practice of nursing as a ~~certified registered~~ 2111  
~~nurse anesthetist, clinical nurse specialist, certified nurse~~ 2112  
~~midwife, or certified nurse practitioner~~ an advanced practice 2113  
registered nurse. Four members shall be licensed practical 2114  
nurses, each of whom shall be a graduate of an approved program 2115  
of nursing education that prepares persons for licensure as a 2116  
practical nurse, shall hold a currently active license issued 2117  
under this chapter to practice nursing as a licensed practical 2118  
nurse, and shall have been actively engaged in the practice of 2119  
nursing as a licensed practical nurse for the five years 2120  
immediately preceding the member's initial appointment to the 2121  
board. One member shall represent the interests of consumers of 2122

health care. Neither this member nor any person in the member's 2123  
immediate family shall be a member of or associated with a 2124  
health care provider or profession or shall have a financial 2125  
interest in the delivery or financing of health care. 2126  
Representation of nursing service and nursing education and of 2127  
the various geographical areas of the state shall be considered 2128  
in making appointments. 2129

As the term of any member of the board expires, a 2130  
successor shall be appointed who has the qualifications the 2131  
vacancy requires. Terms of office shall be for four years, 2132  
commencing on the first day of January and ending on the thirty- 2133  
first day of December. 2134

A current or former board member who has served not more 2135  
than one full term or one full term and not more than thirty 2136  
months of another term may be reappointed for one additional 2137  
term. 2138

Each member shall hold office from the date of appointment 2139  
until the end of the term for which the member was appointed. 2140  
The term of a member shall expire if the member ceases to meet 2141  
any requirement of this section for the member's position on the 2142  
board. Any member appointed to fill a vacancy occurring prior to 2143  
the expiration of the term for which the member's predecessor 2144  
was appointed shall hold office for the remainder of such term. 2145  
Any member shall continue in office subsequent to the expiration 2146  
date of the member's term until the member's successor takes 2147  
office, or until a period of sixty days has elapsed, whichever 2148  
occurs first. 2149

Nursing organizations of this state may each submit to the 2150  
governor the names of not more than five nominees for each 2151  
position to be filled on the board. From the names so submitted 2152

or from others, at the governor's discretion, the governor with 2153  
the advice and consent of the senate shall make such 2154  
appointments. 2155

Any member of the board may be removed by the governor for 2156  
neglect of any duty required by law or for incompetency or 2157  
unprofessional or dishonorable conduct, after a hearing as 2158  
provided in Chapter 119. of the Revised Code. 2159

Seven members of the board including at least four 2160  
registered nurses~~and~~, at least one of whom is an advanced 2161  
practice registered nurse, and one licensed practical nurse 2162  
shall at all times constitute a quorum. 2163

Each member of the board shall receive an amount fixed 2164  
pursuant to division (J) of section 124.15 of the Revised Code 2165  
for each day in attendance at board meetings and in discharge of 2166  
official duties, and in addition thereto, necessary expense 2167  
incurred in the performance of such duties. 2168

The board shall elect one of its nurse members as 2169  
president and one as vice-president. The board shall elect one 2170  
of its registered nurse members to serve as the supervising 2171  
member for disciplinary matters. 2172

The board may establish advisory groups to serve in 2173  
consultation with the board or the executive director. Each 2174  
advisory group shall be given a specific charge in writing and 2175  
shall report to the board. Members of advisory groups shall 2176  
serve without compensation but shall receive their actual and 2177  
necessary expenses incurred in the performance of their official 2178  
duties. 2179

**Sec. 4723.03.** (A) No person shall engage in the practice 2180  
of nursing as a registered nurse, represent the person as being 2181

a registered nurse, or use the title "registered nurse," the 2182  
initials "R.N.," or any other title implying that the person is 2183  
a registered nurse, for a fee, salary, or other consideration, 2184  
or as a volunteer, without holding a current, valid license as a 2185  
registered nurse under this chapter. 2186

(B) No person shall knowingly do any of the following 2187  
without holding a current, valid license to practice nursing as 2188  
an advanced practice registered nurse issued under this chapter: 2189

(1) Engage in the practice of nursing as an advanced 2190  
practice registered nurse; 2191

(2) Represent the person as being an advanced practice 2192  
registered nurse; 2193

(3) Use the title "advanced practice registered nurse," 2194  
the initials "A.P.R.N.," or any other title implying that the 2195  
person is an advanced practice registered nurse, for a fee, 2196  
salary, or other consideration, or as a volunteer. 2197

(C) No person shall engage in the practice of nursing as a 2198  
licensed practical nurse, represent the person as being a 2199  
licensed practical nurse, or use the title "licensed practical 2200  
nurse," the initials "L.P.N.," or any other title implying that 2201  
the person is a licensed practical nurse, for a fee, salary, or 2202  
other consideration, or as a volunteer, without holding a 2203  
current, valid license as a practical nurse under this chapter. 2204

~~(C)~~ (D) No person shall use the titles or initials 2205  
"graduate nurse," "G.N.," "professional nurse," "P.N.," 2206  
"graduate practical nurse," "G.P.N.," "practical nurse," "P.N.," 2207  
"trained nurse," "T.N.," or any other statement, title, or 2208  
initials that would imply or represent to the public that the 2209  
person is authorized to practice nursing in this state, except 2210

as follows: 2211

(1) A person licensed under this chapter to practice 2212  
nursing as a registered nurse may use that title and the 2213  
initials "R.N."; 2214

(2) A person licensed under this chapter to practice 2215  
nursing as a licensed practical nurse may use that title and the 2216  
initials "L.P.N."; 2217

(3) A person ~~authorized~~licensed under this chapter to 2218  
practice nursing as an advanced practice registered nurse and 2219  
designated as a certified registered nurse anesthetist may use 2220  
that title, the initials "C.R.N.A." or "N.A.," and any other 2221  
title or initials approved by the board of nursing; 2222

(4) A person ~~authorized~~licensed under this chapter to 2223  
practice nursing as an advanced practice registered nurse and 2224  
designated as a clinical nurse specialist may use that title, 2225  
the initials "C.N.S.," and any other title or initials approved 2226  
by the board; 2227

(5) A person ~~authorized~~licensed under this chapter to 2228  
practice nursing as an advanced practice registered nurse and 2229  
designated as a certified nurse-midwife may use that title, the 2230  
initials "C.N.M.," and any other title or initials approved by 2231  
the board; 2232

(6) A person ~~authorized~~licensed under this chapter to 2233  
practice nursing as an advanced practice registered nurse and 2234  
designated as a certified nurse practitioner may use that title, 2235  
the initials "C.N.P.," and any other title or initials approved 2236  
by the board; 2237

(7) A person ~~authorized~~licensed under this chapter to 2238  
practice nursing as ~~a certified registered nurse anesthetist,~~ 2239

~~clinical nurse specialist, certified nurse midwife, or certified~~ 2240  
~~nurse practitioner~~ an advanced practice registered nurse may use 2241  
the title "advanced practice registered nurse" or the initials 2242  
"A.P.R.N." 2243

~~(D)~~ (E) No person shall employ a person not licensed as a 2244  
registered nurse under this chapter to engage in the practice of 2245  
nursing as a registered nurse. ~~No~~ 2246

No person shall knowingly employ a person not licensed as 2247  
an advanced practice registered nurse under this chapter to 2248  
engage in the practice of nursing as an advanced practice 2249  
registered nurse. 2250

No person shall employ a person not licensed as a 2251  
practical nurse under this chapter to engage in the practice of 2252  
nursing as a licensed practical nurse. 2253

~~(E)~~ (F) No person shall sell or fraudulently obtain or 2254  
furnish any nursing diploma, license, certificate, renewal, or 2255  
record, or aid or abet such acts. 2256

**Sec. 4723.06.** (A) The board of nursing shall: 2257

(1) Administer and enforce the provisions of this chapter, 2258  
including the taking of disciplinary action for violations of 2259  
section 4723.28 of the Revised Code, any other provisions of 2260  
this chapter, or rules adopted under this chapter; 2261

(2) Develop criteria that an applicant must meet to be 2262  
eligible to sit for the examination for licensure to practice as 2263  
a registered nurse or as a licensed practical nurse; 2264

(3) Issue and renew nursing licenses, dialysis technician 2265  
certificates, and community health worker certificates, as 2266  
provided in this chapter; 2267

(4) Define the minimum educational standards for 2268  
~~educational programs of the schools~~ and programs of registered 2269  
nursing and ~~schools of~~ practical nursing in this state; 2270

(5) Survey, inspect, and grant full approval to 2271  
prelicensure nursing education programs in this state that meet 2272  
the standards established by rules adopted under section 4723.07 2273  
of the Revised Code. Prelicensure nursing education programs 2274  
include, but are not limited to, diploma, associate degree, 2275  
baccalaureate degree, master's degree, and doctor of nursing 2276  
programs leading to initial licensure to practice nursing as a 2277  
registered nurse and practical nurse programs leading to initial 2278  
licensure to practice nursing as a licensed practical nurse. 2279

(6) Grant conditional approval, by a vote of a quorum of 2280  
the board, to a new prelicensure nursing education program or a 2281  
program that is being reestablished after having ceased to 2282  
operate, if the program meets and maintains the minimum 2283  
standards of the board established by rules adopted under 2284  
section 4723.07 of the Revised Code. If the board does not grant 2285  
conditional approval, it shall hold an adjudication under 2286  
Chapter 119. of the Revised Code to consider conditional 2287  
approval of the program. If the board grants conditional 2288  
approval, at the first meeting following completion of the 2289  
survey process required by division (A) (5) of this section, the 2290  
board shall determine whether to grant full approval to the 2291  
program. If the board does not grant full approval or if it 2292  
appears that the program has failed to meet and maintain 2293  
standards established by rules adopted under section 4723.07 of 2294  
the Revised Code, the board shall hold an adjudication under 2295  
Chapter 119. of the Revised Code to consider the program. Based 2296  
on results of the adjudication, the board may continue or 2297  
withdraw conditional approval, or grant full approval. 2298

- (7) Place on provisional approval, for a period of time 2299  
specified by the board, a program that has ceased to meet and 2300  
maintain the minimum standards of the board established by rules 2301  
adopted under section 4723.07 of the Revised Code. Prior to or 2302  
at the end of the period, the board shall reconsider whether the 2303  
program meets the standards and shall grant full approval if it 2304  
does. If it does not, the board may withdraw approval, pursuant 2305  
to an adjudication under Chapter 119. of the Revised Code. 2306
- (8) Approve continuing education programs and courses 2307  
under standards established in rules adopted under sections 2308  
4723.07, 4723.69, 4723.79, and 4723.88 of the Revised Code; 2309
- (9) Establish a program for monitoring chemical dependency 2310  
in accordance with section 4723.35 of the Revised Code; 2311
- (10) Establish the practice intervention and improvement 2312  
program in accordance with section 4723.282 of the Revised Code; 2313
- ~~(11) Issue and renew certificates of authority to practice 2314  
nursing as a certified registered nurse anesthetist, clinical 2315  
nurse specialist, certified nurse midwife, or certified nurse 2316  
practitioner; 2317~~
- ~~(12) Approve under section 4723.46 of the Revised Code 2318  
national certifying organizations for examination and 2319  
certification of certified registered nurse anesthetists, 2320  
clinical nurse specialists, certified nurse midwives, or 2321  
certified nurse practitioners; 2322~~
- ~~(13) Issue and renew certificates to prescribe in 2323  
accordance with sections 4723.48 and 4723.486 of the Revised 2324  
Code; 2325~~
- ~~(14) Grant approval to the course of study in advanced 2326  
pharmacology and related topics required by described in section 2327~~



4723.482 of the Revised Code ~~to be eligible for a certificate to~~ 2328  
~~prescribe;~~ 2329

~~(15)~~ (12) Make an annual edition of the exclusionary 2330  
formulary established in rules adopted under section 4723.50 of 2331  
the Revised Code available to the public ~~either in printed form~~ 2332  
~~or~~ by electronic means and, as soon as possible after any 2333  
revision of the formulary becomes effective, make the revision 2334  
available to the public ~~in printed form or~~ by electronic means; 2335

~~(16)~~ (13) Approve under section 4723.46 of the Revised 2336  
Code national certifying organizations for examination and 2337  
licensure of advanced practice registered nurses, which may 2338  
include separate organizations for each nursing specialty; 2339

(14) Provide guidance and make recommendations to the 2340  
general assembly, the governor, state agencies, and the federal 2341  
government with respect to the regulation of the practice of 2342  
nursing and the enforcement of this chapter; 2343

~~(17)~~ (15) Make an annual report to the governor, which 2344  
shall be open for public inspection; 2345

~~(18)~~ (16) Maintain and have open for public inspection the 2346  
following records: 2347

(a) A record of all its meetings and proceedings; 2348

(b) A record of all applicants for, and holders of, 2349  
licenses and certificates issued by the board under this chapter 2350  
or in accordance with rules adopted under this chapter. The 2351  
record shall be maintained in a format determined by the board. 2352

(c) A list of education and training programs approved by 2353  
the board. 2354

~~(19)~~ (17) Deny approval to a person who submits or causes 2355

to be submitted false, misleading, or deceptive statements, 2356  
information, or documentation to the board in the process of 2357  
applying for approval of a new education or training program. If 2358  
the board proposes to deny approval of a new education or 2359  
training program, it shall do so pursuant to an adjudication 2360  
conducted under Chapter 119. of the Revised Code. 2361

(B) The board may fulfill the requirement of division (A) 2362  
(8) of this section by authorizing persons who meet the 2363  
standards established in rules adopted under section 4723.07 of 2364  
the Revised Code to approve continuing education programs and 2365  
courses. Persons so authorized shall approve continuing 2366  
education programs and courses in accordance with standards 2367  
established in rules adopted under section 4723.07 of the 2368  
Revised Code. 2369

Persons seeking authorization to approve continuing 2370  
education programs and courses shall apply to the board and pay 2371  
the appropriate fee established under section 4723.08 of the 2372  
Revised Code. Authorizations to approve continuing education 2373  
programs and courses shall expire and may be renewed according 2374  
to the schedule established in rules adopted under section 2375  
4723.07 of the Revised Code. 2376

In addition to approving continuing education programs 2377  
under division (A) (8) of this section, the board may sponsor 2378  
continuing education activities that are directly related to the 2379  
statutes and rules the board enforces. 2380

**Sec. 4723.07.** In accordance with Chapter 119. of the 2381  
Revised Code, the board of nursing shall adopt and may amend and 2382  
rescind rules that establish all of the following: 2383

(A) Provisions for the board's government and control of 2384

its actions and business affairs;	2385
(B) Minimum standards for nursing education programs that prepare graduates to be licensed under this chapter and procedures for granting, renewing, and withdrawing approval of those programs;	2386 2387 2388 2389
(C) Criteria that applicants for licensure must meet to be eligible to take examinations for licensure;	2390 2391
(D) Standards and procedures for renewal of the licenses and certificates issued by the board;	2392 2393
(E) Standards for approval of continuing nursing education programs and courses for registered nurses, <u>advanced practice registered nurses, and licensed practical nurses</u> , <del>certified registered nurse anesthetists, clinical nurse specialists, certified nurse midwives, and certified nurse practitioners</del> . The standards may provide for approval of continuing nursing education programs and courses that have been approved by other state boards of nursing or by national accreditation systems for nursing, including, but not limited to, the American nurses' credentialing center and the national association for practical nurse education and service.	2394 2395 2396 2397 2398 2399 2400 2401 2402 2403 2404
(F) Standards that persons must meet to be authorized by the board to approve continuing education programs and courses and a schedule by which that authorization expires and may be renewed;	2405 2406 2407 2408
(G) Requirements, including continuing education requirements, for reactivating inactive licenses or certificates, and for reinstating licenses or certificates that have lapsed;	2409 2410 2411 2412
(H) Conditions that may be imposed for reinstatement of a	2413

license or certificate following action taken under section	2414
3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised	2415
Code resulting in a license or certificate suspension;	2416
(I) Requirements for board approval of courses in	2417
medication administration by licensed practical nurses;	2418
(J) Criteria for evaluating the qualifications of an	2419
applicant for a license to practice nursing as a registered	2420
nurse, <u>a license to practice nursing as an advanced practice</u>	2421
<u>registered nurse, or a license to practice nursing as a licensed</u>	2422
<u>practical nurse, or a certificate of authority issued under</u>	2423
<u>division (B) of section 4723.41 of the Revised Code for the</u>	2424
purpose of issuing the license <del>or certificate</del> by the board's	2425
endorsement of the applicant's authority to practice issued by	2426
the licensing agency of another state;	2427
(K) Universal and standard precautions that shall be used	2428
by each licensee or certificate holder. The rules shall define	2429
and establish requirements for universal and standard	2430
precautions that include the following:	2431
(1) Appropriate use of hand washing;	2432
(2) Disinfection and sterilization of equipment;	2433
(3) Handling and disposal of needles and other sharp	2434
instruments;	2435
(4) Wearing and disposal of gloves and other protective	2436
garments and devices.	2437
(L) <del>Standards and procedures for approving certificates of</del>	2438
<del>authority to practice nursing as a certified registered nurse</del>	2439
<del>anesthetist, clinical nurse specialist, certified nurse midwife,</del>	2440
<del>or certified nurse practitioner, and for renewal of those</del>	2441

~~certificates;~~ 2442

~~(M) Quality assurance standards for certified registered nurse anesthetists, clinical nurse specialists, certified nurse midwives, or certified nurse practitioners advanced practice registered nurses;~~ 2443  
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2445  
2446

~~(N)~~ (M) Additional criteria for the standard care arrangement required by section 4723.431 of the Revised Code entered into by a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and the nurse's collaborating physician or podiatrist; 2447  
2448  
2449  
2450  
2451

~~(O) Continuing education standards for clinical nurse specialists who were issued a certificate of authority to practice as a clinical nurse specialist under division (C) of section 4723.41 of the Revised Code as that division existed at any time before March 20, 2013;~~ 2452  
2453  
2454  
2455  
2456

~~(P)~~ (N) For purposes of division (B) (31) of section 4723.28 of the Revised Code, the actions, omissions, or other circumstances that constitute failure to establish and maintain professional boundaries with a patient; 2457  
2458  
2459  
2460

~~(Q)~~ (O) Standards and procedures for delegation under ~~division (C) of~~ section 4723.48 of the Revised Code of the authority to administer drugs. 2461  
2462  
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The board may adopt other rules necessary to carry out the provisions of this chapter. The rules shall be adopted in accordance with Chapter 119. of the Revised Code. 2464  
2465  
2466

**Sec. 4723.08.** (A) The board of nursing may impose fees not to exceed the following limits: 2467  
2468

(1) For application for licensure by examination or 2469

<u>endorsement</u> to practice nursing as a registered nurse or as a	2470
licensed practical nurse, seventy-five dollars;	2471
(2) For application for licensure <del>by endorsement</del> to	2472
practice nursing as <del>a</del> <u>an advanced practice</u> registered nurse <del>or</del>	2473
<del>as a licensed practical nurse, seventy five</del> <u>one hundred fifty</u>	2474
dollars;	2475
(3) <del>For application for a certificate of authority to</del>	2476
<del>practice nursing as a certified registered nurse anesthetist,</del>	2477
<del>clinical nurse specialist, certified nurse midwife, or certified</del>	2478
<del>nurse practitioner, one hundred dollars;</del>	2479
<del>(4)</del> For application for a temporary dialysis technician	2480
certificate, the amount specified in rules adopted under section	2481
4723.79 of the Revised Code;	2482
<del>(5)</del> <u>(4)</u> For application for a dialysis technician	2483
certificate, the amount specified in rules adopted under section	2484
4723.79 of the Revised Code;	2485
<del>(6)</del> For application for a certificate to prescribe, fifty	2486
dollars;	2487
<del>(7)</del> <u>(5)</u> For providing, pursuant to division (B) of section	2488
4723.271 of the Revised Code, written verification of a nursing	2489
license, certificate of authority, certificate to prescribe,	2490
dialysis technician certificate, medication aide certificate, or	2491
community health worker certificate to another jurisdiction,	2492
fifteen dollars;	2493
<del>(8)</del> <u>(6)</u> For providing, pursuant to division (A) of section	2494
4723.271 of the Revised Code, a replacement copy of a wall	2495
certificate suitable for framing as described in that division,	2496
twenty-five dollars;	2497

<del>(9)</del> <u>(7)</u> For renewal of a <del>nursing license to practice as a</del> <u>registered nurse or licensed practical nurse</u> , sixty-five dollars;	2498 2499 2500
<del>(10)</del> For renewal of a <del>certificate of authority to practice</del> <del>nursing as a certified registered nurse anesthetist, clinical</del> <del>nurse specialist, certified nurse midwife, or certified nurse</del> <del>practitioner, eighty five dollars;</del>	2501 2502 2503 2504
<del>(11)</del> <u>(8)</u> For renewal of a <del>certificate to prescribe</del> <u>license</u> <u>to practice as an advanced practice registered nurse</u> , <del>fifty one</del> <u>hundred thirty-five</u> dollars;	2505 2506 2507
<del>(12)</del> <u>(9)</u> For renewal of a dialysis technician certificate, the amount specified in rules adopted under section 4723.79 of the Revised Code;	2508 2509 2510
<del>(13)</del> <u>(10)</u> For processing a late application for renewal of a nursing license, certificate of authority, or dialysis technician certificate, fifty dollars;	2511 2512 2513
<del>(14)</del> <u>(11)</u> 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;	2514 2515 2516 2517
<del>(15)</del> <u>(12)</u> 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;	2518 2519 2520 2521
<del>(16)</del> <u>(13)</u> For each year for which authorization to approve continuing education programs and courses is renewed, one hundred fifty dollars;	2522 2523 2524
<del>(17)</del> <u>(14)</u> For application for approval to operate a	2525

dialysis training program, the amount specified in rules adopted	2526
under section 4723.79 of the Revised Code;	2527
<del>(18)</del> <u>(15)</u> For reinstatement of a lapsed license or	2528
certificate issued under this chapter, one hundred dollars	2529
except as provided in section 5903.10 of the Revised Code;	2530
<del>(19)</del> <u>(16)</u> For processing a check returned to the board by	2531
a financial institution, twenty-five dollars;	2532
<del>(20)</del> <u>(17)</u> The amounts specified in rules adopted under	2533
section 4723.88 of the Revised Code pertaining to the issuance	2534
of certificates to community health workers, including fees for	2535
application for a certificate, renewal of a certificate,	2536
processing a late application for renewal of a certificate,	2537
reinstatement of a lapsed certificate, application for approval	2538
of a community health worker training program for community	2539
health workers, and renewal of the approval of a training	2540
program for community health workers.	2541
(B) Each quarter, for purposes of transferring funds under	2542
section 4743.05 of the Revised Code to the nurse education	2543
assistance fund created in section 3333.28 of the Revised Code,	2544
the board of nursing shall certify to the director of budget and	2545
management the number of licenses renewed under this chapter	2546
during the preceding quarter and the amount equal to that number	2547
times five dollars.	2548
(C) The board may charge a participant in a board-	2549
sponsored continuing education activity an amount not exceeding	2550
fifteen dollars for each activity.	2551
(D) The board may contract for services pertaining to the	2552
process of providing written verification of a license or	2553
certificate when the verification is performed for purposes	2554



other than providing verification to another jurisdiction. The 2555  
contract may include provisions pertaining to the collection of 2556  
the fee charged for providing the written verification. As part 2557  
of these provisions, the board may permit the contractor to 2558  
retain a portion of the fees as compensation, before any amounts 2559  
are deposited into the state treasury. 2560

**Sec. 4723.09.** (A) (1) An application for licensure by 2561  
examination to practice as a registered nurse or as a licensed 2562  
practical nurse shall be submitted to the board of nursing in 2563  
the form prescribed by rules of the board. The application shall 2564  
include evidence that the applicant has completed a nursing 2565  
education program approved by the board under division (A) of 2566  
section 4723.06 of the Revised Code or by a board of another 2567  
jurisdiction that is a member of the national council of state 2568  
boards of nursing. The application also shall include any other 2569  
information required by rules of the board. The application 2570  
shall be accompanied by the application fee required by section 2571  
4723.08 of the Revised Code. 2572

(2) The board shall grant a license to practice nursing as 2573  
a registered nurse or as a licensed practical nurse if all of 2574  
the following apply: 2575

(a) For all applicants, the applicant passes the 2576  
examination accepted by the board under section 4723.10 of the 2577  
Revised Code. 2578

(b) For an applicant who entered a prelicensure nursing 2579  
education program on or after June 1, 2003, the results of a 2580  
criminal records check conducted in accordance with section 2581  
4723.091 of the Revised Code demonstrate that the applicant is 2582  
not ineligible for licensure as specified in section 4723.092 of 2583  
the Revised Code. 2584

(c) For all applicants, the board determines that the applicant has not committed any act that is grounds for disciplinary action under section 3123.47 or 4723.28 of the Revised Code or determines that an applicant who has committed any act that is grounds for disciplinary action under either section has made restitution or has been rehabilitated, or both.

(d) For all applicants, the applicant is not required to register under Chapter 2950. of the Revised Code or a substantially similar law of another state, the United States, or another country.

(3) The board is not required to afford an adjudication to an individual to whom it has refused to grant a license because of that individual's failure to pass the examination.

(B)(1) An application for ~~license~~licensure by endorsement to practice nursing as a registered nurse or as a licensed practical nurse shall be submitted to the board in the form prescribed by rules of the board. The application shall include evidence that the applicant holds a current, valid, and unrestricted license ~~in or equivalent authorization from another~~ jurisdiction granted after passing an examination approved by the board of that jurisdiction that is equivalent to the examination requirements under this chapter for a license to practice nursing as a registered nurse or licensed practical nurse. The application shall include any other information required by rules of the board. The application shall be accompanied by the application fee required by section 4723.08 of the Revised Code.

(2) The board shall grant a license by endorsement to practice nursing as a registered nurse or as a licensed practical nurse if all of the following apply:

(a) For all applicants, the applicant provides evidence 2615  
satisfactory to the board that the applicant has successfully 2616  
completed a nursing education program approved by the board 2617  
under division (A) of section 4723.06 of the Revised Code or by 2618  
a board of another jurisdiction that is a member of the national 2619  
council of state boards of nursing. 2620

(b) For all applicants, the examination, at the time it is 2621  
successfully completed, is equivalent to the examination 2622  
requirements in effect at that time for applicants who were 2623  
licensed by examination in this state. 2624

(c) For all applicants, the board determines there is 2625  
sufficient evidence that the applicant completed two contact 2626  
hours of continuing education directly related to this chapter 2627  
or the rules adopted under it. 2628

(d) For all applicants, the results of a criminal records 2629  
check conducted in accordance with section 4723.091 of the 2630  
Revised Code demonstrate that the applicant is not ineligible 2631  
for licensure as specified in section 4723.092 of the Revised 2632  
Code. 2633

(e) For all applicants, the applicant has not committed 2634  
any act that is grounds for disciplinary action under section 2635  
3123.47 or 4723.28 of the Revised Code, or the board determines 2636  
that an applicant who has committed any act that is grounds for 2637  
disciplinary action under either of those sections has made 2638  
restitution or has been rehabilitated, or both. 2639

(f) For all applicants, the applicant is not required to 2640  
register under Chapter 2950. of the Revised Code, or a 2641  
substantially similar law of another state, the United States, 2642  
or another country. 2643

(C) The board may grant a nonrenewable temporary permit to practice nursing as a registered nurse or as a licensed practical nurse to an applicant for license by endorsement if the board is satisfied by the evidence that the applicant holds a current, valid, and unrestricted license in or equivalent authorization from another jurisdiction. Subject to earlier automatic termination as described in this paragraph, the temporary permit shall expire at the earlier of one hundred eighty days after issuance or upon the issuance of a license by endorsement. The temporary permit shall terminate automatically if the criminal records check completed by the bureau of criminal identification and investigation as described in section 4723.091 of the Revised Code regarding the applicant indicates that the applicant is ineligible for licensure as specified in section 4723.092 of the Revised Code. An applicant whose temporary permit is automatically terminated is permanently prohibited from obtaining a license to practice nursing in this state as a registered nurse or as a licensed practical nurse.

**Sec. 4723.151.** (A) Medical diagnosis, prescription of medical measures, and the practice of medicine or surgery or any of its branches by a nurse are prohibited.

(B) Division (A) of this section does not prohibit a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner from practicing within the nurse's scope of practice in accordance with section 4723.43 of the Revised Code. ~~Division (A) of this section does not prohibit a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner who holds a certificate to prescribe issued under section 4723.48 of the Revised Code from prescribing drugs and~~

~~therapeutic devices in accordance with section 4723.481 of the~~ 2675  
~~Revised Code.~~ 2676

(C) Notwithstanding division (B) of this section, nothing 2677  
in this chapter shall be construed as authorizing any nurse to 2678  
prescribe any drug or device to perform or induce an abortion, 2679  
or to otherwise perform or induce an abortion. 2680

**Sec. 4723.16.** (A) An individual whom the board of nursing 2681  
licenses, ~~certificates,~~ or otherwise legally authorizes to 2682  
engage in the practice of nursing as a registered nurse,  2683  
advanced practice registered nurse, or ~~as a~~ licensed practical 2684  
nurse may render the professional services of a registered,  2685  
advanced practice registered, or licensed practical nurse within 2686  
this state through a corporation formed under division (B) of 2687  
section 1701.03 of the Revised Code, a limited liability company 2688  
formed under Chapter 1705. of the Revised Code, a partnership, 2689  
or a professional association formed under Chapter 1785. of the 2690  
Revised Code. This division does not preclude an individual of 2691  
that nature from rendering professional services as a 2692  
registered, advanced practice registered, or licensed practical 2693  
nurse through another form of business entity, including, but 2694  
not limited to, a nonprofit corporation or foundation, or in 2695  
another manner that is authorized by or in accordance with this 2696  
chapter, another chapter of the Revised Code, or rules of the 2697  
board of nursing adopted pursuant to this chapter. 2698

(B) A corporation, limited liability company, partnership, 2699  
or professional association described in division (A) of this 2700  
section may be formed for the purpose of providing a combination 2701  
of the professional services of the following individuals who 2702  
are licensed, certificated, or otherwise legally authorized to 2703  
practice their respective professions: 2704

(1) Optometrists who are authorized to practice optometry under Chapter 4725. of the Revised Code;	2705 2706
(2) Chiropractors who are authorized to practice chiropractic or acupuncture under Chapter 4734. of the Revised Code;	2707 2708 2709
(3) Psychologists who are authorized to practice psychology under Chapter 4732. of the Revised Code;	2710 2711
(4) Registered, <u>advanced practice registered</u> , or licensed practical nurses who are authorized to practice nursing as registered nurses, <u>advanced practice registered nurses</u> , or <del>as-</del> licensed practical nurses under this chapter;	2712 2713 2714 2715
(5) Pharmacists who are authorized to practice pharmacy under Chapter 4729. of the Revised Code;	2716 2717
(6) Physical therapists who are authorized to practice physical therapy under sections 4755.40 to 4755.56 of the Revised Code;	2718 2719 2720
(7) Occupational therapists who are licensed to practice occupational therapy under sections 4755.04 to 4755.13 of the Revised Code;	2721 2722 2723
(8) Mechanotherapists who are authorized to practice mechanotherapy under section 4731.151 of the Revised Code;	2724 2725
(9) Doctors of medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery who are licensed, certificated, or otherwise legally authorized for their respective practices under Chapter 4731. of the Revised Code;	2726 2727 2728 2729
(10) Licensed professional clinical counselors, licensed professional counselors, independent social workers, social workers, independent marriage and family therapists, or marriage	2730 2731 2732

and family therapists who are authorized for their respective 2733  
practices under Chapter 4757. of the Revised Code. 2734

This division shall apply notwithstanding a provision of a 2735  
code of ethics applicable to a nurse that prohibits a 2736  
registered, advanced practice registered, or licensed practical 2737  
nurse from engaging in the practice of nursing as a registered 2738  
nurse, advanced practice registered nurse, or ~~as a~~ licensed 2739  
practical nurse in combination with a person who is licensed, 2740  
certificated, or otherwise legally authorized to practice 2741  
optometry, chiropractic, acupuncture through the state 2742  
chiropractic board, psychology, pharmacy, physical therapy, 2743  
occupational therapy, mechanotherapy, medicine and surgery, 2744  
osteopathic medicine and surgery, podiatric medicine and 2745  
surgery, professional counseling, social work, or marriage and 2746  
family therapy, but who is not also licensed, certificated, or 2747  
otherwise legally authorized to engage in the practice of 2748  
nursing as a registered nurse, advanced practice registered 2749  
nurse, or ~~as a~~ licensed practical nurse. 2750

**Sec. 4723.24.** (A) (1) Except as otherwise provided in this 2751  
chapter, all of the following apply with respect to the 2752  
schedules for renewal of licenses and certificates issued by the 2753  
board of nursing: 2754

(a) An active license to practice nursing as a registered 2755  
nurse is subject to renewal in odd-numbered years. An 2756  
application for renewal of the license is due on the fifteenth 2757  
day of September of the renewal year. A late application may be 2758  
submitted before the license lapses. If a license is not renewed 2759  
or classified as inactive, the license lapses on the first day 2760  
of November of the renewal year. 2761

(b) An active license to practice nursing as a licensed 2762

practical nurse is subject to renewal in even-numbered years. An 2763  
application for renewal of the license is due on the fifteenth 2764  
day of September of the renewal year. A late application may be 2765  
submitted before the license lapses. If a license is not renewed 2766  
or classified as inactive, the license lapses on the first day 2767  
of November of the renewal year. 2768

(c) An active license to practice nursing as an advanced 2769  
practice registered nurse is subject to renewal in odd-numbered 2770  
years. An application for renewal of the license is due on the 2771  
fifteenth day of September of the renewal year. A late 2772  
application may be submitted before the license lapses. If a 2773  
license is not renewed or classified as inactive, the license 2774  
lapses on the first day of November of the renewal year. 2775

(d) All other active licenses and certificates issued 2776  
under this chapter are subject to renewal according to a 2777  
schedule established by the board in rules adopted under section 2778  
4723.07 of the Revised Code. 2779

(2) The board shall provide an application for renewal to 2780  
every holder of an active license or certificate, except when 2781  
the board is aware that an individual is ineligible for license 2782  
or certificate renewal for any reason, including pending 2783  
criminal charges in this state or another jurisdiction, failure 2784  
to comply with a disciplinary order from the board or the terms 2785  
of a consent agreement entered into with the board, failure to 2786  
pay fines or fees owed to the board, or failure to provide on 2787  
the board's request documentation of having completed the 2788  
continuing nursing education requirements specified in division 2789  
(C) of this section. 2790

If the board provides a renewal application by mail, the 2791  
application shall be addressed to the last known post-office 2792



address of the license or certificate holder and mailed before 2793  
the date the application is due. Failure of the license or 2794  
certificate holder to receive an application for renewal from 2795  
the board shall not excuse the holder from the requirements 2796  
contained in this section, except as provided in section 5903.10 2797  
of the Revised Code. 2798

(3) A license or certificate holder seeking renewal of the 2799  
license or certificate shall complete the renewal application 2800  
and submit it to the board with the renewal fee established 2801  
under section 4723.08 of the Revised Code. If a renewal 2802  
application is submitted after the date the application is due, 2803  
but before the date the license or certificate lapses, the 2804  
applicant shall include with the application the fee established 2805  
under section 4723.08 of the Revised Code for processing a late 2806  
application for renewal. 2807

With the renewal application, the applicant shall report 2808  
any conviction, plea, or judicial finding regarding a criminal 2809  
offense that constitutes grounds for the board to impose 2810  
sanctions under section 4723.28 of the Revised Code since the 2811  
applicant last submitted an application to the board. 2812

(4) On receipt of the renewal application, the board shall 2813  
verify whether the applicant meets the renewal requirements. If 2814  
the applicant meets the requirements, the board shall renew the 2815  
license or certificate. 2816

(B) Every license or certificate holder shall give written 2817  
notice to the board of any change of name or address within 2818  
thirty days of the change. The board shall require the holder to 2819  
document a change of name in a manner acceptable to the board. 2820

(C) (1) Except in the case of a first renewal after 2821

licensure by examination, to be eligible for renewal of an 2822  
active license to practice nursing as a registered nurse or 2823  
licensed practical nurse, each individual who holds an active 2824  
license shall, in each two-year period specified by the board, 2825  
complete continuing nursing education as follows: 2826

(a) For renewal of a license that was issued for a two- 2827  
year renewal period, twenty-four hours of continuing nursing 2828  
education; 2829

(b) For renewal of a license that was issued for less than 2830  
a two-year renewal period, the number of hours of continuing 2831  
nursing education specified by the board in rules adopted in 2832  
accordance with Chapter 119. of the Revised Code; 2833

(c) Of the hours of continuing nursing education completed 2834  
in any renewal period, at least one hour of the education must 2835  
be directly related to the statutes and rules pertaining to the 2836  
practice of nursing in this state. 2837

(2) To be eligible for renewal of an active license to 2838  
practice nursing as an advanced practice registered nurse, each 2839  
individual who holds an active license shall, in each two-year 2840  
period specified by the board, complete continuing education as 2841  
follows: 2842

(a) For renewal of a license that was issued for a two- 2843  
year renewal period, twenty-four hours of continuing nursing 2844  
education; 2845

(b) For renewal of a license that was issued for less than 2846  
a two-year renewal period, the number of hours of continuing 2847  
nursing education specified by the board in rules adopted in 2848  
accordance with Chapter 119. of the Revised Code, including the 2849  
number of hours of continuing education in advanced 2850

pharmacology; 2851

(c) In the case of an advanced practice registered nurse 2852  
who is designated as a clinical nurse specialist, certified 2853  
nurse-midwife, or certified nurse practitioner, of the hours of 2854  
continuing nursing education completed in any renewal period, at 2855  
least twelve hours of the education must be in advanced 2856  
pharmacology and be received from an accredited institution 2857  
recognized by the board. 2858

(d) The continuing education required by division (C) (2) 2859  
(a) or (b) of this section is in addition to the continuing 2860  
education required by division (C) (1) (a) or (b) of this section. 2861

(3) The board shall adopt rules establishing the procedure 2862  
for a license holder to certify to the board completion of the 2863  
required continuing nursing education. The board may conduct a 2864  
random sample of license holders and require that the license 2865  
holders included in the sample submit satisfactory documentation 2866  
of having completed the requirements for continuing nursing 2867  
education. On the board's request, a license holder included in 2868  
the sample shall submit the required documentation. 2869

~~(3)~~ (4) An educational activity may be applied toward 2870  
meeting the continuing nursing education requirement only if it 2871  
is obtained through a program or course approved by the board or 2872  
a person the board has authorized to approve continuing nursing 2873  
education programs and courses. 2874

~~(4)~~ (5) The continuing education required of a certified 2875  
registered nurse anesthetist, clinical nurse specialist, 2876  
certified nurse-midwife, or certified nurse practitioner to 2877  
maintain certification by a national certifying organization 2878  
shall be applied toward the continuing education requirements 2879

for renewal of ~~a license to practice nursing as a registered~~ 2880  
~~nurse only the following if it the continuing education is~~ 2881  
obtained through a program or course approved by the board or a 2882  
person the board has authorized to approve continuing nursing 2883  
education programs and courses: 2884

(a) A license to practice nursing as a registered nurse; 2885

(b) A license to practice nursing as an advanced practice 2886  
registered nurse. 2887

(D) Except as otherwise provided in section 4723.28 of the 2888  
Revised Code, an individual who holds an active license to 2889  
practice nursing as a registered nurse or licensed practical 2890  
nurse and who does not intend to practice in Ohio may send to 2891  
the board written notice to that effect on or before the date 2892  
the license lapses, and the board shall classify the license as 2893  
inactive. During the period that the license is classified as 2894  
inactive, the holder may not engage in the practice of nursing 2895  
as a registered nurse or licensed practical nurse in Ohio and is 2896  
not required to pay the renewal fee. 2897

The holder of an inactive license to practice nursing as a 2898  
registered nurse or licensed practical nurse or an individual 2899  
who has failed to renew the individual's license to practice 2900  
nursing as a registered nurse or licensed practical nurse may 2901  
have the license reactivated or reinstated upon doing the 2902  
following, as applicable to the holder or individual: 2903

(1) Applying to the board for license reactivation or 2904  
reinstatement on forms provided by the board; 2905

(2) Meeting the requirements for reactivating or 2906  
reinstating licenses established in rules adopted under section 2907  
4723.07 of the Revised Code or, if the individual did not renew 2908

because of service in the armed forces of the United States or a 2909  
reserve component of the armed forces of the United States, 2910  
including the Ohio national guard or the national guard of any 2911  
other state, as provided in section 5903.10 of the Revised Code; 2912

(3) If the license has been inactive for at least five 2913  
years from the date of application for reactivation or has 2914  
lapsed for at least five years from the date of application for 2915  
reinstatement, submitting a request to the bureau of criminal 2916  
identification and investigation for a criminal records check 2917  
and check of federal bureau of investigation records pursuant to 2918  
section 4723.091 of the Revised Code. 2919

(E) Except as otherwise provided in section 4723.28 of the 2920  
Revised Code, an individual who holds an active license to 2921  
practice nursing as an advanced practice registered nurse and 2922  
does not intend to practice in Ohio as an advanced practice 2923  
registered nurse may send to the board written notice to that 2924  
effect on or before the renewal date, and the board shall 2925  
classify the license as inactive. During the period that the 2926  
license is classified as inactive, the holder may not engage in 2927  
the practice of nursing as an advanced practice registered nurse 2928  
in Ohio and is not required to pay the renewal fee. 2929

The holder of an inactive license to practice nursing as 2930  
an advanced practice registered nurse or an individual who has 2931  
failed to renew the individual's license to practice nursing as 2932  
an advanced practice registered nurse may have the license 2933  
reactivated or reinstated upon doing the following, as 2934  
applicable to the holder or individual: 2935

(1) Applying to the board for license reactivation or 2936  
reinstatement on forms provided by the board; 2937

(2) Meeting the requirements for reactivating or 2938  
reinstating licenses established in rules adopted under section 2939  
4723.07 of the Revised Code or, if the individual did not renew 2940  
because of service in the armed forces of the United States or a 2941  
reserve component of the armed forces of the United States, 2942  
including the Ohio national guard or the national guard of any 2943  
other state, as provided in section 5903.10 of the Revised Code. 2944

**Sec. 4723.25.** The board of nursing shall approve one or 2945  
more continuing education courses of study that comply with 2946  
divisions (E) and (F) of section 4723.07 of the Revised Code and 2947  
that assist ~~registered nurses and licensed practical nurses~~ in 2948  
recognizing the signs of domestic violence and its relationship 2949  
to child abuse. Nurses are not required to take the courses. 2950

**Sec. 4723.271.** (A) Upon request of the holder of a nursing 2951  
license, ~~certificate of authority, dialysis technician~~ 2952  
~~certificate,~~ medication aide certificate, or community health 2953  
worker certificate issued under this chapter, the presentment of 2954  
proper identification as prescribed in rules adopted by the 2955  
board of nursing, and payment of the fee authorized under 2956  
section 4723.08 of the Revised Code, the board of nursing shall 2957  
provide to the requestor a replacement copy of a wall 2958  
certificate suitable for framing. 2959

(B) Upon request of the holder of a nursing license, 2960  
volunteer's certificate, ~~certificate of authority, certificate~~ 2961  
~~to prescribe,~~ dialysis technician certificate, medication aide 2962  
certificate, or community health worker certificate issued under 2963  
this chapter and payment of the fee authorized under section 2964  
4723.08 of the Revised Code, the board shall verify to an agency 2965  
of another jurisdiction or foreign country the fact that the 2966  
person holds such nursing license, volunteer's certificate, 2967

~~certificate of authority, certificate to prescribe, dialysis~~ 2968  
technician certificate, medication aide certificate, or 2969  
community health worker certificate. 2970

**Sec. 4723.28.** (A) The board of nursing, by a vote of a 2971  
quorum, may impose one or more of the following sanctions if it 2972  
finds that a person committed fraud in passing an examination 2973  
required to obtain a license, ~~certificate of authority,~~ or 2974  
dialysis technician certificate issued by the board or to have 2975  
committed fraud, misrepresentation, or deception in applying for 2976  
or securing any nursing license, ~~certificate of authority,~~ or 2977  
dialysis technician certificate issued by the board: deny, 2978  
revoke, suspend, or place restrictions on any nursing license, ~~—~~ 2979  
~~certificate of authority,~~ or dialysis technician certificate 2980  
issued by the board; reprimand or otherwise discipline a holder 2981  
of a nursing license, ~~certificate of authority,~~ or dialysis 2982  
technician certificate; or impose a fine of not more than five 2983  
hundred dollars per violation. 2984

(B) The board of nursing, by a vote of a quorum, may 2985  
impose one or more of the following sanctions: deny, revoke, 2986  
suspend, or place restrictions on any nursing license, ~~—~~ 2987  
~~certificate of authority,~~ or dialysis technician certificate 2988  
issued by the board; reprimand or otherwise discipline a holder 2989  
of a nursing license, ~~certificate of authority,~~ or dialysis 2990  
technician certificate; or impose a fine of not more than five 2991  
hundred dollars per violation. The sanctions may be imposed for 2992  
any of the following: 2993

(1) Denial, revocation, suspension, or restriction of 2994  
authority to engage in a licensed profession or practice a 2995  
health care occupation, including nursing or practice as a 2996  
dialysis technician, for any reason other than a failure to 2997

renew, in Ohio or another state or jurisdiction;	2998
(2) Engaging in the practice of nursing or engaging in	2999
practice as a dialysis technician, having failed to renew a	3000
nursing license or dialysis technician certificate issued under	3001
this chapter, or while a nursing license or dialysis technician	3002
certificate is under suspension;	3003
(3) Conviction of, a plea of guilty to, a judicial finding	3004
of guilt of, a judicial finding of guilt resulting from a plea	3005
of no contest to, or a judicial finding of eligibility for a	3006
pretrial diversion or similar program or for intervention in	3007
lieu of conviction for, a misdemeanor committed in the course of	3008
practice;	3009
(4) Conviction of, a plea of guilty to, a judicial finding	3010
of guilt of, a judicial finding of guilt resulting from a plea	3011
of no contest to, or a judicial finding of eligibility for a	3012
pretrial diversion or similar program or for intervention in	3013
lieu of conviction for, any felony or of any crime involving	3014
gross immorality or moral turpitude;	3015
(5) Selling, giving away, or administering drugs or	3016
therapeutic devices for other than legal and legitimate	3017
therapeutic purposes; or conviction of, a plea of guilty to, a	3018
judicial finding of guilt of, a judicial finding of guilt	3019
resulting from a plea of no contest to, or a judicial finding of	3020
eligibility for a pretrial diversion or similar program or for	3021
intervention in lieu of conviction for, violating any municipal,	3022
state, county, or federal drug law;	3023
(6) Conviction of, a plea of guilty to, a judicial finding	3024
of guilt of, a judicial finding of guilt resulting from a plea	3025
of no contest to, or a judicial finding of eligibility for a	3026



pretrial diversion or similar program or for intervention in 3027  
lieu of conviction for, an act in another jurisdiction that 3028  
would constitute a felony or a crime of moral turpitude in Ohio; 3029

(7) Conviction of, a plea of guilty to, a judicial finding 3030  
of guilt of, a judicial finding of guilt resulting from a plea 3031  
of no contest to, or a judicial finding of eligibility for a 3032  
pretrial diversion or similar program or for intervention in 3033  
lieu of conviction for, an act in the course of practice in 3034  
another jurisdiction that would constitute a misdemeanor in 3035  
Ohio; 3036

(8) Self-administering or otherwise taking into the body 3037  
any dangerous drug, as defined in section 4729.01 of the Revised 3038  
Code, in any way that is not in accordance with a legal, valid 3039  
prescription issued for that individual, or self-administering 3040  
or otherwise taking into the body any drug that is a schedule I 3041  
controlled substance; 3042

(9) Habitual or excessive use of controlled substances, 3043  
other habit-forming drugs, or alcohol or other chemical 3044  
substances to an extent that impairs the individual's ability to 3045  
provide safe nursing care or safe dialysis care; 3046

(10) Impairment of the ability to practice according to 3047  
acceptable and prevailing standards of safe nursing care or safe 3048  
dialysis care because of the use of drugs, alcohol, or other 3049  
chemical substances; 3050

(11) Impairment of the ability to practice according to 3051  
acceptable and prevailing standards of safe nursing care or safe 3052  
dialysis care because of a physical or mental disability; 3053

(12) Assaulting or causing harm to a patient or depriving 3054  
a patient of the means to summon assistance; 3055

(13) Misappropriation or attempted misappropriation of	3056
money or anything of value in the course of practice;	3057
(14) Adjudication by a probate court of being mentally ill	3058
or mentally incompetent. The board may reinstate the person's	3059
nursing license or dialysis technician certificate upon	3060
adjudication by a probate court of the person's restoration to	3061
competency or upon submission to the board of other proof of	3062
competency.	3063
(15) The suspension or termination of employment by the	3064
department of defense or the veterans administration of the	3065
United States for any act that violates or would violate this	3066
chapter;	3067
(16) Violation of this chapter or any rules adopted under	3068
it;	3069
(17) Violation of any restrictions placed by the board on	3070
a nursing license or dialysis technician certificate;	3071
(18) Failure to use universal and standard precautions	3072
established by rules adopted under section 4723.07 of the	3073
Revised Code;	3074
(19) Failure to practice in accordance with acceptable and	3075
prevailing standards of safe nursing care or safe dialysis care;	3076
(20) In the case of a registered nurse, engaging in	3077
activities that exceed the practice of nursing as a registered	3078
nurse;	3079
(21) In the case of a licensed practical nurse, engaging	3080
in activities that exceed the practice of nursing as a licensed	3081
practical nurse;	3082
(22) In the case of a dialysis technician, engaging in	3083

activities that exceed those permitted under section 4723.72 of 3084  
the Revised Code; 3085

(23) Aiding and abetting a person in that person's 3086  
practice of nursing without a license or practice as a dialysis 3087  
technician without a certificate issued under this chapter; 3088

(24) In the case of a ~~certified registered nurse~~ 3089  
~~anesthetist, clinical nurse specialist, certified nurse midwife,~~ 3090  
~~or certified nurse practitioner~~ an advanced practice registered 3091  
nurse, except as provided in division (M) of this section, 3092  
either of the following: 3093

(a) Waiving the payment of all or any part of a deductible 3094  
or copayment that a patient, pursuant to a health insurance or 3095  
health care policy, contract, or plan that covers such nursing 3096  
services, would otherwise be required to pay if the waiver is 3097  
used as an enticement to a patient or group of patients to 3098  
receive health care services from that provider; 3099

(b) Advertising that the nurse will waive the payment of 3100  
all or any part of a deductible or copayment that a patient, 3101  
pursuant to a health insurance or health care policy, contract, 3102  
or plan that covers such nursing services, would otherwise be 3103  
required to pay. 3104

(25) Failure to comply with the terms and conditions of 3105  
participation in the chemical dependency monitoring program 3106  
established under section 4723.35 of the Revised Code; 3107

(26) Failure to comply with the terms and conditions 3108  
required under the practice intervention and improvement program 3109  
established under section 4723.282 of the Revised Code; 3110

(27) In the case of a ~~certified registered nurse~~ 3111  
~~anesthetist, clinical nurse specialist, certified nurse midwife,~~ 3112

<del>or certified an advanced practice registered nurse practitioner:</del>	3113
(a) Engaging in activities that exceed those permitted for	3114
the nurse's nursing specialty under section 4723.43 of the	3115
Revised Code;	3116
(b) Failure to meet the quality assurance standards	3117
established under section 4723.07 of the Revised Code.	3118
(28) In the case of <u>an advanced practice registered nurse</u>	3119
<del>other than a clinical nurse specialist, certified nurse midwife,</del>	3120
<del>or certified nurse practitioner described in division (D) of</del>	3121
<u>section 4723.431 of the Revised Code or a certified registered</u>	3122
<u>nurse anesthetist</u> , failure to maintain a standard care	3123
arrangement in accordance with section 4723.431 of the Revised	3124
Code or to practice in accordance with the standard care	3125
arrangement;	3126
(29) In the case of <u>an advanced practice registered nurse</u>	3127
<u>who is designated as a clinical nurse specialist, certified</u>	3128
nurse-midwife, or certified nurse practitioner <del>who holds a</del>	3129
<del>certificate to prescribe issued under section 4723.48 of the</del>	3130
<del>Revised Code</del> , failure to prescribe drugs and therapeutic devices	3131
in accordance with section 4723.481 of the Revised Code;	3132
(30) Prescribing any drug or device to perform or induce	3133
an abortion, or otherwise performing or inducing an abortion;	3134
(31) Failure to establish and maintain professional	3135
boundaries with a patient, as specified in rules adopted under	3136
section 4723.07 of the Revised Code;	3137
(32) Regardless of whether the contact or verbal behavior	3138
is consensual, engaging with a patient other than the spouse of	3139
the registered nurse, licensed practical nurse, or dialysis	3140
technician in any of the following:	3141

(a) Sexual contact, as defined in section 2907.01 of the Revised Code; 3142  
3143

(b) Verbal behavior that is sexually demeaning to the patient or may be reasonably interpreted by the patient as sexually demeaning. 3144  
3145  
3146

(33) Assisting suicide, as defined in section 3795.01 of the Revised Code; 3147  
3148

(34) 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; 3149  
3150  
3151  
3152

(35) Failure to comply with section 4723.487 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. 3153  
3154  
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(C) Disciplinary actions taken by the board under divisions (A) and (B) of this section shall be taken pursuant to an adjudication conducted under Chapter 119. of the Revised Code, except that in lieu of a hearing, the board may enter into a consent agreement with an individual to resolve an allegation of a violation of this chapter or any rule adopted under it. A consent agreement, when ratified by a vote of a quorum, shall constitute the findings and order of the board with respect to the matter addressed in the agreement. If the board refuses to ratify a consent agreement, the admissions and findings contained in the agreement shall be of no effect. 3157  
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(D) The hearings of the board shall be conducted in accordance with Chapter 119. of the Revised Code, the board may appoint a hearing examiner, as provided in section 119.09 of the 3168  
3169  
3170

Revised Code, to conduct any hearing the board is authorized to 3171  
hold under Chapter 119. of the Revised Code. 3172

In any instance in which the board is required under 3173  
Chapter 119. of the Revised Code to give notice of an 3174  
opportunity for a hearing and the applicant, licensee, or 3175  
certificate holder does not make a timely request for a hearing 3176  
in accordance with section 119.07 of the Revised Code, the board 3177  
is not required to hold a hearing, but may adopt, by a vote of a 3178  
quorum, a final order that contains the board's findings. In the 3179  
final order, the board may order any of the sanctions listed in 3180  
division (A) or (B) of this section. 3181

(E) If a criminal action is brought against a registered 3182  
nurse, licensed practical nurse, or dialysis technician for an 3183  
act or crime described in divisions (B) (3) to (7) of this 3184  
section and the action is dismissed by the trial court other 3185  
than on the merits, the board shall conduct an adjudication to 3186  
determine whether the registered nurse, licensed practical 3187  
nurse, or dialysis technician committed the act on which the 3188  
action was based. If the board determines on the basis of the 3189  
adjudication that the registered nurse, licensed practical 3190  
nurse, or dialysis technician committed the act, or if the 3191  
registered nurse, licensed practical nurse, or dialysis 3192  
technician fails to participate in the adjudication, the board 3193  
may take action as though the registered nurse, licensed 3194  
practical nurse, or dialysis technician had been convicted of 3195  
the act. 3196

If the board takes action on the basis of a conviction, 3197  
plea, or a judicial finding as described in divisions (B) (3) to 3198  
(7) of this section that is overturned on appeal, the registered 3199  
nurse, licensed practical nurse, or dialysis technician may, on 3200

exhaustion of the appeal process, petition the board for 3201  
reconsideration of its action. On receipt of the petition and 3202  
supporting court documents, the board shall temporarily rescind 3203  
its action. If the board determines that the decision on appeal 3204  
was a decision on the merits, it shall permanently rescind its 3205  
action. If the board determines that the decision on appeal was 3206  
not a decision on the merits, it shall conduct an adjudication 3207  
to determine whether the registered nurse, licensed practical 3208  
nurse, or dialysis technician committed the act on which the 3209  
original conviction, plea, or judicial finding was based. If the 3210  
board determines on the basis of the adjudication that the 3211  
registered nurse, licensed practical nurse, or dialysis 3212  
technician committed such act, or if the registered nurse, 3213  
licensed practical nurse, or dialysis technician does not 3214  
request an adjudication, the board shall reinstate its action; 3215  
otherwise, the board shall permanently rescind its action. 3216

Notwithstanding the provision of division (C) (2) of 3217  
section 2953.32 of the Revised Code specifying that if records 3218  
pertaining to a criminal case are sealed under that section the 3219  
proceedings in the case shall be deemed not to have occurred, 3220  
sealing of the following records on which the board has based an 3221  
action under this section shall have no effect on the board's 3222  
action or any sanction imposed by the board under this section: 3223  
records of any conviction, guilty plea, judicial finding of 3224  
guilt resulting from a plea of no contest, or a judicial finding 3225  
of eligibility for a pretrial diversion program or intervention 3226  
in lieu of conviction. 3227

The board shall not be required to seal, destroy, redact, 3228  
or otherwise modify its records to reflect the court's sealing 3229  
of conviction records. 3230

(F) The board may investigate an individual's criminal background in performing its duties under this section. As part of such investigation, the board may order the individual to submit, at the individual's expense, a request to the bureau of criminal identification and investigation for a criminal records check and check of federal bureau of investigation records in accordance with the procedure described in section 4723.091 of the Revised Code.

(G) During the course of an investigation conducted under this section, the board may compel any registered nurse, licensed practical nurse, or dialysis technician or applicant under this chapter to submit to a mental or physical examination, or both, as required by the board and at the expense of the individual, if the board finds reason to believe that the individual under investigation may have a physical or mental impairment that may affect the individual's ability to provide safe nursing care. Failure of any individual to submit to a mental or physical examination when directed constitutes an admission of the allegations, unless the failure is due to circumstances beyond the individual's control, and a default and final order may be entered without the taking of testimony or presentation of evidence.

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



For purposes of this division, any registered nurse, 3262  
licensed practical nurse, or dialysis technician or applicant 3263  
under this chapter shall be deemed to have given consent to 3264  
submit to a mental or physical examination when directed to do 3265  
so in writing by the board, and to have waived all objections to 3266  
the admissibility of testimony or examination reports that 3267  
constitute a privileged communication. 3268

(H) The board shall investigate evidence that appears to 3269  
show that any person has violated any provision of this chapter 3270  
or any rule of the board. Any person may report to the board any 3271  
information the person may have that appears to show a violation 3272  
of any provision of this chapter or rule of the board. In the 3273  
absence of bad faith, any person who reports such information or 3274  
who testifies before the board in any adjudication conducted 3275  
under Chapter 119. of the Revised Code shall not be liable for 3276  
civil damages as a result of the report or testimony. 3277

(I) All of the following apply under this chapter with 3278  
respect to the confidentiality of information: 3279

(1) Information received by the board pursuant to a 3280  
complaint or an investigation is confidential and not subject to 3281  
discovery in any civil action, except that the board may 3282  
disclose information to law enforcement officers and government 3283  
entities for purposes of an investigation of either a licensed 3284  
health care professional, including a registered nurse, licensed 3285  
practical nurse, or dialysis technician, or a person who may 3286  
have engaged in the unauthorized practice of nursing or dialysis 3287  
care. No law enforcement officer or government entity with 3288  
knowledge of any information disclosed by the board pursuant to 3289  
this division shall divulge the information to any other person 3290  
or government entity except for the purpose of a government 3291

investigation, a prosecution, or an adjudication by a court or 3292  
government entity. 3293

(2) If an investigation requires a review of patient 3294  
records, the investigation and proceeding shall be conducted in 3295  
such a manner as to protect patient confidentiality. 3296

(3) All adjudications and investigations of the board 3297  
shall be considered civil actions for the purposes of section 3298  
2305.252 of the Revised Code. 3299

(4) Any board activity that involves continued monitoring 3300  
of an individual as part of or following any disciplinary action 3301  
taken under this section shall be conducted in a manner that 3302  
maintains the individual's confidentiality. Information received 3303  
or maintained by the board with respect to the board's 3304  
monitoring activities is not subject to discovery in any civil 3305  
action and is confidential, except that the board may disclose 3306  
information to law enforcement officers and government entities 3307  
for purposes of an investigation of a licensee or certificate 3308  
holder. 3309

(J) Any action taken by the board under this section 3310  
resulting in a suspension from practice shall be accompanied by 3311  
a written statement of the conditions under which the person may 3312  
be reinstated to practice. 3313

(K) When the board refuses to grant a license or 3314  
certificate to an applicant, revokes a license or certificate, 3315  
or refuses to reinstate a license or certificate, the board may 3316  
specify that its action is permanent. An individual subject to 3317  
permanent action taken by the board is forever ineligible to 3318  
hold a license or certificate of the type that was refused or 3319  
revoked and the board shall not accept from the individual an 3320

application for reinstatement of the license or certificate or 3321  
for a new license or certificate. 3322

(L) No unilateral surrender of a nursing license, 3323  
certificate of authority, or dialysis technician certificate 3324  
issued under this chapter shall be effective unless accepted by 3325  
majority vote of the board. No application for a nursing 3326  
license, certificate of authority, or dialysis technician 3327  
certificate issued under this chapter may be withdrawn without a 3328  
majority vote of the board. The board's jurisdiction to take 3329  
disciplinary action under this section is not removed or limited 3330  
when an individual has a license or certificate classified as 3331  
inactive or fails to renew a license or certificate. 3332

(M) Sanctions shall not be imposed under division (B) (24) 3333  
of this section against any licensee who waives deductibles and 3334  
copayments as follows: 3335

(1) In compliance with the health benefit plan that 3336  
expressly allows such a practice. Waiver of the deductibles or 3337  
copayments shall be made only with the full knowledge and 3338  
consent of the plan purchaser, payer, and third-party 3339  
administrator. Documentation of the consent shall be made 3340  
available to the board upon request. 3341

(2) For professional services rendered to any other person 3342  
licensed pursuant to this chapter to the extent allowed by this 3343  
chapter and the rules of the board. 3344

**Sec. 4723.32.** This chapter does not prohibit any of the 3345  
following: 3346

(A) The practice of nursing by a student currently 3347  
enrolled in and actively pursuing completion of a prelicensure 3348  
nursing education program, if all of the following are the case: 3349

(1) The student is participating in a program located in 3350  
this state and approved by the board of nursing or participating 3351  
in this state in a component of a program located in another 3352  
jurisdiction and approved by a board that is a member of the 3353  
national council of state boards of nursing; 3354

(2) The student's practice is under the auspices of the 3355  
program; 3356

(3) The student acts under the supervision of a registered 3357  
nurse serving for the program as a faculty member or teaching 3358  
assistant. 3359

(B) The rendering of medical assistance to a licensed 3360  
physician, licensed dentist, or licensed podiatrist by a person 3361  
under the direction, supervision, and control of such licensed 3362  
physician, dentist, or podiatrist; 3363

(C) The activities of persons employed as nursing aides, 3364  
attendants, orderlies, or other auxiliary workers in patient 3365  
homes, nurseries, nursing homes, hospitals, home health 3366  
agencies, or other similar institutions; 3367

(D) The provision of nursing services to family members or 3368  
in emergency situations; 3369

(E) The care of the sick when done in connection with the 3370  
practice of religious tenets of any church and by or for its 3371  
members; 3372

(F) The practice of nursing as ~~a certified registered~~ 3373  
~~nurse anesthetist, clinical nurse specialist, certified nurse~~ 3374  
~~midwife, or certified nurse practitioner~~ an advanced practice 3375  
registered nurse by a student currently enrolled in and actively 3376  
pursuing completion of a program of study leading to initial 3377  
authorization by the board of nursing to practice nursing as an 3378

advanced practice registered nurse in the a designated 3379  
specialty, if all of the following are the case: 3380

(1) The program qualifies the student to sit for the 3381  
examination of a national certifying organization approved by 3382  
the board under section 4723.46 of the Revised Code or the 3383  
program prepares the student to receive a master's or doctoral 3384  
degree in accordance with division (A) (2) of section 4723.41 of 3385  
the Revised Code; 3386

(2) The student's practice is under the auspices of the 3387  
program; 3388

(3) The student acts under the supervision of an advanced 3389  
practice registered nurse serving for the program as a faculty 3390  
member, teaching assistant, or preceptor. 3391

(G) The activities of an individual who currently holds a 3392  
license to practice nursing in or equivalent authorization from 3393  
another jurisdiction, if the individual's license authority to 3394  
practice has not been revoked, the individual is not currently 3395  
under suspension or on probation, the individual does not 3396  
represent the individual as being licensed under this chapter, 3397  
and one of the following is the case: 3398

(1) The individual is engaging in the practice of nursing 3399  
by discharging official duties while employed by or under 3400  
contract with the United States government or any agency 3401  
thereof; 3402

(2) The individual is engaging in the practice of nursing 3403  
as an employee of an individual, agency, or corporation located 3404  
in the other jurisdiction in a position with employment 3405  
responsibilities that include transporting patients into, out 3406  
of, or through this state, as long as each trip in this state 3407

does not exceed seventy-two hours; 3408

(3) The individual is consulting with an individual 3409  
licensed in this state to practice any health-related 3410  
profession; 3411

(4) The individual is engaging in activities associated 3412  
with teaching in this state as a guest lecturer at or for a 3413  
nursing education program, continuing nursing education program, 3414  
or in-service presentation; 3415

(5) The individual is conducting evaluations of nursing 3416  
care that are undertaken on behalf of an accrediting 3417  
organization, including the national league for nursing 3418  
accrediting committee, the joint commission on accreditation of 3419  
healthcare organizations, or any other nationally recognized 3420  
accrediting organization; 3421

(6) The individual is providing nursing care to an 3422  
individual who is in this state on a temporary basis, not to 3423  
exceed six months in any one calendar year, if the nurse is 3424  
directly employed by or under contract with the individual or a 3425  
guardian or other person acting on the individual's behalf; 3426

(7) The individual is providing nursing care during any 3427  
disaster, natural or otherwise, that has been officially 3428  
declared to be a disaster by a public announcement issued by an 3429  
appropriate federal, state, county, or municipal official. 3430

(H) The administration of medication by an individual who 3431  
holds a valid medication aide certificate issued under this 3432  
chapter, if the medication is administered to a resident of a 3433  
nursing home or residential care facility authorized by section 3434  
4723.64 of the Revised Code to use a certified medication aide 3435  
and the medication is administered in accordance with section 3436

4723.67 of the Revised Code. 3437

**Sec. 4723.341.** (A) As used in this section, "person" has 3438  
the same meaning as in section 1.59 of the Revised Code and also 3439  
includes the board of nursing and its members and employees; 3440  
health care facilities, associations, and societies; insurers; 3441  
and individuals. 3442

(B) In the absence of fraud or bad faith, no person 3443  
reporting to the board of nursing or testifying in an 3444  
adjudication conducted under Chapter 119. of the Revised Code 3445  
with regard to alleged incidents of negligence or malpractice or 3446  
matters subject to this chapter or sections 3123.41 to 3123.50 3447  
of the Revised Code and any applicable rules adopted under 3448  
section 3123.63 of the Revised Code shall be subject to either 3449  
of the following based on making the report or testifying: 3450

(1) Liability in damages in a civil action for injury, 3451  
death, or loss to person or property; 3452

(2) Discipline or dismissal by an employer. 3453

(C) An individual who is disciplined or dismissed in 3454  
violation of division (B) (2) of this section has the same rights 3455  
and duties accorded an employee under sections 4113.52 and 3456  
4113.53 of the Revised Code. 3457

(D) In the absence of fraud or bad faith, no professional 3458  
association of registered nurses, advanced practice registered 3459  
nurses, licensed practical nurses, dialysis technicians, 3460  
community health workers, or medication aides that sponsors a 3461  
committee or program to provide peer assistance to individuals 3462  
with substance abuse problems, no representative or agent of 3463  
such a committee or program, and no member of the board of 3464  
nursing shall be liable to any person for damages in a civil 3465

action by reason of actions taken to refer a nurse, dialysis technician, community health worker, or medication aide to a treatment provider or actions or omissions of the provider in treating a nurse, dialysis technician, community health worker, or medication aide.

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

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

(1) Be a registered nurse;

(2) Submit documentation satisfactory to the board that the applicant has earned a graduate degree with a major in a nursing specialty or in a related field that qualifies the applicant to sit for the certification examination of a national certifying organization approved by the board under section 4723.46 of the Revised Code;

(3) Submit documentation satisfactory to the board of having passed the certification examination of a national certifying organization approved by the board under section



4723.46 of the Revised Code to examine and certify, as 3495  
applicable, nurse-midwives, registered nurse anesthetists, 3496  
clinical nurse specialists, or nurse practitioners; 3497

(4) Submit an affidavit with the application that states 3498  
all of the following: 3499

(a) That the applicant is the person named in the 3500  
documents submitted under divisions (A) (2) and (3) of this 3501  
section and is the lawful possessor thereof; 3502

(b) The applicant's age, residence, the school at which 3503  
the applicant obtained education in the applicant's nursing 3504  
specialty, and any other facts that the board requires; 3505

(c) The specialty in which the applicant seeks 3506  
designation; 3507

(d) If the applicant is already engaged in the practice of 3508  
nursing as a certified registered nurse anesthetist, clinical 3509  
nurse specialist, certified nurse-midwife, or certified nurse 3510  
practitioner, the period during which and the place where the 3511  
applicant is engaged; 3512

~~(d)~~ (e) If the applicant is already engaged in the 3513  
practice of nursing as a clinical nurse specialist, certified 3514  
nurse-midwife, or certified nurse practitioner, the names and 3515  
business addresses of the applicant's current collaborating 3516  
physicians and podiatrists. 3517

(B) (1) A certified registered nurse anesthetist, clinical 3518  
nurse specialist, certified nurse-midwife, or certified nurse 3519  
practitioner who is practicing as such in another jurisdiction 3520  
may apply for a ~~certificate of authority~~ license by endorsement 3521  
to practice nursing as an advanced practice registered nurse and 3522  
designation as a certified registered nurse anesthetist, 3523

clinical nurse specialist, certified nurse-midwife, or certified 3524  
nurse practitioner in this state if the nurse meets the 3525  
requirements ~~for a certificate of authority~~ set forth in 3526  
division (A) of this section or division (B) (2) of this section. 3527

(2) If an applicant practicing in another jurisdiction 3528  
applies for ~~a certificate of authority designation~~ under 3529  
division (B) (2) of this section, the application shall be 3530  
submitted to the board in the form prescribed by rules of the 3531  
board and be accompanied by the application fee required by 3532  
section 4723.08 of the Revised Code. The application shall 3533  
include evidence that the applicant meets the requirements of 3534  
division (B) (2) of this section, holds ~~a license or certificate~~ 3535  
~~authority~~ to practice nursing ~~as a certified registered nurse~~ 3536  
~~anesthetist, clinical nurse specialist, certified nurse midwife,~~ 3537  
~~or certified nurse practitioner~~ and is in good standing in 3538  
another jurisdiction granted after meeting requirements approved 3539  
by the entity of that jurisdiction that ~~licenses~~ regulates 3540  
nurses, and other information required by rules of the board of 3541  
nursing. 3542

With respect to the educational requirements and national 3543  
certification requirements that an applicant under division (B) 3544  
(2) of this section must meet, both of the following apply: 3545

(a) If the applicant is a certified registered nurse 3546  
anesthetist, certified nurse-midwife, or certified nurse 3547  
practitioner who, on or before December 31, 2000, obtained 3548  
certification in the applicant's nursing specialty with a 3549  
national certifying organization listed in division (A) (3) of 3550  
section 4723.41 of the Revised Code as that division existed 3551  
prior to ~~the effective date of this amendment~~ March 20, 2013, or 3552  
that was at that time approved by the board under section 3553

4723.46 of the Revised Code, the applicant must have maintained 3554  
the certification. The applicant is not required to have earned 3555  
a graduate degree with a major in a nursing specialty or in a 3556  
related field that qualifies the applicant to sit for the 3557  
certification examination. 3558

(b) If the applicant is a clinical nurse specialist, one 3559  
of the following must apply to the applicant: 3560

(i) On or before December 31, 2000, the applicant obtained 3561  
a graduate degree with a major in a clinical area of nursing 3562  
from an educational institution accredited by a national or 3563  
regional accrediting organization. The applicant is not required 3564  
to have passed a certification examination. 3565

(ii) On or before December 31, 2000, the applicant 3566  
obtained a graduate degree in nursing or a related field and was 3567  
certified as a clinical nurse specialist by the American nurses 3568  
credentialing center or another national certifying organization 3569  
that was at that time approved by the board under section 3570  
4723.46 of the Revised Code. 3571

(3) The board may grant a nonrenewable temporary permit to 3572  
practice nursing as an advanced practice registered nurse to an 3573  
applicant for licensure by endorsement if the board is satisfied 3574  
by the evidence that the applicant holds a valid, unrestricted 3575  
license in or equivalent authorization from another 3576  
jurisdiction. The temporary permit shall expire at the earlier 3577  
of one hundred eighty days after issuance or upon the issuance 3578  
of a license by endorsement. 3579

**Sec. 4723.42.** (A) If the applicant for ~~authorization a 3580~~  
~~license to practice nursing as a certified registered nurse- 3581~~  
~~anesthetist, clinical nurse specialist, certified nurse midwife, 3582~~

~~or certified nurse practitioner~~ an advanced practice registered 3583  
nurse has met all the requirements of section 4723.41 of the 3584  
Revised Code and has paid the fee required by section 4723.08 of 3585  
the Revised Code, the board of nursing shall issue ~~its~~ 3586  
~~certificate of authority to practice nursing~~ the license and 3587  
designate the license holder as a certified registered nurse 3588  
anesthetist, clinical nurse specialist, certified nurse-midwife, 3589  
or certified nurse practitioner, ~~which shall designate the~~ 3590  
~~nursing specialty the nurse is authorized to practice.~~ The 3591  
~~certificate entitles its~~ license and designation authorize the 3592  
holder to practice ~~nursing in the specialty designated on the~~ 3593  
~~certificate~~ as an advanced practice registered nurse in the 3594  
specialty indicated by the designation. 3595

The board shall issue or deny ~~its certificate~~ the license 3596  
not later than ~~sixty~~ thirty days after receiving all of the 3597  
documents required by section 4723.41 of the Revised Code. 3598

If an applicant is under investigation for a violation of 3599  
this chapter, the board shall conclude the investigation not 3600  
later than ninety days after receipt of all required documents, 3601  
unless this ninety-day period is extended by written consent of 3602  
the applicant, or unless the board determines that a substantial 3603  
question of such a violation exists and the board has notified 3604  
the applicant in writing of the reasons for the continuation of 3605  
the investigation. If the board determines that the applicant 3606  
has not violated this chapter, it shall issue a certificate not 3607  
later than forty-five days after making that determination. 3608

(B) A ~~certificate of authority~~ license to practice nursing 3609  
as a ~~certified registered nurse anesthetist, clinical nurse~~ 3610  
~~specialist, certified nurse midwife, or certified nurse~~ 3611  
~~practitioner~~ an advanced practice registered nurse is subject to 3612

the ~~same schedule for renewal~~ schedule that applies under 3613  
section 4723.24 of the Revised Code ~~with respect to a license to~~ 3614  
~~practice nursing as a registered nurse~~. In providing renewal 3615  
applications ~~to certificate holders~~, the board shall follow the 3616  
procedures that apply under section 4723.24 of the Revised Code 3617  
for providing renewal applications to license holders. Failure 3618  
of the ~~certificate~~ license holder to receive an application for 3619  
renewal from the board does not excuse the holder from the 3620  
requirements of section 4723.44 of the Revised Code. 3621

A ~~certificate~~ license holder seeking renewal of the 3622  
~~certificate~~ license shall complete the renewal application and 3623  
submit it to the board with all of the following: 3624

(1) The renewal fee established under section 4723.08 of 3625  
the Revised Code and, if the application is submitted after it 3626  
is due but before the ~~certificate~~ license lapses, the fee 3627  
established under that section for processing a late application 3628  
for renewal; 3629

(2) Documentation satisfactory to the board that the 3630  
holder has maintained certification in the nursing specialty 3631  
with a national certifying organization approved by the board 3632  
under section 4723.46 of the Revised Code; 3633

(3) A list of the names and business addresses of the 3634  
holder's current collaborating physicians and podiatrists, if 3635  
the holder is a clinical nurse specialist, certified nurse- 3636  
midwife, or certified nurse practitioner; 3637

(4) If the ~~holder's certificate was issued under division~~ 3638  
~~(C) of section 4723.41 of the Revised Code, as that division~~ 3639  
~~existed at any time before March 20, 2013~~ license holder is a 3640  
clinical nurse specialist, documentation satisfactory to the 3641

board that the holder has completed continuing education for a ~~clinical nurse specialist~~ that specialty as required by rule of the board.

On receipt of the renewal application, fees, and documents, the board shall verify that the applicant holds a current, valid license to practice nursing as a registered nurse in this state and a current, valid license to practice nursing as an advanced practice registered nurse in this state, and, if it so verifies, shall renew the ~~certificate~~ license to practice nursing as an advanced practice registered nurse.

(C) An applicant for reinstatement of a ~~certificate~~ license that has lapsed shall submit the reinstatement fee, renewal fee, and fee for processing a late application for renewal established under section 4723.08 of the Revised Code.

(D) An individual who holds an active ~~certificate~~ license and does not intend to practice in this state as an advanced practice registered nurse may send to the board written notice to that effect on or before the date the ~~certificate~~ license lapses, and the board shall classify the ~~certificate~~ license as inactive.

**Sec. 4723.43.** A certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner may provide to individuals and groups nursing care that requires knowledge and skill obtained from advanced formal education and clinical experience. In this capacity as an advanced practice registered nurse, a certified nurse-midwife is subject to division (A) of this section, a certified registered nurse anesthetist is subject to division (B) of this section, a certified nurse practitioner is subject to division (C) of this section, and a clinical nurse specialist is subject to division

(D) of this section. 3672

(A) A nurse authorized to practice as a certified nurse- 3673  
midwife, in collaboration with one or more physicians, may 3674  
provide the management of preventive services and those primary 3675  
care services necessary to provide health care to women 3676  
anteperatally, intraperatally, postperatally, and gynecologically, 3677  
consistent with the nurse's education and certification, and in 3678  
accordance with rules adopted by the board of nursing. 3679

No certified nurse-midwife may perform version, deliver 3680  
breech or face presentation, use forceps, do any obstetric 3681  
operation, or treat any other abnormal condition, except in 3682  
emergencies. Division (A) of this section does not prohibit a 3683  
certified nurse-midwife from performing episiotomies or normal 3684  
vaginal deliveries, or repairing vaginal tears. A certified 3685  
nurse-midwife ~~who holds a certificate to prescribe issued under~~ 3686  
~~section 4723.48 of the Revised Code~~ may, in collaboration with 3687  
one or more physicians, prescribe drugs and therapeutic devices 3688  
in accordance with section 4723.481 of the Revised Code. 3689

(B) A nurse authorized to practice as a certified 3690  
registered nurse anesthetist, with the supervision and in the 3691  
immediate presence of a physician, podiatrist, or dentist, may 3692  
administer anesthesia and perform anesthesia induction, 3693  
maintenance, and emergence, and may perform with supervision 3694  
preanesthetic preparation and evaluation, postanesthesia care, 3695  
and clinical support functions, consistent with the nurse's 3696  
education and certification, and in accordance with rules 3697  
adopted by the board. ~~A certified registered nurse anesthetist~~ 3698  
~~is not required to obtain a certificate to prescribe in order to~~ 3699  
~~provide the anesthesia care described in this division.~~ 3700

The physician, podiatrist, or dentist supervising a 3701

certified registered nurse anesthetist must be actively engaged 3702  
in practice in this state. When a certified registered nurse 3703  
anesthetist is supervised by a podiatrist, the nurse's scope of 3704  
practice is limited to the anesthesia procedures that the 3705  
podiatrist has the authority under section 4731.51 of the 3706  
Revised Code to perform. A certified registered nurse 3707  
anesthetist may not administer general anesthesia under the 3708  
supervision of a podiatrist in a podiatrist's office. When a 3709  
certified registered nurse anesthetist is supervised by a 3710  
dentist, the nurse's scope of practice is limited to the 3711  
anesthesia procedures that the dentist has the authority under 3712  
Chapter 4715. of the Revised Code to perform. 3713

(C) A nurse authorized to practice as a certified nurse 3714  
practitioner, in collaboration with one or more physicians or 3715  
podiatrists, may provide preventive and primary care services, 3716  
provide services for acute illnesses, and evaluate and promote 3717  
patient wellness within the nurse's nursing specialty, 3718  
consistent with the nurse's education and certification, and in 3719  
accordance with rules adopted by the board. A certified nurse 3720  
practitioner ~~who holds a certificate to prescribe issued under~~ 3721  
~~section 4723.48 of the Revised Code~~ may, in collaboration with 3722  
one or more physicians or podiatrists, prescribe drugs and 3723  
therapeutic devices in accordance with section 4723.481 of the 3724  
Revised Code. 3725

When a certified nurse practitioner is collaborating with 3726  
a podiatrist, the nurse's scope of practice is limited to the 3727  
procedures that the podiatrist has the authority under section 3728  
4731.51 of the Revised Code to perform. 3729

(D) A nurse authorized to practice as a clinical nurse 3730  
specialist, in collaboration with one or more physicians or 3731



podiatrists, may provide and manage the care of individuals and 3732  
groups with complex health problems and provide health care 3733  
services that promote, improve, and manage health care within 3734  
the nurse's nursing specialty, consistent with the nurse's 3735  
education and in accordance with rules adopted by the board. A 3736  
clinical nurse specialist ~~who holds a certificate to prescribe~~ 3737  
~~issued under section 4723.48 of the Revised Code~~ may, in 3738  
collaboration with one or more physicians or podiatrists, 3739  
prescribe drugs and therapeutic devices in accordance with 3740  
section 4723.481 of the Revised Code. 3741

When a clinical nurse specialist is collaborating with a 3742  
podiatrist, the nurse's scope of practice is limited to the 3743  
procedures that the podiatrist has the authority under section 3744  
4731.51 of the Revised Code to perform. 3745

**Sec. 4723.431.** (A) Except as provided in division (D) (1) 3746  
of this section, an advanced practice registered nurse who is 3747  
designated as a clinical nurse specialist, certified nurse- 3748  
midwife, or certified nurse practitioner may practice only in 3749  
accordance with a standard care arrangement entered into with 3750  
each physician or podiatrist with whom the nurse collaborates. A 3751  
copy of the standard care arrangement shall be retained on file 3752  
~~at each site where the nurse practices~~ by the staff office of 3753  
the medical system the nurse is working with or nurse's practice 3754  
administrator. Prior approval of the standard care arrangement 3755  
by the board of nursing is not required, but the board may 3756  
periodically review it for compliance with this section. 3757

A clinical nurse specialist, certified nurse-midwife, or 3758  
certified nurse practitioner may enter into a standard care 3759  
arrangement with one or more collaborating physicians or 3760  
podiatrists. Not later than thirty days after first engaging in 3761

the practice of nursing as a clinical nurse specialist, 3762  
certified nurse-midwife, or certified nurse practitioner, the 3763  
nurse shall submit to the board the name and business address of 3764  
each collaborating physician or podiatrist. Thereafter, the 3765  
nurse shall ~~give to~~ notify the board ~~written notice~~ of any 3766  
additions or deletions to the nurse's collaborating physicians 3767  
or podiatrists. Except as provided in division (E) of this 3768  
section, the notice must be provided not later than thirty days 3769  
after the change takes effect. 3770

Each collaborating physician or podiatrist must be 3771  
~~actively engaged in direct clinical~~ authorized to practice in 3772  
this state and ~~practicing~~, except as provided in division (D) 3773  
(3) of this section, practice in a specialty that is the same as 3774  
or similar to the nurse's nursing specialty. If a collaborating 3775  
physician or podiatrist enters into standard care arrangements 3776  
with more than ~~three~~ five ~~nurses who hold certificates to~~ 3777  
~~prescribe issued under section 4723.48 of the Revised Code~~, the 3778  
physician or podiatrist shall not collaborate at the same time 3779  
with more than ~~three of the~~ five nurses in the prescribing 3780  
component of their practices. 3781

(B) A standard care arrangement shall be in writing and, 3782  
except as provided in division (D) (2) of this section, shall 3783  
contain all of the following: 3784

(1) Criteria for referral of a patient by the clinical 3785  
nurse specialist, certified nurse-midwife, or certified nurse 3786  
practitioner to a collaborating physician or podiatrist; 3787

(2) A process for the clinical nurse specialist, certified 3788  
nurse-midwife, or certified nurse practitioner to obtain a 3789  
consultation with a collaborating physician or podiatrist; 3790

(3) A plan for coverage in instances of emergency or 3791  
planned absences of either the clinical nurse specialist, 3792  
certified nurse-midwife, or certified nurse practitioner or a 3793  
collaborating physician or podiatrist that provides the means 3794  
whereby a physician or podiatrist is available for emergency 3795  
care; 3796

(4) The process for resolution of disagreements regarding 3797  
matters of patient management between the clinical nurse 3798  
specialist, certified nurse-midwife, or certified nurse 3799  
practitioner and a collaborating physician or podiatrist; 3800

(5) A procedure for a regular review of the referrals by 3801  
the clinical nurse specialist, certified nurse-midwife, or 3802  
certified nurse practitioner to other health care professionals 3803  
and the care outcomes for a random sample of all patients seen 3804  
by the nurse; 3805

(6) If the clinical nurse specialist or certified nurse 3806  
practitioner regularly provides services to infants, a policy 3807  
for care of infants up to age one and recommendations for 3808  
collaborating physician visits for children from birth to age 3809  
three; 3810

(7) Any other criteria required by rule of the board 3811  
adopted pursuant to section 4723.07 or 4723.50 of the Revised 3812  
Code. 3813

(C) (1) A standard care arrangement entered into pursuant 3814  
to this section may permit a clinical nurse specialist, 3815  
certified nurse-midwife, or certified nurse practitioner to 3816  
supervise services provided by a home health agency as defined 3817  
in section 3701.881 of the Revised Code. 3818

(2) A standard care arrangement entered into pursuant to 3819

this section may permit a clinical nurse specialist, certified 3820  
nurse-midwife, or certified nurse practitioner to admit a 3821  
patient to a hospital in accordance with section 3727.06 of the 3822  
Revised Code. 3823

(D) (1) ~~A-Except as provided in division (D) (2) of this~~ 3824  
~~section, a clinical nurse specialist who does not hold a~~ 3825  
~~certificate to prescribe and whose nursing specialty is mental~~ 3826  
health or psychiatric mental health, as determined by the board, 3827  
is not required to enter into a standard care arrangement, but 3828  
shall practice in collaboration with one or more physicians. 3829

(2) If a clinical nurse specialist practicing in either of 3830  
the specialties specified in division (D) (1) of this 3831  
section ~~holds a certificate to prescribe~~ prescribes or personally 3832  
furnishes drugs or therapeutic devices, the nurse shall enter 3833  
into a standard care arrangement with one or more physicians. 3834  
The standard care arrangement must meet the requirements of 3835  
division (B) of this section, but only to the extent necessary 3836  
to address the prescribing component of the nurse's practice. 3837

(3) A collaborating physician described in division (D) (1) 3838  
of this section must be one who practices in one of the 3839  
following specialties: 3840

(a) A specialty that is the same as or similar to the 3841  
nurse's nursing specialty; 3842

(b) Pediatrics; 3843

(c) Primary care or family practice. 3844

(E) If a physician or podiatrist terminates the 3845  
collaboration between the physician or podiatrist and a 3846  
certified nurse-midwife, certified nurse practitioner, or 3847  
clinical nurse specialist, other than a nurse described in 3848

division (D) of this section, before their standard care 3849  
arrangement expires, both of the following apply: 3850

(1) The nurse must immediately notify the board of nursing 3851  
of the termination. 3852

(2) Notwithstanding the requirement of section 4723.43 of 3853  
the Revised Code that the nurse practice in collaboration with a 3854  
physician or podiatrist, the nurse may continue to practice 3855  
under the existing standard care arrangement without a 3856  
collaborating physician or podiatrist for not more than one 3857  
hundred twenty days after notifying the board. 3858

~~(E)~~ (F) Nothing in this section prohibits a hospital from 3859  
hiring a clinical nurse specialist, certified nurse-midwife, or 3860  
certified nurse practitioner as an employee and negotiating 3861  
standard care arrangements on behalf of the employee as 3862  
necessary to meet the requirements of this section. A standard 3863  
care arrangement between the hospital's employee and the 3864  
employee's collaborating physician is subject to approval by the 3865  
medical staff and governing body of the hospital prior to 3866  
implementation of the arrangement at the hospital. 3867

**Sec. 4723.432.** (A) ~~A clinical nurse specialist, certified~~ 3868  
~~nurse-midwife, or certified nurse practitioner~~ An advanced 3869  
practice registered nurse who is designated as a clinical nurse 3870  
specialist, certified nurse-midwife, or certified nurse 3871  
practitioner shall cooperate with the state medical board in any 3872  
investigation the board conducts with respect to a physician or 3873  
podiatrist who collaborates with the nurse. The nurse shall 3874  
cooperate with the board in any investigation the board conducts 3875  
with respect to the unauthorized practice of medicine by the 3876  
nurse. 3877

(B) ~~A~~ An advanced practice registered nurse who is 3878  
designated as a certified registered nurse anesthetist shall 3879  
cooperate with the state medical board or state dental board in 3880  
any investigation either board conducts with respect to a 3881  
physician, podiatrist, or dentist who permits the nurse to 3882  
practice with the supervision of that physician, podiatrist, or 3883  
dentist. The nurse shall cooperate with either board in any 3884  
investigation it conducts with respect to the unauthorized 3885  
practice of medicine or dentistry by the nurse. 3886

**Sec. 4723.44.** (A) No person shall knowingly do any of the 3887  
following unless the person holds a current, valid ~~certificate~~ 3888  
~~of authority to practice nursing as a certified registered nurse~~ 3889  
~~anesthetist, clinical nurse specialist, certified nurse midwife,~~ 3890  
~~or certified nurse practitioner~~ license issued by the board of 3891  
nursing under this chapter to practice nursing as an advanced 3892  
practice registered nurse in the specialty indicated by the 3893  
designation: 3894

(1) Engage in the practice of nursing as ~~a certified~~ 3895  
~~registered nurse anesthetist, clinical nurse specialist,~~ 3896  
~~certified nurse midwife, or certified nurse practitioner~~ an 3897  
advanced practice registered nurse for a fee, salary, or other 3898  
consideration, or as a volunteer; 3899

(2) Represent the person as being an advanced practice 3900  
registered nurse, including representing the person as being a 3901  
certified registered nurse anesthetist, clinical nurse 3902  
specialist, certified nurse-midwife, or certified nurse 3903  
practitioner; 3904

(3) Use any title or initials implying that the person is 3905  
an advanced practice registered nurse, including using any title 3906  
or initials implying the person is a certified registered nurse 3907

anesthetist, clinical nurse specialist, certified nurse-midwife, 3908  
or certified nurse practitioner; 3909

~~(4) Represent the person as being an advanced practice-~~ 3910  
~~registered nurse;~~ 3911

~~(5) Use any title or initials implying that the person is-~~ 3912  
~~an advanced practice registered nurse.~~ 3913

~~(B) No person who is not certified by the national council-~~ 3914  
~~on certification of nurse anesthetists of the American-~~ 3915  
~~association of nurse anesthetists, the national council on-~~ 3916  
~~recertification of nurse anesthetists of the American-~~ 3917  
~~association of nurse anesthetists, or another national-~~ 3918  
~~certifying organization approved by the board under section-~~ 3919  
~~4723.46 of the Revised Code shall use the title "certified-~~ 3920  
~~registered nurse anesthetist" or the initials "C.R.N.A.," or any-~~ 3921  
~~other title or initial implying that the person has been-~~ 3922  
~~certified by the council or organization.~~ 3923

~~(C) No certified registered nurse anesthetist, clinical-~~ 3924  
~~nurse specialist, certified nurse midwife, or certified nurse-~~ 3925  
~~practitioner advanced practice registered nurse shall knowingly~~ 3926  
~~do any of the following:~~ 3927

(1) Engage, for a fee, salary, or other consideration, or 3928  
as a volunteer, in the practice of a nursing specialty other 3929  
than the specialty designated on the nurse's current, valid 3930  
~~certificate of authority license~~ issued by the board under this 3931  
chapter to practice nursing as an advanced practice registered 3932  
nurse; 3933

(2) Represent the person as being authorized to practice 3934  
any nursing specialty other than the specialty designated on the 3935  
current, valid ~~certificate of authority license to practice~~ 3936

nursing as an advanced practice registered nurse; 3937

(3) Use the title "certified registered nurse anesthetist" 3938  
or the initials "N.A." or "C.R.N.A.," the title "clinical nurse 3939  
specialist" or the initials "C.N.S.," the title "certified 3940  
nurse-midwife" or the initials "C.N.M.," the title "certified 3941  
nurse practitioner" or the initials "C.N.P.," the title 3942  
"advanced practice registered nurse" or the initials "A.P.R.N.," 3943  
or any other title or initials implying that the nurse is 3944  
authorized to practice any nursing specialty other than the 3945  
specialty designated on the nurse's current, valid ~~certificate~~ 3946  
~~of authority~~ license to practice nursing as an advanced practice 3947  
registered nurse; 3948

(4) Enter into a standard care arrangement with a 3949  
physician or podiatrist whose practice is not the same as or 3950  
similar to the nurse's nursing specialty; 3951

~~(5) Prescribe drugs or therapeutic devices unless the~~ 3952  
~~nurse holds a current, valid certificate to prescribe issued~~ 3953  
~~under section 4723.48 of the Revised Code;~~ 3954

~~(6) Prescribe drugs or therapeutic devices under a~~ 3955  
~~certificate to prescribe in a manner that does not comply with~~ 3956  
section 4723.481 of the Revised Code; 3957

~~(7)~~ (6) Prescribe any drug or device to perform or induce 3958  
an abortion, or otherwise perform or induce an abortion. 3959

~~(D)~~ (C) No person shall knowingly employ a person to 3960  
engage in the practice of nursing as a ~~certified registered~~ 3961  
~~nurse anesthetist, clinical nurse specialist, certified nurse~~ 3962  
~~midwife, or certified nurse practitioner~~ an advanced practice 3963  
registered nurse unless the person so employed holds a current, 3964  
valid ~~certificate of authority to engage in that nursing~~ 3965



~~specialty license and designation~~ issued by the board under this 3966  
chapter to practice as an advanced practice registered nurse in 3967  
the specialty indicated by the designation. 3968

~~(E)~~ ~~(D)~~ A ~~certificate document~~ certified by the executive 3969  
director of the board, under the official seal of the board, to 3970  
the effect that it appears from the records of the board that no 3971  
~~certificate of authority license~~ to practice nursing as a 3972  
~~certified registered nurse anesthetist, clinical nurse~~ 3973  
~~specialist, certified nurse midwife, or certified nurse~~ 3974  
~~practitioner~~ an advanced practice registered nurse has been 3975  
issued to ~~any~~ the person specified therein in the document, or 3976  
that a ~~certificate~~ license to practice nursing as an advanced 3977  
practice registered nurse, if issued, has been revoked or 3978  
suspended, shall be received as prima-facie evidence of the 3979  
record of the board in any court or before any officer of the 3980  
state. 3981

**Sec. 4723.46.** (A) The board of nursing shall establish a 3982  
list of national certifying organizations approved by the board 3983  
to examine and certify advanced practice registered nurses to 3984  
practice nursing specialties. To be approved by the board, a 3985  
national certifying organization must meet all of the following 3986  
requirements: 3987

(1) Be national in the scope of its credentialing; 3988

(2) Have an educational requirement beyond that required 3989  
for registered nurse licensure; 3990

(3) Have practice requirements beyond those required for 3991  
registered nurse licensure; 3992

(4) Have testing requirements beyond those required for 3993  
registered nurse licensure that measure the theoretical and 3994

clinical content of a nursing specialty, are developed in 3995  
accordance with accepted standards of validity and reliability, 3996  
and are open to registered nurses who have successfully 3997  
completed the educational program required by the organization; 3998

(5) Issue certificates to advanced practice registered 3999  
nurses, including certified registered nurse anesthetists, 4000  
clinical nurse specialists, certified nurse-midwives, or 4001  
certified nurse practitioners; 4002

(6) Periodically review the qualifications of advanced 4003  
practice registered nurses, including certified registered nurse 4004  
anesthetists, clinical nurse specialists, certified nurse- 4005  
midwives, or certified nurse practitioners. 4006

(B) Not later than the thirtieth day of January of each 4007  
year, the board shall publish the list of national certifying 4008  
organizations that have met the requirements of division (A) of 4009  
this section within the previous year and remove from the list 4010  
organizations that no longer meet the requirements. 4011

**Sec. 4723.47.** ~~(A) If a certified registered nurse~~ 4012  
~~anesthetist's, clinical nurse specialist's, certified nurse-~~ 4013  
~~midwife's, or certified nurse practitioner's~~ an advanced 4014  
practice registered nurse's license to practice nursing as a 4015  
registered nurse lapses for failure to renew under section 4016  
4723.24 of the Revised Code, the nurse's ~~certificate of~~ 4017  
~~authority~~ license to practice nursing as a ~~certified registered-~~ 4018  
~~nurse anesthetist, clinical nurse specialist, certified nurse-~~ 4019  
~~midwife, or certified nurse practitioner~~ an advanced practice 4020  
registered nurse is lapsed until the license to practice nursing 4021  
as a registered nurse is reinstated. If an advanced practice 4022  
registered nurse's license to practice nursing as a registered 4023  
nurse is classified as inactive under section 4723.24 of the 4024

Revised Code, the nurse's license to practice nursing as an 4025  
advanced practice nurse is automatically classified as inactive 4026  
while the license to practice nursing as a registered nurse 4027  
remains inactive. If ~~the either~~ license held by an advanced 4028  
practice registered nurse is revoked under section 4723.28 or 4029  
4723.281 of the Revised Code, the ~~nurse's certificate of~~ 4030  
~~authority other license~~ is automatically revoked. If ~~the either~~ 4031  
license is suspended under ~~either section 4723.28 or 4728.281 of~~ 4032  
~~the Revised Code, the nurse's certificate of authority other~~ 4033  
~~license~~ is automatically suspended while the ~~license remains~~ 4034  
~~suspended suspension remains in effect. If the license is~~ 4035  
~~classified as inactive under section 4723.24 of the Revised~~ 4036  
~~Code, the nurse's certificate of authority is automatically~~ 4037  
~~classified as inactive while the license remains inactive.~~ 4038

~~(B) If a clinical nurse specialist, certified nurse~~ 4039  
~~midwife, or certified nurse practitioner holds a certificate to~~ 4040  
~~prescribe issued under section 4723.48 of the Revised Code and~~ 4041  
~~the nurse's certificate of authority to practice as a clinical~~ 4042  
~~nurse specialist, certified nurse midwife, or certified nurse~~ 4043  
~~practitioner lapses for failure to renew under section 4723.41~~ 4044  
~~of the Revised Code, the nurse's certificate to prescribe is~~ 4045  
~~lapsed until the certificate of authority is reinstated. If the~~ 4046  
~~certificate of authority becomes inactive in accordance with~~ 4047  
~~section 4723.42 of the Revised Code, the nurse's certificate to~~ 4048  
~~prescribe is lapsed until the certificate of authority becomes~~ 4049  
~~active. If the certificate of authority is revoked under section~~ 4050  
~~4723.28 or 4723.281 of the Revised Code, the nurse's certificate~~ 4051  
~~to prescribe is automatically revoked. If the certificate of~~ 4052  
~~authority is suspended under either section, the nurse's~~ 4053  
~~certificate to prescribe is automatically suspended while the~~ 4054  
~~certificate of authority remains suspended. If a restriction is~~ 4055

~~placed on the certificate of authority under section 4723.28 of  
the Revised Code, the same restriction is placed on the nurse's  
certificate to prescribe while the certificate of authority  
remains restricted.~~ 4056  
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**Sec. 4723.48.** ~~(A) A clinical nurse specialist, certified  
nurse-midwife, or certified nurse practitioner seeking authority  
to prescribe drugs and therapeutic devices shall file with the  
board of nursing a written application for a certificate to  
prescribe. The board of nursing shall issue a certificate to  
prescribe to each applicant who meets the requirements specified  
in section 4723.482 or 4723.485 of the Revised Code.~~ 4060  
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~~Except as provided in division (B) of this section, the  
initial certificate to prescribe that the board issues to an  
applicant shall be issued as an externship certificate. Under an  
externship certificate, the nurse may obtain experience in  
prescribing drugs and therapeutic devices by participating in an  
externship that evaluates the nurse's competence, knowledge, and  
skill in pharmacokinetic principles and their clinical  
application to the specialty being practiced. During the  
externship, the nurse may prescribe drugs and therapeutic  
devices only when one or more physicians are providing  
supervision in accordance with rules adopted under section  
4723.50 of the Revised Code.~~ 4067  
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~~After completing the externship, the holder of an  
externship certificate may apply for a new certificate to  
prescribe. On receipt of the new certificate, the nurse may  
prescribe drugs and therapeutic devices in collaboration with  
one or more physicians or podiatrists.~~ 4079  
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~~(B) In the case of an applicant who meets the requirements  
of division (C) of section 4723.482 of the Revised Code, the~~ 4084  
4085

~~initial certificate to prescribe that the board issues to the~~ 4086  
~~applicant under this section shall not be an externship~~ 4087  
~~certificate. The applicant shall be issued a certificate to~~ 4088  
~~prescribe that permits the recipient to prescribe drugs and~~ 4089  
~~therapeutic devices in collaboration with one or more physicians~~ 4090  
~~or podiatrists.~~ 4091

~~(C) (1) The holder of a certificate issued under this~~ 4092  
~~section~~ (A) A clinical nurse specialist, certified nurse- 4093  
midwife, or certified nurse practitioner who holds a license to 4094  
practice nursing issued under section 4723.42 of the Revised 4095  
Code may delegate to a person not otherwise authorized to 4096  
administer drugs the authority to administer to a specified 4097  
patient a drug, ~~other than~~ unless the drug is a controlled 4098  
substance, or is listed in the formulary established in rules 4099  
adopted under section 4723.50 of the Revised Code. The 4100  
delegation shall be in accordance with division ~~(C) (2)~~ (B) of 4101  
this section and standards and procedures established in rules 4102  
adopted under division ~~(Q)~~ (O) of section 4723.07 of the Revised 4103  
Code. 4104

~~(2) (B) Prior to delegating the authority, the certificate~~ 4105  
~~holder~~ nurse shall do both of the following: 4106

~~(a) (1) Assess the patient and determine that the drug is~~ 4107  
appropriate for the patient; 4108

~~(b) (2) Determine that the person to whom the authority~~ 4109  
will be delegated has met the conditions specified in division 4110  
(D) of section 4723.489 of the Revised Code. 4111

**Sec. 4723.481.** This section establishes standards and 4112  
conditions regarding the authority of an advanced practice 4113  
registered nurse who is designated as a clinical nurse 4114

specialist, certified nurse-midwife, or certified nurse 4115  
practitioner to prescribe and personally furnish drugs and 4116  
therapeutic devices under a ~~certificate to prescribe~~ license 4117  
issued under section ~~4723.48~~ 4723.42 of the Revised Code. 4118

(A) ~~A~~ Except as provided in division (F) of this section, 4119  
a clinical nurse specialist, certified nurse-midwife, or 4120  
certified nurse practitioner shall not prescribe or furnish any 4121  
drug or therapeutic device that is ~~not included in the types of~~ 4122  
~~drugs and devices~~ listed on the exclusionary formulary 4123  
established in rules adopted under section 4723.50 of the 4124  
Revised Code. 4125

(B) The prescriptive authority of a clinical nurse 4126  
specialist, certified nurse-midwife, or certified nurse 4127  
practitioner shall not exceed the prescriptive authority of the 4128  
collaborating physician or podiatrist, including the 4129  
collaborating physician's authority to treat chronic pain with 4130  
controlled substances and products containing tramadol as 4131  
described in section 4731.052 of the Revised Code. 4132

(C) (1) Except as provided in division (C) (2) or (3) of 4133  
this section, a clinical nurse specialist, certified nurse- 4134  
midwife, or certified nurse practitioner may prescribe to a 4135  
patient a schedule II controlled substance only if all of the 4136  
following are the case: 4137

(a) The patient has a terminal condition, as defined in 4138  
section 2133.01 of the Revised Code. 4139

(b) The collaborating physician of the clinical nurse 4140  
specialist, certified nurse-midwife, or certified nurse 4141  
practitioner initially prescribed the substance for the patient. 4142

(c) The prescription is for an amount that does not exceed 4143

the amount necessary for the patient's use in a single, twenty-  
four-hour period. 4144  
4145

(2) The restrictions on prescriptive authority in division 4146  
(C)(1) of this section do not apply if a clinical nurse 4147  
specialist, certified nurse-midwife, or certified nurse 4148  
practitioner issues the prescription to the patient from any of 4149  
the following locations: 4150

(a) A hospital registered under section 3701.07 of the 4151  
Revised Code; 4152

(b) An entity owned or controlled, in whole or in part, by 4153  
a hospital or by an entity that owns or controls, in whole or in 4154  
part, one or more hospitals; 4155

(c) A health care facility operated by the department of 4156  
mental health and addiction services or the department of 4157  
developmental disabilities; 4158

(d) A nursing home licensed under section 3721.02 of the 4159  
Revised Code or by a political subdivision certified under 4160  
section 3721.09 of the Revised Code; 4161

(e) A county home or district home operated under Chapter 4162  
5155. of the Revised Code that is certified under the medicare 4163  
or medicaid program; 4164

(f) A hospice care program, as defined in section 3712.01 4165  
of the Revised Code; 4166

(g) A community mental health services provider, as 4167  
defined in section 5122.01 of the Revised Code; 4168

(h) An ambulatory surgical facility, as defined in section 4169  
3702.30 of the Revised Code; 4170

(i) A freestanding birthing center, as defined in section 3702.141 of the Revised Code;	4171 4172
(j) A federally qualified health center, as defined in section 3701.047 of the Revised Code;	4173 4174
(k) A federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code;	4175 4176
(l) A health care office or facility operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code;	4177 4178 4179 4180
(m) A site where a medical practice is operated, but only if the practice is comprised of one or more physicians who also are owners of the practice; the practice is organized to provide direct patient care; and the clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner providing services at the site has a standard care arrangement and collaborates with at least one of the physician owners who practices primarily at that site;	4181 4182 4183 4184 4185 4186 4187 4188
<u>(n) A residential care facility, as defined in section 3721.01 of the Revised Code.</u>	4189 4190
(3) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner shall not issue to a patient a prescription for a schedule II controlled substance from a convenience care clinic even if the clinic is owned or operated by an entity specified in division (C) (2) of this section.	4191 4192 4193 4194 4195
(D) A pharmacist who acts in good faith reliance on a prescription issued by a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner under division (C) (2) of this section is not liable for or subject to any of	4196 4197 4198 4199



the following for relying on the prescription: damages in any 4200  
civil action, prosecution in any criminal proceeding, or 4201  
professional disciplinary action by the state board of pharmacy 4202  
under Chapter 4729. of the Revised Code. 4203

~~(E) A clinical nurse specialist, certified nurse midwife, 4204  
or certified nurse practitioner may personally furnish to a 4205  
patient a sample of any drug or therapeutic device included in 4206  
the types of drugs and devices listed on the formulary, except 4207  
that all of the following conditions apply: 4208~~

~~(1) The amount of the sample furnished shall not exceed a 4209  
seventy two hour supply, except when the minimum available 4210  
quantity of the sample is packaged in an amount that is greater 4211  
than a seventy two hour supply, in which case the packaged 4212  
amount may be furnished. 4213~~

~~(2) No charge may be imposed for the sample or for 4214  
furnishing it. 4215~~

~~(3) Samples of controlled substances may not be personally 4216  
furnished. 4217~~

~~(F) A clinical nurse specialist, certified nurse midwife, 4218  
or certified nurse practitioner may personally furnish to a 4219  
patient a complete or partial supply of a drug or therapeutic 4220  
device included in the types of drugs and devices listed on the 4221  
formulary, except that all of the following conditions apply: 4222~~

~~(1) The clinical nurse specialist, certified nurse 4223  
midwife, or certified nurse practitioner shall personally 4224  
furnish only antibiotics, antifungals, scabicides, 4225  
contraceptives, prenatal vitamins, antihypertensives, drugs and 4226  
devices used in the treatment of diabetes, drugs and devices 4227  
used in the treatment of asthma, and drugs used in the treatment 4228~~

~~of dyslipidemia.~~ 4229

~~(2) The clinical nurse specialist, certified nurse- 4230  
midwife, or certified nurse practitioner shall not furnish the 4231  
drugs and devices in locations other than a health department- 4232  
operated by the board of health of a city or general health- 4233  
district or the authority having the duties of a board of health- 4234  
under section 3709.05 of the Revised Code, a federally funded- 4235  
comprehensive primary care clinic, or a nonprofit health care- 4236  
clinic or program.~~ 4237

~~(3) The clinical nurse specialist, certified nurse- 4238  
midwife, or certified nurse practitioner shall comply with all- 4239  
safety standards for personally furnishing supplies of drugs and- 4240  
devices, as established in rules adopted under section 4723.50- 4241  
of the Revised Code.~~ 4242

~~(G) A clinical nurse specialist, certified nurse-midwife, 4243  
or certified nurse practitioner shall comply with section 4244  
3719.061 of the Revised Code if the nurse prescribes for a 4245  
minor, as defined in that section, an opioid analgesic, as 4246  
defined in section 3719.01 of the Revised Code.~~ 4247

(F) Until the board of nursing establishes a new formulary 4248  
in rules adopted under section 4723.50 of the Revised Code, a 4249  
clinical nurse specialist, certified nurse-midwife, or certified 4250  
nurse practitioner who prescribes or furnishes any drug or 4251  
therapeutic device shall do so in accordance with the formulary 4252  
established by the board prior to the effective date of this 4253  
amendment. 4254

**Sec. 4723.482.** ~~(A) Except as provided in divisions (C) and- 4255  
(D) of this section, an~~ An applicant for a license to practice 4256  
nursing as an advanced practice registered nurse who seeks 4257

designation as a clinical nurse specialist, certified nurse- 4258  
midwife, or certified nurse practitioner shall include with the 4259  
application submitted under section ~~4723.48~~ 4723.41 of the 4260  
Revised Code ~~all of the following:~~ 4261

~~(1) Evidence of holding a current, valid certificate of~~ 4262  
~~authority to practice as a clinical nurse specialist, certified~~ 4263  
~~nurse midwife, or certified nurse practitioner that was issued~~ 4264  
~~by meeting the requirements of division (A) of section 4723.41~~ 4265  
~~of the Revised Code;~~ 4266

~~(2) Evidence~~ evidence of successfully completing the 4267  
course of study in advanced pharmacology and related topics in 4268  
accordance with the requirements specified in division (B) of 4269  
this section; 4270

~~(3) The fee required by section 4723.08 of the Revised~~ 4271  
~~Code for a certificate to prescribe;~~ 4272

~~(4) Any additional information the board of nursing~~ 4273  
~~requires pursuant to rules adopted under section 4723.50 of the~~ 4274  
~~Revised Code.~~ 4275

(B) With respect to the course of study in advanced 4276  
pharmacology and related topics ~~that must be successfully~~ 4277  
~~completed to obtain a certificate to prescribe~~, all of the 4278  
following requirements apply: 4279

(1) The course of study shall be completed not longer than 4280  
~~three~~ five years before the application ~~for the certificate to~~ 4281  
~~prescribe~~ is filed. 4282

(2) The course of study shall be not less than forty-five 4283  
contact hours. 4284

(3) The course of study shall meet the requirements to be 4285

approved by the board in accordance with standards established 4286  
in rules adopted under section 4723.50 of the Revised Code. 4287

(4) The content of the course of study shall be specific 4288  
to the applicant's nursing specialty. 4289

(5) The instruction provided in the course of study shall 4290  
include all of the following: 4291

(a) A minimum of thirty-six contact hours of instruction 4292  
in advanced pharmacology that includes pharmacokinetic 4293  
principles and clinical application and the use of drugs and 4294  
therapeutic devices in the prevention of illness and maintenance 4295  
of health; 4296

(b) Instruction in the fiscal and ethical implications of 4297  
prescribing drugs and therapeutic devices; 4298

(c) Instruction in the state and federal laws that apply 4299  
to the authority to prescribe; 4300

(d) Instruction that is specific to schedule II controlled 4301  
substances, including instruction in all of the following: 4302

(i) Indications for the use of schedule II controlled 4303  
substances in drug therapies; 4304

(ii) The most recent guidelines for pain management 4305  
therapies, as established by state and national organizations 4306  
such as the Ohio pain initiative and the American pain society; 4307

(iii) Fiscal and ethical implications of prescribing 4308  
schedule II controlled substances; 4309

(iv) State and federal laws that apply to the authority to 4310  
prescribe schedule II controlled substances; 4311

(v) Prevention of abuse and diversion of schedule II 4312

controlled substances, including identification of the risk of 4313  
abuse and diversion, recognition of abuse and diversion, types 4314  
of assistance available for prevention of abuse and diversion, 4315  
and methods of establishing safeguards against abuse and 4316  
diversion. 4317

~~(e) Any additional instruction required pursuant to rules 4318  
adopted under section 4723.50 of the Revised Code. 4319~~

(C) An applicant who practiced or is practicing as a 4320  
clinical nurse specialist, certified nurse-midwife, or certified 4321  
nurse practitioner in another jurisdiction or as an employee of 4322  
the United States government, ~~and is not seeking authority to 4323  
prescribe drugs and therapeutic devices by meeting the 4324  
requirements of division (A) or (D) of this section,~~ shall 4325  
include with the application submitted under section ~~4723.48 4326  
4723.41~~ of the Revised Code all of the following: 4327

(1) Evidence of ~~holding a current, valid certificate of 4328  
authority issued under this chapter to practice as a clinical 4329  
nurse specialist, certified nurse-midwife, or certified nurse 4330  
practitioner~~ having completed a two-hour course of instruction 4331  
approved by the board in the laws of this state that govern 4332  
drugs and prescriptive authority; 4333

(2) ~~The fee required by section 4723.08 of the Revised 4334  
Code for a certificate to prescribe;~~ 4335

~~(3) Either of the following: 4336~~

(a) Evidence of having held, for a continuous period of at 4337  
least one year during the three years immediately preceding the 4338  
date of application, valid authority issued by another 4339  
jurisdiction to prescribe therapeutic devices and drugs, 4340  
including at least some controlled substances; 4341

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

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

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

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

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

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

~~(3) Either of the following:~~

~~(a) Evidence of having held, for a continuous period of at least one year during the three years immediately preceding the date of application, valid authority issued by another~~

~~jurisdiction to prescribe therapeutic devices and drugs,~~ 4371  
~~excluding controlled substances;~~ 4372

~~(b) Evidence of having been employed by the United States~~ 4373  
~~government and authorized, for a continuous period of at least~~ 4374  
~~one year during the three years immediately preceding the date~~ 4375  
~~of application, to prescribe therapeutic devices and drugs,~~ 4376  
~~excluding controlled substances, in conjunction with that~~ 4377  
~~employment.~~ 4378

~~(4) Any additional information the board requires pursuant~~ 4379  
~~to rules adopted under section 4723.50 of the Revised Code.~~ 4380

**Sec. 4723.486.** ~~(A) A certificate to prescribe issued under~~ 4381  
~~section 4723.48 of the Revised Code that is not issued as an~~ 4382  
~~externship certificate is valid for two years, unless otherwise~~ 4383  
~~provided in rules adopted under section 4723.50 of the Revised~~ 4384  
~~Code or earlier suspended or revoked by the board. The board of~~ 4385  
~~nursing shall renew certificates to prescribe according to~~ 4386  
~~procedures and a renewal schedule established in rules adopted~~ 4387  
~~under section 4723.50 of the Revised Code.~~ 4388

~~(B) Except as provided in division (C) of this section,~~ 4389  
~~the board may renew a certificate to prescribe if the holder~~ 4390  
~~submits to the board all of the following:~~ 4391

~~(1) Evidence of having completed during the previous two~~ 4392  
~~years at least twelve hours of continuing education in advanced~~ 4393  
~~pharmacology, or, if the certificate has been held for less than~~ 4394  
~~a full renewal period, the number of hours required by the board~~ 4395  
~~in rules adopted under section 4723.50 of the Revised Code;~~ 4396

~~(2) The fee required under section 4723.08 of the Revised~~ 4397  
~~Code for renewal of a certificate to prescribe;~~ 4398

~~(3) Any additional information the board requires pursuant~~ 4399

~~to rules adopted under section 4723.50 of the Revised Code.~~ 4400

~~(C)(1)~~ Except as provided in division ~~(C)(2)~~ (B) of this 4401  
section, in the case of a ~~certificate~~ license holder who is 4402  
seeking renewal of a license to practice nursing as an advanced 4403  
practice registered nurse and who prescribes opioid analgesics 4404  
or benzodiazepines, as defined in section 3719.01 of the Revised 4405  
Code, the holder shall certify to the board whether the holder 4406  
has been granted access to the drug database established and 4407  
maintained by the state board of pharmacy pursuant to section 4408  
4729.75 of the Revised Code. 4409

~~(2)~~ (B) The requirement in division ~~(C)(1)~~ (A) of this 4410  
section does not apply if any of the following is the case: 4411

~~(a)~~ (1) The state board of pharmacy notifies the board of 4412  
nursing pursuant to section 4729.861 of the Revised Code that 4413  
the ~~certificate~~ license holder has been restricted from 4414  
obtaining further information from the drug database. 4415

~~(b)~~ (2) The state board of pharmacy no longer maintains 4416  
the drug database. 4417

~~(c)~~ (3) The ~~certificate~~ license holder does not practice 4418  
nursing in this state. 4419

~~(3)~~ (C) If a ~~certificate~~ license holder certifies to the 4420  
board of nursing that the holder has been granted access to the 4421  
drug database and the board finds through an audit or other 4422  
means that the holder has not been granted access, the board may 4423  
take action under section 4723.28 of the Revised Code. 4424

~~(D)~~ The continuing education in pharmacology required 4425  
under division ~~(B)(1)~~ of this section must be received from an 4426  
accredited institution recognized by the board. The hours of 4427  
continuing education required are in addition to any other 4428



~~continuing education requirement that must be completed pursuant to this chapter.~~ 4429  
4430

**Sec. 4723.487.** (A) As used in this section: 4431

(1) "Drug database" means the database established and 4432  
maintained by the state board of pharmacy pursuant to section 4433  
4729.75 of the Revised Code. 4434

(2) "Opioid analgesic" and "benzodiazepine" have the same 4435  
meanings as in section 3719.01 of the Revised Code. 4436

(B) Except as provided in divisions (C) and (E) of this 4437  
section, an advanced practice registered nurse ~~holding a~~ 4438  
~~certificate to prescribe issued under this chapter who is~~ 4439  
designated as a clinical nurse specialist, certified nurse- 4440  
midwife, or certified nurse practitioner shall comply with all 4441  
of the following as conditions of prescribing a drug that is 4442  
either an opioid analgesic or a benzodiazepine as part of a 4443  
patient's course of treatment for a particular condition: 4444

(1) Before initially prescribing the drug, the advanced 4445  
practice registered nurse or the advanced practice registered 4446  
nurse's delegate shall request from the drug database a report 4447  
of information related to the patient that covers at least the 4448  
twelve months immediately preceding the date of the request. If 4449  
the advanced practice registered nurse practices primarily in a 4450  
county of this state that adjoins another state, the advanced 4451  
practice registered nurse or delegate also shall request a 4452  
report of any information available in the drug database that 4453  
pertains to prescriptions issued or drugs furnished to the 4454  
patient in the state adjoining that county. 4455

(2) If the patient's course of treatment for the condition 4456  
continues for more than ninety days after the initial report is 4457

requested, the advanced practice registered nurse or delegate 4458  
shall make periodic requests for reports of information from the 4459  
drug database until the course of treatment has ended. The 4460  
requests shall be made at intervals not exceeding ninety days, 4461  
determined according to the date the initial request was made. 4462  
The request shall be made in the same manner provided in 4463  
division (B) (1) of this section for requesting the initial 4464  
report of information from the drug database. 4465

(3) On receipt of a report under division (B) (1) or (2) of 4466  
this section, the advanced practice registered nurse shall 4467  
assess the information in the report. The advanced practice 4468  
registered nurse shall document in the patient's record that the 4469  
report was received and the information was assessed. 4470

(C) Division (B) of this section does not apply if in any 4471  
of the following circumstances: 4472

(1) A drug database report regarding the patient is not 4473  
available, in which case the advanced practice registered nurse 4474  
shall document in the patient's record the reason that the 4475  
report is not available. 4476

(2) The drug is prescribed in an amount indicated for a 4477  
period not to exceed seven days. 4478

(3) The drug is prescribed for the treatment of cancer or 4479  
another condition associated with cancer. 4480

(4) The drug is prescribed to a hospice patient in a 4481  
hospice care program, as those terms are defined in section 4482  
3712.01 of the Revised Code, or any other patient diagnosed as 4483  
terminally ill. 4484

(5) The drug is prescribed for administration in a 4485  
hospital, nursing home, or residential care facility. 4486

(D) The board of nursing may adopt rules, in accordance 4487  
with Chapter 119. of the Revised Code, that establish standards 4488  
and procedures to be followed by an advanced practice registered 4489  
nurse ~~with a certificate to prescribe issued under section~~ 4490  
~~4723.48 of the Revised Code~~ regarding the review of patient 4491  
information available through the drug database under division 4492  
(A) (5) of section 4729.80 of the Revised Code. The rules shall 4493  
be adopted in accordance with Chapter 119. of the Revised Code. 4494

(E) This section and any rules adopted under it do not 4495  
apply if the state board of pharmacy no longer maintains the 4496  
drug database. 4497

**Sec. 4723.488.** (A) Notwithstanding any provision of this 4498  
chapter or rule adopted by the board of nursing, ~~a clinical~~ 4499  
~~nurse specialist, certified nurse midwife, or certified nurse~~ 4500  
~~practitioner who holds a certificate to prescribe issued under~~ 4501  
~~section 4723.48 of the Revised Code~~ an advanced practice 4502  
registered nurse who is designated as a clinical nurse 4503  
specialist, certified nurse-midwife, or certified nurse 4504  
practitioner may personally furnish a supply of naloxone, or 4505  
issue a prescription for naloxone, without having examined the 4506  
individual to whom it may be administered if both of the 4507  
following conditions are met: 4508

(1) The naloxone supply is furnished to, or the 4509  
prescription is issued to and in the name of, a family member, 4510  
friend, or other individual in a position to assist an 4511  
individual who there is reason to believe is at risk of 4512  
experiencing an opioid-related overdose. 4513

(2) The advanced practice registered nurse instructs the 4514  
individual receiving the naloxone supply or prescription to 4515  
summon emergency services as soon as practicable either before 4516

or after administering naloxone to an individual apparently 4517  
experiencing an opioid-related overdose. 4518

(B) ~~A~~ An advanced practice registered nurse who under 4519  
division (A) of this section in good faith furnishes a supply of 4520  
naloxone or issues a prescription for naloxone is not liable for 4521  
or subject to any of the following for any action or omission of 4522  
the individual to whom the naloxone is furnished or the 4523  
prescription is issued: damages in any civil action, prosecution 4524  
in any criminal proceeding, or professional disciplinary action. 4525

**Sec. 4723.489.** A person not otherwise authorized to 4526  
administer drugs may administer a drug to a specified patient if 4527  
all of the following conditions are met: 4528

(A) The authority to administer the drug is delegated to 4529  
the person by an advanced practice registered nurse who is a 4530  
clinical nurse specialist, certified nurse-midwife, or certified 4531  
nurse practitioner and holds a ~~certificate to prescribe~~ license 4532  
issued under section ~~4723.48~~ 4723.42 of the Revised Code. 4533

(B) The drug is not listed in the formulary established in 4534  
rules adopted under section 4723.50 of the Revised Code ~~but,~~ is 4535  
not a controlled substance, and is not to be administered 4536  
intravenously. 4537

(C) The drug is to be administered at a location other 4538  
than a hospital inpatient care unit, as defined in section 4539  
3727.50 of the Revised Code; a hospital emergency department or 4540  
a freestanding emergency department; or an ambulatory surgical 4541  
facility, as defined in section 3702.30 of the Revised Code. 4542

(D) The person has successfully completed education based 4543  
on a recognized body of knowledge concerning drug administration 4544  
and demonstrates to the person's employer the knowledge, skills, 4545

and ability to administer the drug safely. 4546

(E) The person's employer has given the advanced practice 4547  
registered nurse access to documentation, in written or 4548  
electronic form, showing that the person has met the conditions 4549  
specified in division (D) of this section. 4550

(F) The advanced practice registered nurse is physically 4551  
present at the location where the drug is administered. 4552

**Sec. 4723.4810.** (A) (1) Notwithstanding any conflicting 4553  
provision of this chapter or rule adopted by the board of 4554  
nursing, a clinical nurse specialist, certified nurse-midwife, 4555  
or certified nurse practitioner who holds a ~~certificate to~~ 4556  
prescribe license to practice nursing as an advanced practice 4557  
registered nurse issued under section ~~4723.48~~ 4723.42 of the 4558  
Revised Code may issue a prescription for or personally furnish 4559  
a complete or partial supply of a drug to treat chlamydia, 4560  
gonorrhea, or trichomoniasis, without having examined the 4561  
individual for whom the drug is intended, if all of the 4562  
following conditions are met: 4563

(a) The individual is a sexual partner of the nurse's 4564  
patient. 4565

(b) The patient has been diagnosed with chlamydia, 4566  
gonorrhea, or trichomoniasis. 4567

(c) The patient reports to the nurse that the individual 4568  
is unable or unlikely to be evaluated or treated by a health 4569  
professional. 4570

(2) A prescription issued under this section shall include 4571  
the individual's name and address, if known. If the nurse is 4572  
unable to obtain the individual's name and address, the 4573  
prescription shall include the patient's name and address and 4574

the words "expedited partner therapy" or the letters "EPT." 4575

(3) A nurse may prescribe or personally furnish a drug 4576  
under this section for not more than a total of two individuals 4577  
who are sexual partners of the nurse's patient. 4578

(B) For each drug prescribed or personally furnished under 4579  
this section, the nurse shall do all of the following: 4580

(1) Provide the patient with information concerning the 4581  
drug for the purpose of sharing the information with the 4582  
individual, including directions for use of the drug and any 4583  
side effects, adverse reactions, or known contraindications 4584  
associated with the drug; 4585

(2) Recommend to the patient that the individual seek 4586  
treatment from a health professional; 4587

(3) Document all of the following in the patient's record: 4588

(a) The name of the drug prescribed or furnished and its 4589  
dosage; 4590

(b) That information concerning the drug was provided to 4591  
the patient for the purpose of sharing the information with the 4592  
individual; 4593

(c) If known, any adverse reactions the individual 4594  
experiences from treatment with the drug. 4595

(C) A nurse who prescribes or personally furnishes a drug 4596  
under this section may contact the individual for whom the drug 4597  
is intended. 4598

(1) If the nurse contacts the individual, the nurse shall 4599  
do all of the following: 4600

(a) Inform the individual that the individual may have 4601

been exposed to chlamydia, gonorrhea, or trichomoniasis; 4602

(b) Encourage the individual to seek treatment from a 4603  
health professional; 4604

(c) Explain the treatment options available to the 4605  
individual, including treatment with a prescription drug, 4606  
directions for use of the drug, and any side effects, adverse 4607  
reactions, or known contraindications associated with the drug; 4608

(d) Document in the patient's record that the nurse 4609  
contacted the individual. 4610

(2) If the nurse does not contact the individual, the 4611  
nurse shall document that fact in the patient's record. 4612

(D) A nurse who in good faith prescribes or personally 4613  
furnishes a drug under this section is not liable for or subject 4614  
to any of the following: 4615

(1) Damages in any civil action; 4616

(2) Prosecution in any criminal proceeding; 4617

(3) Professional disciplinary action. 4618

Sec. 4723.49. (A) There is hereby created the committee on 4619  
prescriptive governance. The committee shall consist of the 4620  
following members: 4621

(1) Two advanced practice registered nurses, one of whom 4622  
is nominated by an Ohio advanced practice registered nurse 4623  
specialty association and one of whom is nominated by the Ohio 4624  
association of advanced practice registered nurses or its 4625  
successor organization; 4626

(2) A member of the board of nursing who is an advanced 4627  
practice registered nurse and represents the public; 4628

(3) Two physicians, each actively engaged in practice with 4629  
a clinical nurse specialist, certified nurse-midwife, or 4630  
certified nurse practitioner, one of whom is nominated by the 4631  
Ohio state medical association or its successor organization and 4632  
one of whom is nominated by the Ohio academy of family 4633  
physicians or its successor organization; 4634

(4) A member of the state medical board who is a physician 4635  
and represents the public; 4636

(5) A pharmacist actively engaged in practice in this 4637  
state as a clinical pharmacist. 4638

(B) The board of nursing shall appoint the members who are 4639  
nurses, the state medical board shall appoint the members who 4640  
are physicians, and the state board of pharmacy shall appoint 4641  
the member who is a pharmacist. 4642

(C) Initial appointments to the committee shall be made 4643  
not later than sixty days after the effective date of this 4644  
section. Of the initial appointments the board of nursing must 4645  
make, one shall be for a term of one year and two shall be for 4646  
terms of two years. Of the initial appointments the state 4647  
medical board must make, one shall be for a term of one year and 4648  
two shall be for terms of two years. The initial appointment by 4649  
the state board of pharmacy shall be for a term of two years. 4650  
Thereafter, terms shall be for two years, with each term ending 4651  
on the same day of the same month as did the term that it 4652  
succeeds. Vacancies shall be filled in the same manner as 4653  
appointments. 4654

When the term of any member expires, a successor shall be 4655  
appointed in the same manner as the initial appointment. Any 4656  
member appointed to fill a vacancy occurring prior to the 4657



expiration of the term for which the member's predecessor was 4658  
appointed shall hold office for the remainder of that term. A 4659  
member shall continue in office subsequent to the expiration 4660  
date of the member's term until the member's successor takes 4661  
office or until a period of sixty days has elapsed, whichever 4662  
occurs first. A member may be reappointed. 4663

**Sec. 4723.491.** (A) The committee on prescriptive 4664  
governance shall organize by selecting a chairperson from among 4665  
its members who are nurses ~~or collaborating physicians~~. The 4666  
committee may select a new chairperson at any time. 4667

~~(B) Five members constitute a quorum for the transaction~~ 4668  
~~of official business~~ The committee may transact official 4669  
business only if all seven members of the committee are present. 4670  
The clinical pharmacist member may participate in any meeting of 4671  
the committee, but shall not be included as a voting member ~~only~~ 4672  
~~when the committee is considering one of the following:~~ 4673

~~(1) The composition of the formulary of drugs and~~ 4674  
~~therapeutic devices that may be prescribed by a clinical nurse~~ 4675  
~~specialist, certified nurse-midwife, or certified nurse~~ 4676  
~~practitioner who holds a certificate to prescribe issued under~~ 4677  
~~section 4723.48 of the Revised Code;~~ 4678

~~(2) The manner in which a nurse may personally furnish to~~ 4679  
~~patients drugs and therapeutic devices packaged as samples and~~ 4680  
~~may personally furnish partial or complete supplies of other~~ 4681  
~~drugs and therapeutic devices;~~ 4682

~~(3) Recommendations to be given to the board of nursing~~ 4683  
~~for use in adopting rules under section 4723.50 of the Revised~~ 4684  
~~Code pertaining to the matters specified in divisions (B)(1) and~~ 4685  
~~(2) of this section. In the event of a tie vote, the board of~~ 4686

nursing shall cast the deciding vote. 4687

(C) Members shall serve without compensation but shall 4688  
receive payment for their actual and necessary expenses incurred 4689  
in the performance of their official duties. The expenses shall 4690  
be paid by the board of nursing. 4691

(D) The committee shall meet at least once a year. 4692

**Sec. 4723.492.** The committee on prescriptive governance 4693  
shall develop ~~recommendations regarding the authority to~~ 4694  
prescribe a recommended exclusionary formulary that specifies 4695  
the drugs and therapeutic devices pursuant to a certificate to 4696  
prescribe issued under section 4723.48 of the Revised Code. The 4697  
recommendations shall include provisions that apply specifically 4698  
to the authority to prescribe schedule II controlled 4699  
substances that a clinical nurse specialist, certified nurse 4700  
midwife, or certified nurse practitioner cannot prescribe or 4701  
furnish. A recommended exclusionary formulary shall not permit 4702  
the prescribing or furnishing of any drug or device prohibited 4703  
by federal or state law. 4704

The committee shall submit ~~recommendations~~ a recommended 4705  
exclusionary formulary to the board of nursing ~~as necessary at~~ 4706  
least once per year for the board to fulfill its duty to adopt 4707  
rules under section 4723.50 of the Revised Code board's 4708  
approval. At the board's request, the committee shall reconsider 4709  
a ~~recommendation~~ recommended exclusionary formulary it has 4710  
submitted and resubmit the ~~recommendation~~ recommended 4711  
exclusionary formulary to the board accordingly. 4712

**Sec. 4723.493.** (A) There is hereby created within the 4713  
board of nursing the advisory committee on advanced practice 4714  
registered nursing. The committee shall consist of the following 4715

members and any other members the board appoints under division 4716

(B) of this section: 4717

(1) Four advanced practice registered nurses, each 4718

actively engaged in the practice of advanced practice registered 4719

nursing in a clinical setting in this state, at least one of 4720

whom is actively engaged in providing primary care, at least one 4721

of whom is actively engaged in practice as a certified 4722

registered nurse anesthetist, and at least one of whom is 4723

actively engaged in practice as a certified nurse-midwife; 4724

(2) Four advanced practice registered nurses, each serving 4725

as a faculty member of an approved program of nursing education 4726

that prepares students for licensure as advanced practice 4727

registered nurses; 4728

(3) A member of the board of nursing who is an advanced 4729

practice registered nurse; 4730

(4) A representative of an entity employing ten or more 4731

advanced practice registered nurses actively engaged in practice 4732

in this state. 4733

(B) The board of nursing shall appoint the members 4734

described in division (A) of this section. Initial appointments 4735

must be made not later than sixty days after the effective date 4736

of this section. Recommendations for initial appointments and 4737

for filling any vacancies may be submitted to the board by 4738

professional nursing associations and individuals. The board 4739

shall appoint initial members and fill vacancies according to 4740

the recommendations it receives. If it does not receive any 4741

recommendations or receives an insufficient number of 4742

recommendations, the board shall appoint members and fill 4743

vacancies on its own advice. 4744

The board may appoint additional members to the committee 4745  
on the committee's recommendation. 4746

Members shall not be appointed for specified terms but 4747  
serve at the pleasure of the board. 4748

(C) The committee shall organize by selecting a 4749  
chairperson from among its members. The committee may select a 4750  
new chairperson at any time. Six members constitute a quorum for 4751  
the transaction of official business. Members shall serve 4752  
without compensation but receive payment for their actual and 4753  
necessary expenses incurred in the performance of their official 4754  
duties. The expenses shall be paid by the board of nursing. 4755

(D) The committee shall advise the board regarding the 4756  
practice and regulation of advanced practice registered nurses 4757  
and may make recommendations to the committee on prescriptive 4758  
governance. The committee may also recommend to the board that 4759  
an individual with expertise in an advanced practice registered 4760  
nursing specialty be appointed under division (B) of this 4761  
section as an additional member of the committee. 4762

**Sec. 4723.50.** (A) In accordance with Chapter 119. of the 4763  
Revised Code, the board of nursing shall adopt rules as 4764  
necessary to implement the provisions of this chapter pertaining 4765  
to the authority of advanced practice registered nurses who are 4766  
designated as clinical nurse specialists, certified nurse- 4767  
midwives, and certified nurse practitioners to prescribe and 4768  
furnish drugs and therapeutic devices ~~and the issuance and~~ 4769  
~~renewal of certificates to prescribe.~~ 4770

The board shall adopt rules that are consistent with ~~the~~ 4771  
~~recommendations~~ a recommended exclusionary formulary the board 4772  
receives from the committee on prescriptive governance pursuant 4773

to section 4723.492 of the Revised Code. After reviewing a 4774  
~~recommendation-formulary~~ submitted by the committee, the board 4775  
may either adopt the ~~recommendation-formulary~~ as a rule or ask 4776  
the committee to reconsider and resubmit the ~~recommendation-~~ 4777  
~~formulary~~. The board shall not adopt any rule that does not 4778  
conform to a ~~recommendation made by the~~ formulary developed by 4779  
the committee. 4780

~~(B) The board shall adopt rules under this section that do-~~ 4781  
~~all of the following:-~~ 4782

~~(1) Establish a formulary listing the types of drugs and~~ 4783  
~~therapeutic devices that may be prescribed by a clinical nurse-~~ 4784  
~~specialist, certified nurse-midwife, or certified nurse-~~ 4785  
~~practitioner. The exclusionary formulary may include shall~~ 4786  
permit the prescribing of controlled substances, as defined in 4787  
section 3719.01 of the Revised Code, in a manner consistent with 4788  
section 4723.481 of the Revised Code. The formulary shall not 4789  
permit the prescribing or furnishing of any of the following: 4790

(1) A drug or device to perform or induce an abortion; 4791

(2) A drug or device prohibited by federal or state law. 4792

~~(2) Establish safety standards to be followed by a-~~ 4793  
~~clinical nurse specialist, certified nurse-midwife, or certified-~~ 4794  
~~nurse practitioner when personally furnishing to patients-~~ 4795  
~~complete or partial supplies of antibiotics, antifungals,~~ 4796  
~~scabicides, contraceptives, prenatal vitamins,-~~ 4797  
~~antihypertensives, drugs and devices used in the treatment of-~~ 4798  
~~diabetes, drugs and devices used in the treatment of asthma, and~~ 4799  
~~drugs used in the treatment of dyslipidemia;-~~ 4800

~~(3) Establish criteria for the components of the standard-~~ 4801  
~~care arrangements described in section 4723.431 of the Revised-~~ 4802

~~Code that apply to the authority to prescribe, including the~~ 4803  
~~components that apply to the authority to prescribe schedule II-~~ 4804  
~~controlled substances. The rules shall be consistent with that~~ 4805  
~~section and include all of the following:-~~ 4806

~~(a) Quality assurance standards;-~~ 4807

~~(b) Standards for periodic review by a collaborating~~ 4808  
~~physician or podiatrist of the records of patients treated by-~~ 4809  
~~the clinical nurse specialist, certified nurse midwife, or~~ 4810  
~~certified nurse practitioner;-~~ 4811

~~(c) Acceptable travel time between the location at which-~~ 4812  
~~the clinical nurse specialist, certified nurse midwife, or~~ 4813  
~~certified nurse practitioner is engaging in the prescribing-~~ 4814  
~~components of the nurse's practice and the location of the~~ 4815  
~~nurse's collaborating physician or podiatrist;-~~ 4816

~~(d) Any other criteria recommended by the committee on-~~ 4817  
~~prescriptive governance.~~ 4818

~~(4) Establish standards and procedures for issuance and~~ 4819  
~~renewal of a certificate to prescribe, including specification-~~ 4820  
~~of any additional information the board may require under~~ 4821  
~~division (A) (4), (C) (5), or (D) (4) of section 4723.482, division-~~ 4822  
~~(B) (3) of section 4723.485, or division (B) (3) of section-~~ 4823  
~~4723.486 of the Revised Code;-~~ 4824

~~(5) (B) In addition to the rules described in division (A)~~ 4825  
~~of this section, the board shall adopt rules under this section~~ 4826  
~~that do the following:~~ 4827

(1) Establish standards for board approval of the course 4828  
of study in advanced pharmacology and related topics required by 4829  
section 4723.482 of the Revised Code; 4830

~~(6)~~(2) Establish requirements for board approval of the two-hour course of instruction in the laws of this state as required under division (C)~~(4)~~(1) of section 4723.482 of the Revised Code and division (B)(2) of section 4723.484 of the Revised Code;

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

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

~~(b) Standards and procedures for the supervision that a physician must provide during an externship, including supervision provided by working with the participant and supervision provided by making timely reviews of the records of patients treated by the participant. The manner in which supervision must be provided may vary according to the location where the participant is practicing and with the participant's level of experience~~

(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 certified nurse practitioner;

(c) Acceptable travel time between the location at which

the clinical nurse specialist, certified nurse-midwife, or 4860  
certified nurse practitioner is engaging in the prescribing 4861  
components of the nurse's practice and the location of the 4862  
nurse's collaborating physician or podiatrist; 4863

(d) Any other criteria recommended by the committee on 4864  
prescriptive governance. 4865

**Sec. 4723.71.** (A) There is hereby established, under the 4866  
board of nursing, the advisory group on dialysis. The advisory 4867  
group shall advise the board of nursing regarding the 4868  
qualifications, standards for training, and competence of 4869  
dialysis technicians and dialysis technician interns and all 4870  
other related matters. The advisory group shall consist of the 4871  
members appointed under divisions (B) and (C) of this section. A 4872  
member of the board of nursing or a representative appointed by 4873  
the board shall serve as chairperson of all meetings of the 4874  
advisory group. 4875

(B) The board of nursing shall appoint the following as 4876  
members of the advisory group: 4877

(1) Four dialysis technicians; 4878

(2) A registered nurse who regularly performs dialysis and 4879  
cares for patients who receive dialysis; 4880

(3) A physician, recommended by the state medical board, 4881  
who specializes in nephrology or an advanced practice registered 4882  
nurse recommended by the board of nursing who specializes in 4883  
nephrology; 4884

(4) An administrator of a dialysis center; 4885

(5) A dialysis patient; 4886

(6) A representative of the Ohio hospital association; 4887



(7) A representative from the end-stage renal disease network, as defined in 42 C.F.R. 405.2102. 4888  
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(C) The members of the advisory group appointed under division (B) of this section may recommend additional persons to serve as members of the advisory group. The board of nursing may appoint, as appropriate, any of the additional persons recommended. 4890  
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(D) The board of nursing shall specify the terms for the advisory group members. Members shall serve at the discretion of the board of nursing. Members shall receive their actual and necessary expenses incurred in the performance of their official duties. 4895  
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(E) Sections 101.82 to 101.87 of the Revised Code do not apply to the advisory group. 4900  
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**Sec. 4723.88.** The board of nursing, in accordance with Chapter 119. of the Revised Code, shall adopt rules to administer and enforce sections 4723.81 to 4723.87 of the Revised Code. The rules shall establish all of the following: 4902  
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(A) Standards and procedures for issuance of community health worker certificates; 4906  
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(B) Standards for evaluating the competency of an individual who applies to receive a certificate on the basis of having been employed in a capacity substantially the same as a community health worker before the board implemented the certification program; 4908  
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(C) Standards and procedures for renewal of community health worker certificates, including the continuing education requirements that must be met for renewal; 4913  
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(D) Standards governing the performance of activities 4916  
related to nursing care that are delegated by a registered nurse 4917  
to certified community health workers. In establishing the 4918  
standards, the board shall specify limits on the number of 4919  
certified community health workers a registered nurse may 4920  
supervise at any one time. 4921

(E) Standards and procedures for assessing the quality of 4922  
the services that are provided by certified community health 4923  
workers; 4924

(F) Standards and procedures for denying, suspending, and 4925  
revoking a community health worker certificate, including 4926  
reasons for imposing the sanctions that are substantially 4927  
similar to the reasons that sanctions are imposed under section 4928  
4723.28 of the Revised Code; 4929

(G) Standards and procedures for approving and renewing 4930  
the board's approval of training programs that prepare 4931  
individuals to become certified community health workers. In 4932  
establishing the standards, the board shall specify the minimum 4933  
components that must be included in a training program, shall 4934  
require that all approved training programs offer the 4935  
standardized curriculum, and shall ensure that the curriculum 4936  
enables individuals to use the training as a basis for entering 4937  
programs leading to other careers, including nursing education 4938  
programs. 4939

(H) Standards for approval of continuing education 4940  
programs and courses for certified community health workers; 4941

(I) Standards and procedures for withdrawing the board's 4942  
approval of a training program, refusing to renew the approval 4943  
of a training program, and placing a training program on 4944

provisional approval; 4945

(J) Amounts for each fee that may be imposed under 4946  
division (A) ~~(20)~~ (17) of section 4723.08 of the Revised Code; 4947

(K) Any other standards or procedures the board considers 4948  
necessary and appropriate for the administration and enforcement 4949  
of sections 4723.81 to 4723.87 of the Revised Code. 4950

**Sec. 4723.99.** (A) Except as provided in division (B) of 4951  
this section, whoever violates section 4723.03, 4723.44, 4952  
4723.653, or 4723.73 of the Revised Code is guilty of a felony 4953  
of the fifth degree on a first offense and a felony of the 4954  
fourth degree on each subsequent offense. 4955

(B) Each of the following is guilty of a minor 4956  
misdemeanor: 4957

(1) A registered nurse, advanced practice registered 4958  
nurse, or licensed practical nurse who violates division (A) ~~or~~ 4959  
, (B), or (C) of section 4723.03 of the Revised Code by reason 4960  
of a license to practice nursing that has lapsed for failure to 4961  
renew or by practicing nursing after a license has been 4962  
classified as inactive; 4963

(2) A medication aide who violates section 4723.653 of the 4964  
Revised Code by reason of a medication aide certificate that has 4965  
lapsed for failure to renew or by administering medication as a 4966  
medication aide after a certificate has been classified as 4967  
inactive. 4968

**Sec. 4729.01.** As used in this chapter: 4969

(A) "Pharmacy," except when used in a context that refers 4970  
to the practice of pharmacy, means any area, room, rooms, place 4971  
of business, department, or portion of any of the foregoing 4972

where the practice of pharmacy is conducted. 4973

(B) "Practice of pharmacy" means providing pharmacist care 4974  
requiring specialized knowledge, judgment, and skill derived 4975  
from the principles of biological, chemical, behavioral, social, 4976  
pharmaceutical, and clinical sciences. As used in this division, 4977  
"pharmacist care" includes the following: 4978

(1) Interpreting prescriptions; 4979

(2) Dispensing drugs and drug therapy related devices; 4980

(3) Compounding drugs; 4981

(4) Counseling individuals with regard to their drug 4982  
therapy, recommending drug therapy related devices, and 4983  
assisting in the selection of drugs and appliances for treatment 4984  
of common diseases and injuries and providing instruction in the 4985  
proper use of the drugs and appliances; 4986

(5) Performing drug regimen reviews with individuals by 4987  
discussing all of the drugs that the individual is taking and 4988  
explaining the interactions of the drugs; 4989

(6) Performing drug utilization reviews with licensed 4990  
health professionals authorized to prescribe drugs when the 4991  
pharmacist determines that an individual with a prescription has 4992  
a drug regimen that warrants additional discussion with the 4993  
prescriber; 4994

(7) Advising an individual and the health care 4995  
professionals treating an individual with regard to the 4996  
individual's drug therapy; 4997

(8) Acting pursuant to a consult agreement with one or 4998  
more physicians authorized under Chapter 4731. of the Revised 4999  
Code to practice medicine and surgery or osteopathic medicine 5000

and surgery, if an agreement has been established; 5001

(9) Engaging in the administration of immunizations to the 5002  
extent authorized by section 4729.41 of the Revised Code. 5003

(C) "Compounding" means the preparation, mixing, 5004  
assembling, packaging, and labeling of one or more drugs in any 5005  
of the following circumstances: 5006

(1) Pursuant to a prescription issued by a licensed health 5007  
professional authorized to prescribe drugs; 5008

(2) Pursuant to the modification of a prescription made in 5009  
accordance with a consult agreement; 5010

(3) As an incident to research, teaching activities, or 5011  
chemical analysis; 5012

(4) In anticipation of orders for drugs pursuant to 5013  
prescriptions, based on routine, regularly observed dispensing 5014  
patterns; 5015

(5) Pursuant to a request made by a licensed health 5016  
professional authorized to prescribe drugs for a drug that is to 5017  
be used by the professional for the purpose of direct 5018  
administration to patients in the course of the professional's 5019  
practice, if all of the following apply: 5020

(a) At the time the request is made, the drug is not 5021  
commercially available regardless of the reason that the drug is 5022  
not available, including the absence of a manufacturer for the 5023  
drug or the lack of a readily available supply of the drug from 5024  
a manufacturer. 5025

(b) A limited quantity of the drug is compounded and 5026  
provided to the professional. 5027

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

(D) "Consult agreement" means an agreement that has been entered into under section 4729.39 of the Revised Code.

(E) "Drug" means:

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

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

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

(4) Any article intended for use as a component of any article specified in division (E) (1), (2), or (3) of this section; but does not include devices or their components, parts, or accessories.

(F) "Dangerous drug" means any of the following:

(1) Any drug to which either of the following applies:

(a) Under the "Federal Food, Drug, and Cosmetic Act," 52 Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is required to bear a label containing the legend "Caution: Federal law prohibits dispensing without prescription" or "Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian" or any similar restrictive statement, or the drug may be dispensed only upon a prescription;

- (b) Under Chapter 3715. or 3719. of the Revised Code, the drug may be dispensed only upon a prescription. 5056  
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- (2) Any drug that contains a schedule V controlled substance and that is exempt from Chapter 3719. of the Revised Code or to which that chapter does not apply; 5058  
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- (3) Any drug intended for administration by injection into the human body other than through a natural orifice of the human body. 5061  
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- (G) "Federal drug abuse control laws" has the same meaning as in section 3719.01 of the Revised Code. 5064  
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- (H) "Prescription" means both of the following: 5066
- (1) A written, electronic, or oral order for drugs or combinations or mixtures of drugs to be used by a particular individual or for treating a particular animal, issued by a licensed health professional authorized to prescribe drugs; 5067  
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- (2) For purposes of sections 2925.61, 4723.488, 4729.44, 4730.431, and 4731.94 of the Revised Code, a written, electronic, or oral order for naloxone issued to and in the name of a family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose. 5071  
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- (3) For purposes of sections 4723.4810, 4729.282, 4730.432, and 4731.93 of the Revised Code, a written, electronic, or oral order for a drug to treat chlamydia, gonorrhea, or trichomoniasis issued to and in the name of a patient who is not the intended user of the drug but is the sexual partner of the intended user. 5077  
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- (I) "Licensed health professional authorized to prescribe 5083

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

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

(2) A clinical nurse specialist, certified nurse-midwife,  
or certified nurse practitioner who holds a ~~certificate to~~  
~~prescribe~~ current, valid license to practice nursing as an  
advanced practice registered nurse issued under ~~section 4723.48~~  
Chapter 4723. of the Revised Code;

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

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

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

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

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



(K) "Wholesale sale" and "sale at wholesale" mean any sale 5112  
in which the purpose of the purchaser is to resell the article 5113  
purchased or received by the purchaser. 5114

(L) "Retail sale" and "sale at retail" mean any sale other 5115  
than a wholesale sale or sale at wholesale. 5116

(M) "Retail seller" means any person that sells any 5117  
dangerous drug to consumers without assuming control over and 5118  
responsibility for its administration. Mere advice or 5119  
instructions regarding administration do not constitute control 5120  
or establish responsibility. 5121

(N) "Price information" means the price charged for a 5122  
prescription for a particular drug product and, in an easily 5123  
understandable manner, all of the following: 5124

(1) The proprietary name of the drug product; 5125

(2) The established (generic) name of the drug product; 5126

(3) The strength of the drug product if the product 5127  
contains a single active ingredient or if the drug product 5128  
contains more than one active ingredient and a relevant strength 5129  
can be associated with the product without indicating each 5130  
active ingredient. The established name and quantity of each 5131  
active ingredient are required if such a relevant strength 5132  
cannot be so associated with a drug product containing more than 5133  
one ingredient. 5134

(4) The dosage form; 5135

(5) The price charged for a specific quantity of the drug 5136  
product. The stated price shall include all charges to the 5137  
consumer, including, but not limited to, the cost of the drug 5138  
product, professional fees, handling fees, if any, and a 5139

statement identifying professional services routinely furnished 5140  
by the pharmacy. Any mailing fees and delivery fees may be 5141  
stated separately without repetition. The information shall not 5142  
be false or misleading. 5143

(O) "Wholesale distributor of dangerous drugs" means a 5144  
person engaged in the sale of dangerous drugs at wholesale and 5145  
includes any agent or employee of such a person authorized by 5146  
the person to engage in the sale of dangerous drugs at 5147  
wholesale. 5148

(P) "Manufacturer of dangerous drugs" means a person, 5149  
other than a pharmacist, who manufactures dangerous drugs and 5150  
who is engaged in the sale of those dangerous drugs within this 5151  
state. 5152

(Q) "Terminal distributor of dangerous drugs" means a 5153  
person who is engaged in the sale of dangerous drugs at retail, 5154  
or any person, other than a wholesale distributor or a 5155  
pharmacist, who has possession, custody, or control of dangerous 5156  
drugs for any purpose other than for that person's own use and 5157  
consumption, and includes pharmacies, hospitals, nursing homes, 5158  
and laboratories and all other persons who procure dangerous 5159  
drugs for sale or other distribution by or under the supervision 5160  
of a pharmacist or licensed health professional authorized to 5161  
prescribe drugs. 5162

(R) "Promote to the public" means disseminating a 5163  
representation to the public in any manner or by any means, 5164  
other than by labeling, for the purpose of inducing, or that is 5165  
likely to induce, directly or indirectly, the purchase of a 5166  
dangerous drug at retail. 5167

(S) "Person" includes any individual, partnership, 5168

association, limited liability company, or corporation, the 5169  
state, any political subdivision of the state, and any district, 5170  
department, or agency of the state or its political 5171  
subdivisions. 5172

(T) "Finished dosage form" has the same meaning as in 5173  
section 3715.01 of the Revised Code. 5174

(U) "Generically equivalent drug" has the same meaning as 5175  
in section 3715.01 of the Revised Code. 5176

(V) "Animal shelter" means a facility operated by a humane 5177  
society or any society organized under Chapter 1717. of the 5178  
Revised Code or a dog pound operated pursuant to Chapter 955. of 5179  
the Revised Code. 5180

(W) "Food" has the same meaning as in section 3715.01 of 5181  
the Revised Code. 5182

(X) "Pain management clinic" has the same meaning as in 5183  
section 4731.054 of the Revised Code. 5184

**Sec. 4731.27.** (A) As used in this section, 5185  
"collaboration," "physician," "standard care arrangement," and 5186  
"supervision" have the same meanings as in section 4723.01 of 5187  
the Revised Code. 5188

(B) Except as provided in division (D)(1) of section 5189  
4723.431 of the Revised Code, a physician or podiatrist shall 5190  
enter into a standard care arrangement with each clinical nurse 5191  
specialist, certified nurse-midwife, or certified nurse 5192  
practitioner with whom the physician or podiatrist is in 5193  
collaboration. 5194

The collaborating physician or podiatrist shall fulfill 5195  
the responsibilities of collaboration, as specified in the 5196

arrangement and in accordance with division (A) of section 5197  
4723.431 of the Revised Code. A copy of the standard care 5198  
arrangement shall be retained on file at each site where the 5199  
nurse practices. Prior approval of the standard care arrangement 5200  
by the state medical board is not required, but the board may 5201  
periodically review it. 5202

Nothing in this division prohibits a hospital from hiring 5203  
a clinical nurse specialist, certified nurse-midwife, or 5204  
certified nurse practitioner as an employee and negotiating 5205  
standard care arrangements on behalf of the employee as 5206  
necessary to meet the requirements of this section. A standard 5207  
care arrangement between the hospital's employee and the 5208  
employee's collaborating physician is subject to approval by the 5209  
medical staff and governing body of the hospital prior to 5210  
implementation of the arrangement at the hospital. 5211

~~(C) With respect to a clinical nurse specialist, certified 5212  
nurse midwife, or certified nurse practitioner participating in 5213  
an externship pursuant to an initial certificate to prescribe 5214  
issued under section 4723.48 of the Revised Code, the physician 5215  
responsible for evaluating the externship shall provide the 5216  
state medical board with the name of the nurse. If the 5217  
externship is terminated for any reason, the physician shall 5218  
notify the board. 5219~~

~~(D)~~ A physician or podiatrist shall cooperate with the 5220  
board of nursing in any investigation the board conducts with 5221  
respect to a clinical nurse specialist, certified nurse-midwife, 5222  
or certified nurse practitioner who collaborates with the 5223  
physician or podiatrist or with respect to a certified 5224  
registered nurse anesthetist who practices with the supervision 5225  
of the physician or podiatrist. 5226

**Sec. 4755.48.** (A) No person shall employ fraud or 5227  
deception in applying for or securing a license to practice 5228  
physical therapy or to be a physical therapist assistant. 5229

(B) No person shall practice or in any way imply or claim 5230  
to the public by words, actions, or the use of letters as 5231  
described in division (C) of this section to be able to practice 5232  
physical therapy or to provide physical therapy services, 5233  
including practice as a physical therapist assistant, unless the 5234  
person holds a valid license under sections 4755.40 to 4755.56 5235  
of the Revised Code or except for submission of claims as 5236  
provided in section 4755.56 of the Revised Code. 5237

(C) No person shall use the words or letters, physical 5238  
therapist, physical therapy, physical therapy services, 5239  
physiotherapist, physiotherapy, physiotherapy services, licensed 5240  
physical therapist, P.T., Ph.T., P.T.T., R.P.T., L.P.T., M.P.T., 5241  
D.P.T., M.S.P.T., P.T.A., physical therapy assistant, physical 5242  
therapist assistant, physical therapy technician, licensed 5243  
physical therapist assistant, L.P.T.A., R.P.T.A., or any other 5244  
letters, words, abbreviations, or insignia, indicating or 5245  
implying that the person is a physical therapist or physical 5246  
therapist assistant without a valid license under sections 5247  
4755.40 to 4755.56 of the Revised Code. 5248

(D) No person who practices physical therapy or assists in 5249  
the provision of physical therapy treatments under the 5250  
supervision of a physical therapist shall fail to display the 5251  
person's current license granted under sections 4755.40 to 5252  
4755.56 of the Revised Code in a conspicuous location in the 5253  
place where the person spends the major part of the person's 5254  
time so engaged. 5255

(E) Nothing in sections 4755.40 to 4755.56 of the Revised 5256

Code shall affect or interfere with the performance of the 5257  
duties of any physical therapist or physical therapist assistant 5258  
in active service in the army, navy, coast guard, marine corps, 5259  
air force, public health service, or marine hospital service of 5260  
the United States, while so serving. 5261

(F) Nothing in sections 4755.40 to 4755.56 of the Revised 5262  
Code shall prevent or restrict the activities or services of a 5263  
person pursuing a course of study leading to a degree in 5264  
physical therapy in an accredited or approved educational 5265  
program if the activities or services constitute a part of a 5266  
supervised course of study and the person is designated by a 5267  
title that clearly indicates the person's status as a student. 5268

(G) (1) Subject to division (G) (2) of this section, nothing 5269  
in sections 4755.40 to 4755.56 of the Revised Code shall prevent 5270  
or restrict the activities or services of any person who holds a 5271  
current, unrestricted license to practice physical therapy in 5272  
another state when that person, pursuant to contract or 5273  
employment with an athletic team located in the state in which 5274  
the person holds the license, provides physical therapy to any 5275  
of the following while the team is traveling to or from or 5276  
participating in a sporting event in this state: 5277

(a) A member of the athletic team; 5278

(b) A member of the athletic team's coaching, 5279  
communications, equipment, or sports medicine staff; 5280

(c) A member of a band or cheerleading squad accompanying 5281  
the athletic team; 5282

(d) The athletic team's mascot. 5283

(2) In providing physical therapy pursuant to division (G) 5284  
(1) of this section, the person shall not do either of the 5285

following:	5286
(a) Provide physical therapy at a health care facility;	5287
(b) Provide physical therapy for more than sixty days in a calendar year.	5288 5289
(H) (1) Except as provided in division (H) (2) of this section and subject to division (I) of this section, no person shall practice physical therapy other than on the prescription of, or the referral of a patient by, a person who is licensed in this or another state to do at least one of the following:	5290 5291 5292 5293 5294
(a) Practice medicine and surgery, chiropractic, dentistry, osteopathic medicine and surgery, podiatric medicine and surgery;	5295 5296 5297
(b) Practice as a physician assistant;	5298
(c) Practice nursing as <del>a certified registered nurse anesthetist, clinical nurse specialist, certified nurse midwife, or certified an advanced practice registered nurse practitioner.</del>	5299 5300 5301
(2) The prohibition in division (H) (1) of this section on practicing physical therapy other than on the prescription of, or the referral of a patient by, any of the persons described in that division does not apply if either of the following applies to the person:	5302 5303 5304 5305 5306
(a) The person holds a master's or doctorate degree from a professional physical therapy program that is accredited by a national physical therapy accreditation agency recognized by the United States department of education.	5307 5308 5309 5310
(b) On or before December 31, 2004, the person has completed at least two years of practical experience as a licensed physical therapist.	5311 5312 5313

(I) To be authorized to prescribe physical therapy or 5314  
refer a patient to a physical therapist for physical therapy, a 5315  
person described in division (H) (1) of this section must be in 5316  
good standing with the relevant licensing board in this state or 5317  
the state in which the person is licensed and must act only 5318  
within the person's scope of practice. 5319

(J) In the prosecution of any person for violation of 5320  
division (B) or (C) of this section, it is not necessary to 5321  
allege or prove want of a valid license to practice physical 5322  
therapy or to practice as a physical therapist assistant, but 5323  
such matters shall be a matter of defense to be established by 5324  
the accused. 5325

**Sec. 4755.481.** (A) If a physical therapist evaluates and 5326  
treats a patient without the prescription of, or the referral of 5327  
the patient by, a person described in division (G) (1) of section 5328  
4755.48 of the Revised Code, all of the following apply: 5329

(1) The physical therapist shall, upon consent of the 5330  
patient, inform the relevant person described in division (G) (1) 5331  
of section 4755.48 of the Revised Code of the evaluation not 5332  
later than five business days after the evaluation is made. 5333

(2) If the physical therapist determines, based on 5334  
reasonable evidence, that no substantial progress has been made 5335  
with respect to that patient during the thirty-day period 5336  
immediately following the date of the patient's initial visit 5337  
with the physical therapist, the physical therapist shall 5338  
consult with or refer the patient to a person described in 5339  
division ~~(G)~~ (H) (1) of section 4755.48 of the Revised Code, 5340  
unless either of the following applies: 5341

(a) The evaluation, treatment, or services are being 5342



provided for fitness, wellness, or prevention purposes. 5343

(b) The patient previously was diagnosed with chronic, 5344  
neuromuscular, or developmental conditions and the evaluation, 5345  
treatment, or services are being provided for problems or 5346  
symptoms associated with one or more of those previously 5347  
diagnosed conditions. 5348

(3) If the physical therapist determines that orthotic 5349  
devices are necessary to treat the patient, the physical 5350  
therapist shall be limited to the application of the following 5351  
orthotic devices: 5352

(a) Upper extremity adaptive equipment used to facilitate 5353  
the activities of daily living; 5354

(b) Finger splints; 5355

(c) Wrist splints; 5356

(d) Prefabricated elastic or fabric abdominal supports 5357  
with or without metal or plastic reinforcing stays and other 5358  
prefabricated soft goods requiring minimal fitting; 5359

(e) Nontherapeutic accommodative inlays; 5360

(f) Shoes that are not manufactured or modified for a 5361  
particular individual; 5362

(g) Prefabricated foot care products; 5363

(h) Custom foot orthotics; 5364

(i) Durable medical equipment. 5365

(4) If, at any time, the physical therapist has reason to 5366  
believe that the patient has symptoms or conditions that require 5367  
treatment or services beyond the scope of practice of a physical 5368  
therapist, the physical therapist shall refer the patient to a 5369

licensed health care practitioner acting within the 5370  
practitioner's scope of practice. 5371

(B) Nothing in sections 4755.40 to 4755.56 of the Revised 5372  
Code shall be construed to require reimbursement under any 5373  
health insuring corporation policy, contract, or agreement, any 5374  
sickness and accident insurance policy, the medicaid program, or 5375  
the health partnership program or qualified health plans 5376  
established pursuant to sections 4121.44 to 4121.442 of the 5377  
Revised Code, for any physical therapy service rendered without 5378  
the prescription of, or the referral of the patient by, a person 5379  
described in division (G) (1) of section 4755.48 of the Revised 5380  
Code. 5381

(C) For purposes of this section, "business day" means any 5382  
calendar day that is not a Saturday, Sunday, or legal holiday. 5383  
"Legal holiday" has the same meaning as in section 1.14 of the 5384  
Revised Code. 5385

**Sec. 4761.17.** All of the following apply to the practice 5386  
of respiratory care by a person who holds a license or limited 5387  
permit issued under this chapter: 5388

(A) The person shall practice only pursuant to a 5389  
prescription or other order for respiratory care issued by any 5390  
of the following: 5391

(1) A physician; 5392

(2) A registered clinical nurse specialist, certified 5393  
nurse-midwife, or certified nurse practitioner who holds a 5394  
certificate of authority current, valid license issued under 5395  
Chapter 4723. of the Revised Code to practice ~~as a certified~~ 5396  
~~nurse practitioner or clinical nurse specialist nursing as an~~ 5397  
advanced practice registered nurse and has entered into a 5398

standard care arrangement with a physician ~~that allows the nurse~~ 5399  
 ~~to prescribe or order respiratory care services;~~ 5400

(3) A physician assistant who holds a valid prescriber 5401  
number issued by the state medical board, has been granted 5402  
physician-delegated prescriptive authority, and has entered into 5403  
a supervision agreement that allows the physician assistant to 5404  
prescribe or order respiratory care services. 5405

(B) The person shall practice only under the supervision 5406  
of any of the following: 5407

(1) A physician; 5408

(2) A certified nurse practitioner, certified nurse- 5409  
midwife, or clinical nurse specialist ~~who is authorized to~~ 5410  
~~prescribe or order respiratory care services as provided in~~ 5411  
~~division (A) (2) of this section;~~ 5412

(3) A physician assistant who is authorized to prescribe 5413  
or order respiratory care services as provided in division (A) 5414  
(3) of this section. 5415

(C) (1) When practicing under the prescription or order of 5416  
a certified nurse practitioner, certified nurse midwife, or 5417  
clinical nurse specialist or under the supervision of such a 5418  
nurse, the person's administration of medication that requires a 5419  
prescription is limited to the drugs that the nurse is 5420  
authorized to prescribe pursuant to ~~the nurse's certificate to~~ 5421  
~~prescribe issued under~~ section ~~4723.48~~ 4723.481 of the Revised 5422  
Code. 5423

(2) When practicing under the prescription or order of a 5424  
physician assistant or under the supervision of a physician 5425  
assistant, the person's administration of medication that 5426  
requires a prescription is limited to the drugs that the 5427

physician assistant is authorized to prescribe pursuant to the 5428  
physician assistant's physician-delegated prescriptive 5429  
authority. 5430

**Sec. 5120.55.** (A) As used in this section, "licensed 5431  
health professional" means any or all of the following: 5432

(1) A dentist who holds a current, valid license issued 5433  
under Chapter 4715. of the Revised Code to practice dentistry; 5434

(2) A licensed practical nurse who holds a current, valid 5435  
license issued under Chapter 4723. of the Revised Code that 5436  
authorizes the practice of nursing as a licensed practical 5437  
nurse; 5438

(3) An optometrist who holds a current, valid certificate 5439  
of licensure issued under Chapter 4725. of the Revised Code that 5440  
authorizes the holder to engage in the practice of optometry; 5441

(4) A physician who is authorized under Chapter 4731. of 5442  
the Revised Code to practice medicine and surgery, osteopathic 5443  
medicine and surgery, or podiatric medicine and surgery; 5444

(5) A psychologist who holds a current, valid license 5445  
issued under Chapter 4732. of the Revised Code that authorizes 5446  
the practice of psychology as a licensed psychologist; 5447

(6) A registered nurse who holds a current, valid license 5448  
issued under Chapter 4723. of the Revised Code that authorizes 5449  
the practice of nursing as a registered nurse, including such a 5450  
nurse who is also ~~authorized~~licensed to practice as an advanced 5451  
practice registered nurse as defined in section 4723.01 of the 5452  
Revised Code. 5453

(B) (1) The department of rehabilitation and correction may 5454  
establish a recruitment program under which the department, by 5455

means of a contract entered into under division (C) of this 5456  
section, agrees to repay all or part of the principal and 5457  
interest of a government or other educational loan incurred by a 5458  
licensed health professional who agrees to provide services to 5459  
inmates of correctional institutions under the department's 5460  
administration. 5461

(2) (a) For a physician to be eligible to participate in 5462  
the program, the physician must have attended a school that was, 5463  
during the time of attendance, a medical school or osteopathic 5464  
medical school in this country accredited by the liaison 5465  
committee on medical education or the American osteopathic 5466  
association, a college of podiatry in this country recognized as 5467  
being in good standing under section 4731.53 of the Revised 5468  
Code, or a medical school, osteopathic medical school, or 5469  
college of podiatry located outside this country that was 5470  
acknowledged by the world health organization and verified by a 5471  
member state of that organization as operating within that 5472  
state's jurisdiction. 5473

(b) For a nurse to be eligible to participate in the 5474  
program, the nurse must have attended a school that was, during 5475  
the time of attendance, a nursing school in this country 5476  
accredited by the commission on collegiate nursing education or 5477  
the national league for nursing accrediting commission or a 5478  
nursing school located outside this country that was 5479  
acknowledged by the world health organization and verified by a 5480  
member state of that organization as operating within that 5481  
state's jurisdiction. 5482

(c) For a dentist to be eligible to participate in the 5483  
program, the dentist must have attended a school that was, 5484  
during the time of attendance, a dental college that enabled the 5485

dentist to meet the requirements specified in section 4715.10 of 5486  
the Revised Code to be granted a license to practice dentistry. 5487

(d) For an optometrist to be eligible to participate in 5488  
the program, the optometrist must have attended a school of 5489  
optometry that was, during the time of attendance, approved by 5490  
the state board of optometry. 5491

(e) For a psychologist to be eligible to participate in 5492  
the program, the psychologist must have attended an educational 5493  
institution that, during the time of attendance, maintained a 5494  
specific degree program recognized by the state board of 5495  
psychology as acceptable for fulfilling the requirement of 5496  
division (B) (3) of section 4732.10 of the Revised Code. 5497

(C) The department shall enter into a contract with each 5498  
licensed health professional it recruits under this section. 5499  
Each contract shall include at least the following terms: 5500

(1) The licensed health professional agrees to provide a 5501  
specified scope of medical, osteopathic medical, podiatric, 5502  
optometric, psychological, nursing, or dental services to 5503  
inmates of one or more specified state correctional institutions 5504  
for a specified number of hours per week for a specified number 5505  
of years. 5506

(2) The department agrees to repay all or a specified 5507  
portion of the principal and interest of a government or other 5508  
educational loan taken by the licensed health professional for 5509  
the following expenses to attend, for up to a maximum of four 5510  
years, a school that qualifies the licensed health professional 5511  
to participate in the program: 5512

(a) Tuition; 5513

(b) Other educational expenses for specific purposes, 5514

including fees, books, and laboratory expenses, in amounts 5515  
determined to be reasonable in accordance with rules adopted 5516  
under division (D) of this section; 5517

(c) Room and board, in an amount determined to be 5518  
reasonable in accordance with rules adopted under division (D) 5519  
of this section. 5520

(3) The licensed health professional agrees to pay the 5521  
department a specified amount, which shall be no less than the 5522  
amount already paid by the department pursuant to its agreement, 5523  
as damages if the licensed health professional fails to complete 5524  
the service obligation agreed to or fails to comply with other 5525  
specified terms of the contract. The contract may vary the 5526  
amount of damages based on the portion of the service obligation 5527  
that remains uncompleted. 5528

(4) Other terms agreed upon by the parties. 5529

The licensed health professional's lending institution or 5530  
the Ohio board of regents, may be a party to the contract. The 5531  
contract may include an assignment to the department of the 5532  
licensed health professional's duty to repay the principal and 5533  
interest of the loan. 5534

(D) If the department elects to implement the recruitment 5535  
program, it shall adopt rules in accordance with Chapter 119. of 5536  
the Revised Code that establish all of the following: 5537

(1) Criteria for designating institutions for which 5538  
licensed health professionals will be recruited; 5539

(2) Criteria for selecting licensed health professionals 5540  
for participation in the program; 5541

(3) Criteria for determining the portion of a loan which 5542

the department will agree to repay; 5543

(4) Criteria for determining reasonable amounts of the 5544  
expenses described in divisions (C) (2) (b) and (c) of this 5545  
section; 5546

(5) Procedures for monitoring compliance by a licensed 5547  
health professional with the terms of the contract the licensed 5548  
health professional enters into under this section; 5549

(6) Any other criteria or procedures necessary to 5550  
implement the program. 5551

**Sec. 5164.07.** (A) The medicaid program shall include 5552  
coverage of inpatient care and follow-up care for a mother and 5553  
her newborn as follows: 5554

(1) The medicaid program shall cover a minimum of forty- 5555  
eight hours of inpatient care following a normal vaginal 5556  
delivery and a minimum of ninety-six hours of inpatient care 5557  
following a cesarean delivery. Services covered as inpatient 5558  
care shall include medical, educational, and any other services 5559  
that are consistent with the inpatient care recommended in the 5560  
protocols and guidelines developed by national organizations 5561  
that represent pediatric, obstetric, and nursing professionals. 5562

(2) The medicaid program shall cover a physician-directed 5563  
source of follow-up care or a source of follow-up care directed 5564  
by an advanced practice registered nurse. Services covered as 5565  
follow-up care shall include physical assessment of the mother 5566  
and newborn, parent education, assistance and training in breast 5567  
or bottle feeding, assessment of the home support system, 5568  
performance of any medically necessary and appropriate clinical 5569  
tests, and any other services that are consistent with the 5570  
follow-up care recommended in the protocols and guidelines 5571



developed by national organizations that represent pediatric, 5572  
obstetric, and nursing professionals. The coverage shall apply 5573  
to services provided in a medical setting or through home health 5574  
care visits. The coverage shall apply to a home health care 5575  
visit only if the health care professional who conducts the 5576  
visit is knowledgeable and experienced in maternity and newborn 5577  
care. 5578

When a decision is made in accordance with division (B) of 5579  
this section to discharge a mother or newborn prior to the 5580  
expiration of the applicable number of hours of inpatient care 5581  
required to be covered, the coverage of follow-up care shall 5582  
apply to all follow-up care that is provided within forty-eight 5583  
hours after discharge. When a mother or newborn receives at 5584  
least the number of hours of inpatient care required to be 5585  
covered, the coverage of follow-up care shall apply to follow-up 5586  
care that is determined to be medically necessary by the health 5587  
care professionals responsible for discharging the mother or 5588  
newborn. 5589

(B) Any decision to shorten the length of inpatient stay 5590  
to less than that specified under division (A)(1) of this 5591  
section shall be made by the physician attending the mother or 5592  
newborn, except that if a certified nurse-midwife is attending 5593  
the mother in collaboration with a physician, the decision may 5594  
be made by the certified nurse-midwife. Decisions regarding 5595  
early discharge shall be made only after conferring with the 5596  
mother or a person responsible for the mother or newborn. For 5597  
purposes of this division, a person responsible for the mother 5598  
or newborn may include a parent, guardian, or any other person 5599  
with authority to make medical decisions for the mother or 5600  
newborn. 5601

(C) The department of medicaid, in administering the medicaid program, may not do either of the following:

(1) Terminate the provider agreement of a health care professional or health care facility solely for making recommendations for inpatient or follow-up care for a particular mother or newborn that are consistent with the care required to be covered by this section;

(2) Establish or offer monetary or other financial incentives for the purpose of encouraging a person to decline the inpatient or follow-up care required to be covered by this section.

(D) This section does not do any of the following:

(1) Require the medicaid program to cover inpatient or follow-up care that is not received in accordance with the program's terms pertaining to the health care professionals and facilities from which a medicaid recipient is authorized to receive health care services.

(2) Require a mother or newborn to stay in a hospital or other inpatient setting for a fixed period of time following delivery;

(3) Require a child to be delivered in a hospital or other inpatient setting;

(4) Authorize a certified nurse-midwife to practice beyond the authority to practice nurse-midwifery in accordance with Chapter 4723. of the Revised Code;

(5) Establish minimum standards of medical diagnosis, care, or treatment for inpatient or follow-up care for a mother or newborn. A deviation from the care required to be covered

under this section shall not, on the basis of this section, give 5630  
rise to a medical claim or derivative medical claim, as those 5631  
terms are defined in section 2305.113 of the Revised Code. 5632

**Section 2.** That existing sections 1.64, 1751.67, 2133.211, 5633  
2305.113, 2305.234, 2317.02, 2919.171, 2921.22, 2925.61, 5634  
3701.351, 3701.926, 3719.121, 3727.08, 3923.233, 3923.301, 5635  
3923.63, 3923.64, 4713.02, 4723.01, 4723.02, 4723.03, 4723.06, 5636  
4723.07, 4723.08, 4723.09, 4723.151, 4723.16, 4723.24, 4723.25, 5637  
4723.271, 4723.28, 4723.32, 4723.341, 4723.41, 4723.42, 4723.43, 5638  
4723.431, 4723.432, 4723.44, 4723.46, 4723.47, 4723.48, 5639  
4723.481, 4723.482, 4723.486, 4723.487, 4723.488, 4723.489, 5640  
4723.4810, 4723.491, 4723.492, 4723.50, 4723.71, 4723.88, 5641  
4723.99, 4729.01, 4731.27, 4755.48, 4755.481, 4761.17, 5120.55, 5642  
and 5164.07 and sections 4723.484, 4723.485, and 4723.49 of the 5643  
Revised Code are hereby repealed. 5644

**Section 3.** The General Assembly, applying the principle 5645  
stated in division (B) of section 1.52 of the Revised Code that 5646  
amendments are to be harmonized if reasonably capable of 5647  
simultaneous operation, finds that the following sections, 5648  
presented in this act as composites of the sections as amended 5649  
by the acts indicated, are the resulting versions of the 5650  
sections in effect prior to the effective date of the sections 5651  
as presented in this act: 5652

Section 2305.113 of the Revised Code is presented in this 5653  
act as a composite of the section as amended by Sub. H.B. 290 of 5654  
the 130th General Assembly and Sub. S.B. 110 of the 131st 5655  
General Assembly. 5656

Section 2925.61 of the Revised Code is presented in this 5657  
act as a composite of the section as amended by both Am. Sub. 5658  
H.B. 4 and Sub. S.B. 110 of the 131st General Assembly. 5659

Section 4729.01 of the Revised Code is presented in this 5660  
act as a composite of the section as amended by both Sub. H.B. 5661  
124 and Am. Sub. H.B. 188 of the 131st General Assembly. 5662

Section 4755.48 of the Revised Code is presented in this 5663  
act as a composite of the section as amended by both Am. Sub. 5664  
H.B. 284 and Sub. S.B. 141 of the 129th General Assembly. 5665

**Section 4.** (A) The Board of Nursing may continue to issue 5666  
certificates of authority and certificates to prescribe pursuant 5667  
to Chapter 4723. of the Revised Code for not longer than ninety 5668  
days after the effective date of this act. Thereafter, the Board 5669  
shall issue advanced practice registered nurse licenses in 5670  
accordance with this act. 5671

(B) Certificates of authority and certificates to 5672  
prescribe issued pursuant to division (A) of this section or 5673  
Chapter 4723. of the Revised Code, as that chapter existed 5674  
immediately prior to the effective date of this act, satisfy the 5675  
requirements for advanced practice registered nurse licenses, as 5676  
created by this act. The certificates remain valid until 5677  
December 31, 2016, unless earlier suspended or revoked by the 5678  
Board. 5679

**Section 5.** It is the intent of the General Assembly in 5680  
repealing and reenacting section 4723.49 of the Revised Code to 5681  
abolish the existing Committee on Prescriptive Governance and 5682  
establish a new Committee on Prescriptive Governance. Not later 5683  
than sixty days after the last appointment is made to the new 5684  
Committee on Prescriptive Governance, the Committee shall submit 5685  
recommendations to the Board of Nursing as necessary for the 5686  
Board to fulfill its duty to adopt rules under division (B) (1) 5687  
of section 4723.50 of the Revised Code. The Board shall adopt 5688  
the rules as soon as practicable after receiving the 5689

recommendations.

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