

**As Introduced**

**134th General Assembly  
Regular Session  
2021-2022**

**H. B. No. 496**

**Representative Koehler  
Cosponsors: Representatives Click, Young, T.**



**A BILL**

To amend sections 3701.351, 4723.01, 4723.02, 1  
4723.06, 4723.07, 4723.08, 4723.271, 4723.28, 2  
4723.282, 4723.33, 4723.34, 4723.341, 4723.35, 3  
4723.41, 4723.43, 4723.431, 4723.432, 4723.481, 4  
4723.483, 4723.484, 4723.487, 4723.488, 5  
4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 6  
4731.22, and 4731.27 and to enact sections 7  
4723.53, 4723.54, 4723.55, 4723.551, 4723.56, 8  
4723.57, 4723.58, 4723.581, 4723.582, 4723.583, 9  
4723.584, 4723.59, and 4723.60 of the Revised 10  
Code to regulate the practice of certified 11  
nurse-midwives, certified midwives, and 12  
certified professional midwives and to amend the 13  
versions of sections 3701.351, 4723.431, and 14  
4723.481 of the Revised Code that are scheduled 15  
to take effect on September 30, 2024, to 16  
continue the changes to those sections on and 17  
after that date. 18

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

**Section 1.** That sections 3701.351, 4723.01, 4723.02, 19

4723.06, 4723.07, 4723.08, 4723.271, 4723.28, 4723.282, 4723.33, 20  
4723.34, 4723.341, 4723.35, 4723.41, 4723.43, 4723.431, 21  
4723.432, 4723.481, 4723.483, 4723.484, 4723.487, 4723.488, 22  
4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 4731.22, and 23  
4731.27 be amended and sections 4723.53, 4723.54, 4723.55, 24  
4723.551, 4723.56, 4723.57, 4723.58, 4723.581, 4723.582, 25  
4723.583, 4723.584, 4723.59, and 4723.60 of the Revised Code be 26  
enacted to read as follows: 27

**Sec. 3701.351.** (A) The governing body of every hospital 28  
shall set standards and procedures to be applied by the hospital 29  
and its medical staff in considering and acting upon 30  
applications for staff membership or professional privileges. 31  
These standards and procedures shall be available for public 32  
inspection. 33

(B) The governing body of any hospital, in considering and 34  
acting upon applications for staff membership or professional 35  
privileges within the scope of the applicants' respective 36  
licensures, shall not discriminate against a qualified person 37  
solely on the basis of whether that person is licensed to 38  
practice medicine, osteopathic medicine, or podiatry, is 39  
licensed to practice dentistry or psychology, ~~or~~ is licensed to 40  
practice nursing as an advanced practice registered nurse, or is 41  
licensed to practice as a certified midwife or certified 42  
professional midwife. Staff membership or professional 43  
privileges shall be considered and acted on in accordance with 44  
standards and procedures established under division (A) of this 45  
section. This section does not permit a psychologist to admit a 46  
patient to a hospital in violation of section 3727.06 of the 47  
Revised Code. 48

(C) The governing body of any hospital that is licensed to 49

provide maternity services, in considering and acting upon 50  
applications for clinical privileges, shall not discriminate 51  
against a qualified person solely on the basis that the person 52  
is authorized to practice nurse-midwifery or midwifery. An 53  
application from a certified nurse-midwife or certified midwife 54  
who is not employed by the hospital shall contain the name of a 55  
physician member of the hospital's medical staff who holds 56  
clinical privileges in obstetrics at that hospital and who has 57  
agreed to be the collaborating physician for the applicant in 58  
accordance with section ~~4723.43~~ 4723.431 of the Revised Code. 59

(D) Any person may apply to the court of common pleas for 60  
temporary or permanent injunctions restraining a violation of 61  
division (A), (B), or (C) of this section. This action is an 62  
additional remedy not dependent on the adequacy of the remedy at 63  
law. 64

(E) (1) If a hospital does not provide or permit the 65  
provision of any diagnostic or treatment service for mental or 66  
emotional disorders or any other service that may be legally 67  
performed by a psychologist licensed under Chapter 4732. of the 68  
Revised Code, this section does not require the hospital to 69  
provide or permit the provision of any such service and the 70  
hospital shall be exempt from requirements of this section 71  
pertaining to psychologists. 72

(2) This section does not impair the right of a hospital 73  
to enter into an employment, personal service, or any other kind 74  
of contract with a licensed psychologist, upon any such terms as 75  
the parties may mutually agree, for the provision of any service 76  
that may be legally performed by a licensed psychologist. 77

**Sec. 4723.01.** As used in this chapter: 78

(A) "Registered nurse" means an individual who holds a	79
current, valid license issued under this chapter that authorizes	80
the practice of nursing as a registered nurse.	81
(B) "Practice of nursing as a registered nurse" means	82
providing to individuals and groups nursing care requiring	83
specialized knowledge, judgment, and skill derived from the	84
principles of biological, physical, behavioral, social, and	85
nursing sciences. Such nursing care includes:	86
(1) Identifying patterns of human responses to actual or	87
potential health problems amenable to a nursing regimen;	88
(2) Executing a nursing regimen through the selection,	89
performance, management, and evaluation of nursing actions;	90
(3) Assessing health status for the purpose of providing	91
nursing care;	92
(4) Providing health counseling and health teaching;	93
(5) Administering medications, treatments, and executing	94
regimens authorized by an individual who is authorized to	95
practice in this state and is acting within the course of the	96
individual's professional practice;	97
(6) Teaching, administering, supervising, delegating, and	98
evaluating nursing practice.	99
(C) "Nursing regimen" may include preventative,	100
restorative, and health-promotion activities.	101
(D) "Assessing health status" means the collection of data	102
through nursing assessment techniques, which may include	103
interviews, observation, and physical evaluations for the	104
purpose of providing nursing care.	105

(E) "Licensed practical nurse" means an individual who 106  
holds a current, valid license issued under this chapter that 107  
authorizes the practice of nursing as a licensed practical 108  
nurse. 109

(F) "The practice of nursing as a licensed practical 110  
nurse" means providing to individuals and groups nursing care 111  
requiring the application of basic knowledge of the biological, 112  
physical, behavioral, social, and nursing sciences at the 113  
direction of a registered nurse or any of the following who is 114  
authorized to practice in this state: a physician, physician 115  
assistant, dentist, podiatrist, optometrist, or chiropractor. 116  
Such nursing care includes: 117

(1) Observation, patient teaching, and care in a diversity 118  
of health care settings; 119

(2) Contributions to the planning, implementation, and 120  
evaluation of nursing; 121

(3) Administration of medications and treatments 122  
authorized by an individual who is authorized to practice in 123  
this state and is acting within the course of the individual's 124  
professional practice on the condition that the licensed 125  
practical nurse is authorized under section 4723.17 of the 126  
Revised Code to administer medications; 127

(4) Administration to an adult of intravenous therapy 128  
authorized by an individual who is authorized to practice in 129  
this state and is acting within the course of the individual's 130  
professional practice, on the condition that the licensed 131  
practical nurse is authorized under section 4723.18 or 4723.181 132  
of the Revised Code to perform intravenous therapy and performs 133  
intravenous therapy only in accordance with those sections; 134

(5) Delegation of nursing tasks as directed by a registered nurse;	135 136
(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.	137 138 139 140
(G) "Certified registered nurse anesthetist" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a certified registered nurse anesthetist in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing.	141 142 143 144 145 146
(H) "Clinical nurse specialist" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a clinical nurse specialist in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing.	147 148 149 150 151
(I) "Certified nurse-midwife" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a certified nurse-midwife in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing. <u>A certified nurse-midwife does not include a certified midwife or certified professional midwife.</u>	152 153 154 155 156 157 158
(J) "Certified nurse practitioner" means an advanced practice registered nurse who holds a current, valid license issued under this chapter and is designated as a certified nurse practitioner in accordance with section 4723.42 of the Revised Code and rules adopted by the board of nursing.	159 160 161 162 163

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

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

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

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

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

(N) "Standard care arrangement" means a written, formal	194
guide for planning and evaluating a patient's health care that	195
is developed by one or more collaborating physicians or	196
podiatrists and a clinical nurse specialist, certified nurse-	197
midwife, <u>certified midwife,</u> or certified nurse practitioner and	198
meets the requirements of section 4723.431 of the Revised Code.	199
(O) "Advanced practice registered nurse" means an	200
individual who holds a current, valid license issued under this	201
chapter that authorizes the practice of nursing as an advanced	202
practice registered nurse and is designated as any of the	203
following:	204
(1) A certified registered nurse anesthetist;	205
(2) A clinical nurse specialist;	206
(3) A certified nurse-midwife;	207
(4) A certified nurse practitioner.	208
(P) "Practice of nursing as an advanced practice	209
registered nurse" means providing to individuals and groups	210
nursing care that requires knowledge and skill obtained from	211
advanced formal education, training, and clinical experience.	212
Such nursing care includes <u>the care described in</u> section 4723.43	213
of the Revised Code.	214
(Q) "Dialysis care" means the care and procedures that a	215
dialysis technician or dialysis technician intern is authorized	216
to provide and perform, as specified in section 4723.72 of the	217
Revised Code.	218
(R) "Dialysis technician" means an individual who holds a	219
current, valid certificate to practice as a dialysis technician	220
issued under section 4723.75 of the Revised Code.	221



(S) "Dialysis technician intern" means an individual who 222  
holds a current, valid certificate to practice as a dialysis 223  
technician intern issued under section 4723.75 of the Revised 224  
Code. 225

(T) "Certified community health worker" means an 226  
individual who holds a current, valid certificate as a community 227  
health worker issued under section 4723.85 of the Revised Code. 228

(U) "Medication aide" means an individual who holds a 229  
current, valid certificate issued under this chapter that 230  
authorizes the individual to administer medication in accordance 231  
with section 4723.67 of the Revised Code; 232

(V) "Nursing specialty" means a specialty in practice as a 233  
certified registered nurse anesthetist, clinical nurse 234  
specialist, certified nurse-midwife, or certified nurse 235  
practitioner. 236

(W) "Certified midwife" means an individual who is 237  
licensed under section 4723.56 of the Revised Code and engages 238  
in one or more of the activities described in division (A) of 239  
section 4723.57 of the Revised Code. A certified midwife does 240  
not include a certified nurse-midwife. 241

(X) "Certified professional midwife" means an individual 242  
who is licensed under section 4723.56 of the Revised Code and 243  
engages in one or more of the activities described in division 244  
(B) of section 4723.57 of the Revised Code. A certified 245  
professional midwife does not include a certified nurse-midwife. 246

**Sec. 4723.02.** The board of nursing shall assume and 247  
exercise all the powers and perform all the duties conferred and 248  
imposed on it by this chapter. 249

The board shall consist of ~~thirteen~~ fifteen members who 250

shall be citizens of the United States and residents of Ohio. 251

Eight members shall be registered nurses, each of whom shall be 252

a graduate of an approved program of nursing education that 253

prepares persons for licensure as a registered nurse, shall hold 254

a currently active license issued under this chapter to practice 255

nursing as a registered nurse, and shall have been actively 256

engaged in the practice of nursing as a registered nurse for the 257

five years immediately preceding the member's initial 258

appointment to the board. Of the eight members who are 259

registered nurses, at least two shall hold a current, valid 260

license issued under this chapter that authorizes the practice 261

of nursing as an advanced practice registered nurse. Four 262

members shall be licensed practical nurses, each of whom shall 263

be a graduate of an approved program of nursing education that 264

prepares persons for licensure as a practical nurse, shall hold 265

a currently active license issued under this chapter to practice 266

nursing as a licensed practical nurse, and shall have been 267

actively engaged in the practice of nursing as a licensed 268

practical nurse for the five years immediately preceding the 269

member's initial appointment to the board. Two members shall be 270

a certified nurse-midwife, certified midwife, or certified 271

professional midwife, with one practicing in an urban setting 272

and the other practicing in a rural setting. One member shall 273

represent the interests of consumers of health care. Neither 274

this member nor any person in the member's immediate family 275

shall be a member of or associated with a health care provider 276

or profession or shall have a financial interest in the delivery 277

or financing of health care. Representation of nursing service 278

and nursing education and of the various geographical areas of 279

the state shall be considered in making appointments. 280

As the term of any member of the board expires, a 281

successor shall be appointed who has the qualifications the 282  
vacancy requires. Terms of office shall be for four years, 283  
commencing on the first day of January and ending on the thirty- 284  
first day of December. 285

A current or former board member who has served not more 286  
than one full term or one full term and not more than thirty 287  
months of another term may be reappointed for one additional 288  
term. 289

Each member shall hold office from the date of appointment 290  
until the end of the term for which the member was appointed. 291  
The term of a member shall expire if the member ceases to meet 292  
any requirement of this section for the member's position on the 293  
board. Any member appointed to fill a vacancy occurring prior to 294  
the expiration of the term for which the member's predecessor 295  
was appointed shall hold office for the remainder of such term. 296  
Any member shall continue in office subsequent to the expiration 297  
date of the member's term until the member's successor takes 298  
office, or until a period of sixty days has elapsed, whichever 299  
occurs first. 300

Nursing organizations of this state may each submit to the 301  
governor the names of not more than five nominees for each 302  
position to be filled on the board. From the names so submitted 303  
or from others, at the governor's discretion, the governor with 304  
the advice and consent of the senate shall make such 305  
appointments. 306

Any member of the board may be removed by the governor for 307  
neglect of any duty required by law or for incompetency or 308  
unprofessional or dishonorable conduct, after a hearing as 309  
provided in Chapter 119. of the Revised Code. 310

~~Seven~~Eight members of the board, including at least four 311  
registered nurses and at least one licensed practical nurse, 312  
shall at all times constitute a quorum. 313

Each member of the board shall receive an amount fixed 314  
pursuant to division (J) of section 124.15 of the Revised Code 315  
for each day in attendance at board meetings and in discharge of 316  
official duties, and in addition thereto, necessary expense 317  
incurred in the performance of such duties. 318

The board shall elect one of its nurse members as 319  
president and one as vice-president. The board shall elect one 320  
of its registered nurse members to serve as the supervising 321  
member for disciplinary matters. 322

The board may establish advisory groups to serve in 323  
consultation with the board or the executive director. Each 324  
advisory group shall be given a specific charge in writing and 325  
shall report to the board. Members of advisory groups shall 326  
serve without compensation but shall receive their actual and 327  
necessary expenses incurred in the performance of their official 328  
duties. 329

**Sec. 4723.06.** (A) The board of nursing shall: 330

(1) Administer and enforce the provisions of this chapter, 331  
including the taking of disciplinary action for violations of 332  
section 4723.28 of the Revised Code, any other provisions of 333  
this chapter, or rules adopted under this chapter; 334

(2) Develop criteria that an applicant must meet to be 335  
eligible to sit for the examination for licensure to practice as 336  
a registered nurse or as a licensed practical nurse; 337

(3) Issue and renew nursing licenses, midwifery licenses, 338  
dialysis technician certificates, medication aide certificates, 339

and community health worker certificates, as provided in this 340  
chapter; 341

(4) Define the minimum educational standards for the 342  
schools and programs of registered nursing and practical nursing 343  
in this state; 344

(5) Survey, inspect, and grant full approval to 345  
prelicensure nursing education programs in this state that meet 346  
the standards established by rules adopted under section 4723.07 347  
of the Revised Code. Prelicensure nursing education programs 348  
include, but are not limited to, diploma, associate degree, 349  
baccalaureate degree, master's degree, and doctor of nursing 350  
programs leading to initial licensure to practice nursing as a 351  
registered nurse and practical nurse programs leading to initial 352  
licensure to practice nursing as a licensed practical nurse. 353

(6) Grant conditional approval, by a vote of a quorum of 354  
the board, to a new prelicensure nursing education program or a 355  
program that is being reestablished after having ceased to 356  
operate, if the program meets and maintains the minimum 357  
standards of the board established by rules adopted under 358  
section 4723.07 of the Revised Code. If the board does not grant 359  
conditional approval, it shall hold an adjudication under 360  
Chapter 119. of the Revised Code to consider conditional 361  
approval of the program. If the board grants conditional 362  
approval, at the first meeting following completion of the 363  
survey process required by division (A) (5) of this section, the 364  
board shall determine whether to grant full approval to the 365  
program. If the board does not grant full approval or if it 366  
appears that the program has failed to meet and maintain 367  
standards established by rules adopted under section 4723.07 of 368  
the Revised Code, the board shall hold an adjudication under 369

Chapter 119. of the Revised Code to consider the program. Based 370  
on results of the adjudication, the board may continue or 371  
withdraw conditional approval, or grant full approval. 372

(7) Place on provisional approval, for a period of time 373  
specified by the board, a prelicensure nursing education program 374  
that has ceased to meet and maintain the minimum standards of 375  
the board established by rules adopted under section 4723.07 of 376  
the Revised Code. Prior to or at the end of the period, the 377  
board shall reconsider whether the program meets the standards 378  
and shall grant full approval if it does. If it does not, the 379  
board may withdraw approval, pursuant to an adjudication under 380  
Chapter 119. of the Revised Code. 381

(8) Approve continuing education programs and courses 382  
under standards established in rules adopted under sections 383  
4723.07, 4723.69, 4723.79, and 4723.88 of the Revised Code; 384

(9) Establish a substance use disorder monitoring program 385  
in accordance with section 4723.35 of the Revised Code; 386

(10) Establish the practice intervention and improvement 387  
program in accordance with section 4723.282 of the Revised Code; 388

(11) Grant approval to the course of study in advanced 389  
pharmacology and related topics described in section 4723.482 or 390  
4723.551 of the Revised Code; 391

(12) Make an annual edition of the exclusionary formulary 392  
established in rules adopted under section 4723.50 of the 393  
Revised Code available to the public by electronic means and, as 394  
soon as possible after any revision of the formulary becomes 395  
effective, make the revision available to the public by 396  
electronic means; 397

(13) Approve under section 4723.46 of the Revised Code 398

national certifying organizations for examination and licensure	399
of advanced practice registered nurses, which may include	400
separate organizations for each nursing specialty;	401
(14) Provide guidance and make recommendations to the	402
general assembly, the governor, state agencies, and the federal	403
government with respect to the regulation of the practice of	404
nursing and the enforcement of this chapter;	405
(15) Make an annual report to the governor, which shall be	406
open for public inspection;	407
(16) Maintain and have open for public inspection the	408
following records:	409
(a) A record of all its meetings and proceedings;	410
(b) A record of all applicants for, and holders of,	411
licenses and certificates issued by the board under this chapter	412
or in accordance with rules adopted under this chapter. The	413
record shall be maintained in a format determined by the board.	414
(c) A list of education and training programs approved by	415
the board.	416
(17) Deny conditional approval to a new prelicensure	417
nursing education program or a program that is being	418
reestablished after having ceased to operate if the program or a	419
person acting on behalf of the program submits or causes to be	420
submitted to the board false, misleading, or deceptive	421
statements, information, or documentation in the process of	422
applying for approval of the program. If the board proposes to	423
deny approval of the program, it shall do so pursuant to an	424
adjudication conducted under Chapter 119. of the Revised Code.	425
(B) The board may fulfill the requirement of division (A)	426

(8) of this section by authorizing persons who meet the 427  
standards established in rules adopted under section 4723.07 of 428  
the Revised Code to approve continuing education programs and 429  
courses. Persons so authorized shall approve continuing 430  
education programs and courses in accordance with standards 431  
established in rules adopted under section 4723.07 of the 432  
Revised Code. 433

Persons seeking authorization to approve continuing 434  
education programs and courses shall apply to the board and pay 435  
the appropriate fee established under section 4723.08 of the 436  
Revised Code. Authorizations to approve continuing education 437  
programs and courses shall expire and may be renewed according 438  
to the schedule established in rules adopted under section 439  
4723.07 of the Revised Code. 440

In addition to approving continuing education programs 441  
under division (A) (8) of this section, the board may sponsor 442  
continuing education activities that are directly related to the 443  
statutes and rules the board enforces. 444

(C) (1) The board may deny conditional approval to a new 445  
prelicensure nursing education program or program that is being 446  
reestablished after having ceased to operate if the program is 447  
controlled by a person who controls or has controlled a program 448  
that had its approval withdrawn, revoked, suspended, or 449  
restricted by the board or a board of another jurisdiction that 450  
is a member of the national council of state boards of nursing. 451  
If the board proposes to deny approval, it shall do so pursuant 452  
to an adjudication conducted under Chapter 119. of the Revised 453  
Code. 454

(2) As used in this division, "control" means any of the 455  
following: 456



(a) Holding fifty per cent or more of the outstanding 457  
voting securities or membership interest of a prelicensure 458  
nursing education program; 459

(b) In the case of an unincorporated prelicensure nursing 460  
education program, having the right to fifty per cent or more of 461  
the program's profits or in the event of a dissolution, fifty 462  
per cent or more of the program's assets; 463

(c) In the case of a prelicensure nursing education 464  
program that is a for-profit or not-for-profit corporation, 465  
having the contractual authority presently to designate fifty 466  
per cent or more of its directors; 467

(d) In the case of a prelicensure nursing education 468  
program that is a trust, having the contractual authority 469  
presently to designate fifty per cent or more of its trustees; 470

(e) Having the authority to direct the management, 471  
policies, or investments of a prelicensure nursing education 472  
program. 473

(D) (1) When an action taken by the board under division 474  
(A) (6), (7), or (17) or (C) (1) of this section is required to be 475  
taken pursuant to an adjudication conducted under Chapter 119. 476  
of the Revised Code, the board may, in lieu of an adjudication 477  
hearing, enter into a consent agreement to resolve the matter. A 478  
consent agreement, when ratified by a vote of a quorum of the 479  
board, constitutes the findings and order of the board with 480  
respect to the matter addressed in the agreement. If the board 481  
refuses to ratify a consent agreement, the admissions and 482  
findings contained in the agreement are of no effect. 483

(2) In any instance in which the board is required under 484  
Chapter 119. of the Revised Code to give notice to a person 485

seeking approval of a prelicensure nursing education program of 486  
an opportunity for a hearing and the person does not make a 487  
timely request for a hearing in accordance with section 119.07 488  
of the Revised Code, the board is not required to hold a 489  
hearing, but may adopt, by a vote of a quorum, a final order 490  
that contains the board's findings. 491

(3) When the board denies or withdraws approval of a 492  
prelicensure nursing education program, the board may specify 493  
that its action is permanent. A program subject to a permanent 494  
action taken by the board is forever ineligible for approval and 495  
the board shall not accept an application for the program's 496  
reinstatement or approval. 497

**Sec. 4723.07.** In accordance with Chapter 119. of the 498  
Revised Code, the board of nursing shall adopt and may amend and 499  
rescind rules that establish all of the following: 500

(A) Provisions for the board's government and control of 501  
its actions and business affairs; 502

(B) Minimum standards for nursing education programs that 503  
prepare graduates to be licensed under this chapter and 504  
procedures for granting, renewing, and withdrawing approval of 505  
those programs; 506

(C) Criteria that applicants for licensure must meet to be 507  
eligible to take examinations for licensure; 508

(D) Standards and procedures for renewal of the licenses 509  
and certificates issued by the board; 510

(E) Standards for approval of continuing nursing education 511  
programs and courses for registered nurses, advanced practice 512  
registered nurses, and licensed practical nurses. The standards 513  
may provide for approval of continuing nursing education 514

programs and courses that have been approved by other state 515  
boards of nursing or by national accreditation systems for 516  
nursing, including, but not limited to, the American nurses' 517  
credentialing center and the national association for practical 518  
nurse education and service. 519

(F) Standards that persons must meet to be authorized by 520  
the board to approve continuing education programs and courses 521  
and a schedule by which that authorization expires and may be 522  
renewed; 523

(G) Requirements, including continuing education 524  
requirements, for reactivating inactive licenses or 525  
certificates, and for reinstating licenses or certificates that 526  
have lapsed; 527

(H) Conditions that may be imposed for reinstatement of a 528  
license or certificate following action taken under section 529  
3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised 530  
Code resulting in a license or certificate suspension; 531

(I) Requirements for board approval of courses in 532  
medication administration by licensed practical nurses; 533

(J) Criteria for evaluating the qualifications of an 534  
applicant for a license to practice nursing as a registered 535  
nurse, a license to practice nursing as an advanced practice 536  
registered nurse, or a license to practice nursing as a licensed 537  
practical nurse for the purpose of issuing the license by the 538  
board's endorsement of the applicant's authority to practice 539  
issued by the licensing agency of another state; 540

(K) Universal and standard precautions that shall be used 541  
by each licensee or certificate holder. The rules shall define 542  
and establish requirements for universal and standard 543

precautions that include the following:	544
(1) Appropriate use of hand washing;	545
(2) Disinfection and sterilization of equipment;	546
(3) Handling and disposal of needles and other sharp instruments;	547 548
(4) Wearing and disposal of gloves and other protective garments and devices.	549 550
(L) Quality assurance standards for advanced practice registered nurses;	551 552
(M) Additional criteria for the standard care arrangement required by section 4723.431 of the Revised Code entered into by a <u>certified midwife</u> , clinical nurse specialist, certified nurse- midwife, or certified nurse practitioner and the nurse's collaborating physician or podiatrist;	553 554 555 556 557
(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;	558 559 560 561
(O) Standards and procedures for delegation under section 4723.48 of the Revised Code of the authority to administer drugs.	562 563 564
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.	565 566 567
<b>Sec. 4723.08.</b> (A) The board of nursing may impose fees not to exceed the following limits:	568 569
(1) For application for licensure by examination or	570

endorsement to practice nursing as a registered nurse or as a licensed practical nurse, seventy-five dollars;	571 572
(2) For application for licensure to practice nursing as an advanced practice registered nurse, one hundred fifty dollars;	573 574 575
(3) For application for a dialysis technician intern certificate, the amount specified in rules adopted under section 4723.79 of the Revised Code;	576 577 578
(4) For application for a dialysis technician certificate, the amount specified in rules adopted under section 4723.79 of the Revised Code;	579 580 581
(5) For providing, pursuant to division (B) of section 4723.271 of the Revised Code, written verification of a nursing license, dialysis technician certificate, medication aide certificate, or community health worker certificate to another jurisdiction, fifteen dollars;	582 583 584 585 586
(6) For providing, pursuant to division (A) of section 4723.271 of the Revised Code, a replacement copy of a wall certificate suitable for framing as described in that division, twenty-five dollars;	587 588 589 590
(7) For renewal of a license to practice as a registered nurse or licensed practical nurse, sixty-five dollars;	591 592
(8) For renewal of a license to practice as an advanced practice registered nurse, one hundred thirty-five dollars;	593 594
(9) For renewal of a dialysis technician certificate, the amount specified in rules adopted under section 4723.79 of the Revised Code;	595 596 597
(10) For processing a late application for renewal of a	598

nursing license or dialysis technician certificate, fifty	599
dollars;	600
(11) For application for authorization to approve	601
continuing education programs and courses from an applicant	602
accredited by a national accreditation system for nursing, five	603
hundred dollars;	604
(12) For application for authorization to approve	605
continuing education programs and courses from an applicant not	606
accredited by a national accreditation system for nursing, one	607
thousand dollars;	608
(13) For each year for which authorization to approve	609
continuing education programs and courses is renewed, one	610
hundred fifty dollars;	611
(14) For application for approval to operate a dialysis	612
training program, the amount specified in rules adopted under	613
section 4723.79 of the Revised Code;	614
(15) For reinstatement of a lapsed license or certificate	615
issued under this chapter, one hundred dollars except as	616
provided in section 5903.10 of the Revised Code;	617
(16) For processing a check returned to the board by a	618
financial institution, twenty-five dollars;	619
(17) The amounts specified in rules adopted under section	620
4723.88 of the Revised Code pertaining to the issuance of	621
certificates to community health workers, including fees for	622
application for a certificate, renewal of a certificate,	623
processing a late application for renewal of a certificate,	624
reinstatement of a lapsed certificate, application for approval	625
of a community health worker training program for community	626
health workers, and renewal of the approval of a training	627

program for community health workers; 628

(18) For application for licensure to practice as a 629  
certified midwife or certified professional midwife, forty-five 630  
dollars; 631

(19) For renewal of a license to practice as a certified 632  
midwife or certified professional midwife, twenty dollars. 633

(B) Each quarter, for purposes of transferring funds under 634  
section 4743.05 of the Revised Code to the nurse education 635  
assistance fund created in section 3333.28 of the Revised Code, 636  
the board of nursing shall certify to the director of budget and 637  
management the number of licenses renewed under this chapter 638  
during the preceding quarter and the amount equal to that number 639  
times five dollars. 640

(C) The board may charge a participant in a board- 641  
sponsored continuing education activity an amount not exceeding 642  
fifteen dollars for each activity. 643

(D) The board may contract for services pertaining to the 644  
process of providing written verification of a license or 645  
certificate when the verification is performed for purposes 646  
other than providing verification to another jurisdiction. The 647  
contract may include provisions pertaining to the collection of 648  
the fee charged for providing the written verification. As part 649  
of these provisions, the board may permit the contractor to 650  
retain a portion of the fees as compensation, before any amounts 651  
are deposited into the state treasury. 652

**Sec. 4723.271.** (A) Upon request of the holder of a nursing 653  
license, midwifery license, dialysis technician certificate, 654  
medication aide certificate, or community health worker 655  
certificate issued under this chapter, the presentment of proper 656

identification as prescribed in rules adopted by the board of 657  
nursing, and payment of the fee authorized under section 4723.08 658  
of the Revised Code, the board of nursing shall provide to the 659  
requestor a replacement copy of a wall certificate suitable for 660  
framing. 661

(B) Upon request of the holder of a nursing license, 662  
midwifery license, volunteer's certificate, dialysis technician 663  
certificate, medication aide certificate, or community health 664  
worker certificate issued under this chapter and payment of the 665  
fee authorized under section 4723.08 of the Revised Code, the 666  
board shall verify to an agency of another jurisdiction or 667  
foreign country the fact that the person holds such nursing 668  
license, midwifery license, volunteer's certificate, dialysis 669  
technician certificate, medication aide certificate, or 670  
community health worker certificate. 671

**Sec. 4723.28.** (A) The board of nursing, by a vote of a 672  
quorum, may impose one or more of the following sanctions if it 673  
finds that a person committed fraud in passing an examination 674  
required to obtain a license or dialysis technician certificate 675  
issued by the board or to have committed fraud, 676  
misrepresentation, or deception in applying for or securing any 677  
nursing license, midwifery license, or dialysis technician 678  
certificate issued by the board: deny, revoke, suspend, or place 679  
restrictions on any nursing license, midwifery license, or 680  
dialysis technician certificate issued by the board; reprimand 681  
or otherwise discipline a holder of a nursing license, midwifery 682  
license, or dialysis technician certificate; or impose a fine of 683  
not more than five hundred dollars per violation. 684

(B) Except as provided in section 4723.092 of the Revised 685  
Code, the board of nursing, by a vote of a quorum, may impose 686



one or more of the following sanctions: deny, revoke, suspend, 687  
or place restrictions on any nursing license, midwifery license, 688  
or dialysis technician certificate issued by the board; 689  
reprimand or otherwise discipline a holder of a nursing license,  690  
midwifery license, or dialysis technician certificate; or impose 691  
a fine of not more than five hundred dollars per violation. The 692  
sanctions may be imposed for any of the following: 693

(1) Denial, revocation, suspension, or restriction of 694  
authority to engage in a licensed profession or practice a 695  
health care occupation, including nursing, midwifery, or 696  
practice as a dialysis technician, for any reason other than a 697  
failure to renew, in Ohio or another state or jurisdiction; 698

(2) Engaging in the practice of nursing or midwifery or 699  
engaging in practice as a dialysis technician, having failed to 700  
renew a nursing license, midwifery license, or dialysis 701  
technician certificate issued under this chapter, or while a 702  
nursing license, midwifery license, or dialysis technician 703  
certificate is under suspension; 704

(3) Conviction of, a plea of guilty to, a judicial finding 705  
of guilt of, a judicial finding of guilt resulting from a plea 706  
of no contest to, or a judicial finding of eligibility for a 707  
pretrial diversion or similar program or for intervention in 708  
lieu of conviction for, a misdemeanor committed in the course of 709  
practice; 710

(4) Conviction of, a plea of guilty to, a judicial finding 711  
of guilt of, a judicial finding of guilt resulting from a plea 712  
of no contest to, or a judicial finding of eligibility for a 713  
pretrial diversion or similar program or for intervention in 714  
lieu of conviction for, any felony or of any crime involving 715  
gross immorality or moral turpitude; 716

(5) Selling, giving away, or administering drugs or 717  
therapeutic devices for other than legal and legitimate 718  
therapeutic purposes; or conviction of, a plea of guilty to, a 719  
judicial finding of guilt of, a judicial finding of guilt 720  
resulting from a plea of no contest to, or a judicial finding of 721  
eligibility for a pretrial diversion or similar program or for 722  
intervention in lieu of conviction for, violating any municipal, 723  
state, county, or federal drug law; 724

(6) Conviction of, a plea of guilty to, a judicial finding 725  
of guilt of, a judicial finding of guilt resulting from a plea 726  
of no contest to, or a judicial finding of eligibility for a 727  
pretrial diversion or similar program or for intervention in 728  
lieu of conviction for, an act in another jurisdiction that 729  
would constitute a felony or a crime of moral turpitude in Ohio; 730

(7) Conviction of, a plea of guilty to, a judicial finding 731  
of guilt of, a judicial finding of guilt resulting from a plea 732  
of no contest to, or a judicial finding of eligibility for a 733  
pretrial diversion or similar program or for intervention in 734  
lieu of conviction for, an act in the course of practice in 735  
another jurisdiction that would constitute a misdemeanor in 736  
Ohio; 737

(8) Self-administering or otherwise taking into the body 738  
any dangerous drug, as defined in section 4729.01 of the Revised 739  
Code, in any way that is not in accordance with a legal, valid 740  
prescription issued for that individual, or self-administering 741  
or otherwise taking into the body any drug that is a schedule I 742  
controlled substance; 743

(9) Habitual or excessive use of controlled substances, 744  
other habit-forming drugs, or alcohol or other chemical 745  
substances to an extent that impairs the individual's ability to 746

provide safe nursing care, <u>safe midwifery care</u> , or safe dialysis care;	747 748
(10) Impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care, <u>safe midwifery care</u> , or safe dialysis care because of the use of drugs, alcohol, or other chemical substances;	749 750 751 752
(11) Impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care, <u>safe midwifery care</u> , or safe dialysis care because of a physical or mental disability;	753 754 755 756
(12) Assaulting or causing harm to a patient or depriving a patient of the means to summon assistance;	757 758
(13) Misappropriation or attempted misappropriation of money or anything of value in the course of practice;	759 760
(14) Adjudication by a probate court of being mentally ill or mentally incompetent. The board may reinstate the person's nursing license, <u>midwifery license</u> , or dialysis technician certificate upon adjudication by a probate court of the person's restoration to competency or upon submission to the board of other proof of competency.	761 762 763 764 765 766
(15) The suspension or termination of employment by the United States department of defense or department of veterans affairs for any act that violates or would violate this chapter;	767 768 769
(16) Violation of this chapter or any rules adopted under it;	770 771
(17) Violation of any restrictions placed by the board on a nursing license, <u>midwifery license</u> , or dialysis technician certificate;	772 773 774

(18) Failure to use universal and standard precautions established by rules adopted under section 4723.07 of the Revised Code;	775 776 777
(19) Failure to practice in accordance with acceptable and prevailing standards of safe nursing care, <u>safe midwifery care,</u> or safe dialysis care;	778 779 780
(20) In the case of a registered nurse, engaging in activities that exceed the practice of nursing as a registered nurse;	781 782 783
(21) In the case of a licensed practical nurse, engaging in activities that exceed the practice of nursing as a licensed practical nurse;	784 785 786
(22) In the case of a dialysis technician, engaging in activities that exceed those permitted under section 4723.72 of the Revised Code;	787 788 789
(23) Aiding and abetting a person in that person's practice of nursing <u>or midwifery</u> without a license or practice as a dialysis technician without a certificate issued under this chapter;	790 791 792 793
(24) In the case of an advanced practice registered nurse, except as provided in division (M) of this section, either of the following:	794 795 796
(a) Waiving the payment of all or any part of a deductible or copayment that a patient, pursuant to a health insurance or health care policy, contract, or plan that covers such nursing services, would otherwise be required to pay if the waiver is used as an enticement to a patient or group of patients to receive health care services from that provider;	797 798 799 800 801 802

(b) Advertising that the nurse will waive the payment of 803  
all or any part of a deductible or copayment that a patient, 804  
pursuant to a health insurance or health care policy, contract, 805  
or plan that covers such nursing services, would otherwise be 806  
required to pay. 807

(25) Failure to comply with the terms and conditions of 808  
participation in the substance use disorder monitoring program 809  
established under section 4723.35 of the Revised Code; 810

(26) Failure to comply with the terms and conditions 811  
required under the practice intervention and improvement program 812  
established under section 4723.282 of the Revised Code; 813

(27) In the case of an advanced practice registered nurse: 814

(a) Engaging in activities that exceed those permitted for 815  
the nurse's nursing specialty under section 4723.43 of the 816  
Revised Code; 817

(b) Failure to meet the quality assurance standards 818  
established under section 4723.07 of the Revised Code. 819

(28) In the case of an advanced practice registered nurse 820  
other than a certified registered nurse anesthetist, failure to 821  
maintain a standard care arrangement in accordance with section 822  
4723.431 of the Revised Code or to practice in accordance with 823  
the standard care arrangement; 824

(29) In the case of an advanced practice registered nurse 825  
who is designated as a clinical nurse specialist, certified 826  
nurse-midwife, or certified nurse practitioner, failure to 827  
prescribe drugs and therapeutic devices in accordance with 828  
section 4723.481 of the Revised Code; 829

(30) Prescribing any drug or device to perform or induce 830

an abortion, or otherwise performing or inducing an abortion;	831
(31) Failure to establish and maintain professional	832
boundaries with a patient, as specified in rules adopted under	833
section 4723.07 of the Revised Code;	834
(32) Regardless of whether the contact or verbal behavior	835
is consensual, engaging with a patient other than the spouse of	836
the registered nurse, licensed practical nurse, <u>midwife</u> , or	837
dialysis technician in any of the following:	838
(a) Sexual contact, as defined in section 2907.01 of the	839
Revised Code;	840
(b) Verbal behavior that is sexually demeaning to the	841
patient or may be reasonably interpreted by the patient as	842
sexually demeaning.	843
(33) Assisting suicide, as defined in section 3795.01 of	844
the Revised Code;	845
(34) Failure to comply with the requirements in section	846
3719.061 of the Revised Code before issuing for a minor a	847
prescription for an opioid analgesic, as defined in section	848
3719.01 of the Revised Code;	849
(35) Failure to comply with section 4723.487 of the	850
Revised Code, unless the state board of pharmacy no longer	851
maintains a drug database pursuant to section 4729.75 of the	852
Revised Code;	853
(36) The revocation, suspension, restriction, reduction,	854
or termination of clinical privileges by the United States	855
department of defense or department of veterans affairs or the	856
termination or suspension of a certificate of registration to	857
prescribe drugs by the drug enforcement administration of the	858

United States department of justice; 859

(37) In the case of an advanced practice registered nurse 860  
who is designated as a clinical nurse specialist, certified 861  
nurse-midwife, or certified nurse practitioner, failure to 862  
comply with the terms of a consult agreement entered into with a 863  
pharmacist pursuant to section 4729.39 of the Revised Code; 864

(38) In the case of a certified midwife: 865

(a) Engaging in activities that exceed those permitted 866  
under division (A) of section 4723.57 of the Revised Code; 867

(b) Failure to prescribe drugs and therapeutic devices in 868  
accordance with section 4723.481 of the Revised Code; 869

(c) Failure to maintain a standard care arrangement in 870  
accordance with section 4723.431 of the Revised Code or to 871  
practice in accordance with the standard care arrangement. 872

(39) In the case of a certified professional midwife, 873  
engaging in activities that exceed those permitted under 874  
division (B) of section 4723.57 of the Revised Code. 875

(C) Disciplinary actions taken by the board under 876  
divisions (A) and (B) of this section shall be taken pursuant to 877  
an adjudication conducted under Chapter 119. of the Revised 878  
Code, except that in lieu of a hearing, the board may enter into 879  
a consent agreement with an individual to resolve an allegation 880  
of a violation of this chapter or any rule adopted under it. A 881  
consent agreement, when ratified by a vote of a quorum, shall 882  
constitute the findings and order of the board with respect to 883  
the matter addressed in the agreement. If the board refuses to 884  
ratify a consent agreement, the admissions and findings 885  
contained in the agreement shall be of no effect. 886

(D) The hearings of the board shall be conducted in 887  
accordance with Chapter 119. of the Revised Code, the board may 888  
appoint a hearing examiner, as provided in section 119.09 of the 889  
Revised Code, to conduct any hearing the board is authorized to 890  
hold under Chapter 119. of the Revised Code. 891

In any instance in which the board is required under 892  
Chapter 119. of the Revised Code to give notice of an 893  
opportunity for a hearing and the applicant, licensee, or 894  
certificate holder does not make a timely request for a hearing 895  
in accordance with section 119.07 of the Revised Code, the board 896  
is not required to hold a hearing, but may adopt, by a vote of a 897  
quorum, a final order that contains the board's findings. In the 898  
final order, the board may order any of the sanctions listed in 899  
division (A) or (B) of this section. 900

(E) If a criminal action is brought against a registered 901  
nurse, licensed practical nurse, certified midwife, certified 902  
professional midwife, or dialysis technician for an act or crime 903  
described in divisions (B) (3) to (7) of this section and the 904  
action is dismissed by the trial court other than on the merits, 905  
the board shall conduct an adjudication to determine whether the 906  
registered nurse, licensed practical nurse, certified midwife, 907  
certified professional midwife, or dialysis technician committed 908  
the act on which the action was based. If the board determines 909  
on the basis of the adjudication that the registered nurse, 910  
licensed practical nurse, certified midwife, certified 911  
professional midwife, or dialysis technician committed the act, 912  
or if the registered nurse, licensed practical nurse, certified 913  
midwife, certified professional midwife, or dialysis technician 914  
fails to participate in the adjudication, the board may take 915  
action as though the registered nurse, licensed practical nurse, 916  
certified midwife, certified professional midwife, or dialysis 917



technician had been convicted of the act. 918

If the board takes action on the basis of a conviction, 919  
plea, or a judicial finding as described in divisions (B) (3) to 920  
(7) of this section that is overturned on appeal, the registered 921  
nurse, licensed practical nurse, certified midwife, certified 922  
professional midwife, or dialysis technician may, on exhaustion 923  
of the appeal process, petition the board for reconsideration of 924  
its action. On receipt of the petition and supporting court 925  
documents, the board shall temporarily rescind its action. If 926  
the board determines that the decision on appeal was a decision 927  
on the merits, it shall permanently rescind its action. If the 928  
board determines that the decision on appeal was not a decision 929  
on the merits, it shall conduct an adjudication to determine 930  
whether the registered nurse, licensed practical nurse, 931  
certified midwife, certified professional midwife, or dialysis 932  
technician committed the act on which the original conviction, 933  
plea, or judicial finding was based. If the board determines on 934  
the basis of the adjudication that the registered nurse, 935  
licensed practical nurse, certified midwife, certified 936  
professional midwife, or dialysis technician committed such act, 937  
or if the registered nurse, licensed practical nurse, certified 938  
midwife, certified professional midwife, or dialysis technician 939  
does not request an adjudication, the board shall reinstate its 940  
action; otherwise, the board shall permanently rescind its 941  
action. 942

Notwithstanding the provision of division (C) (2) of 943  
section 2953.32 of the Revised Code specifying that if records 944  
pertaining to a criminal case are sealed under that section the 945  
proceedings in the case shall be deemed not to have occurred, 946  
sealing of the following records on which the board has based an 947  
action under this section shall have no effect on the board's 948

action or any sanction imposed by the board under this section: 949  
records of any conviction, guilty plea, judicial finding of 950  
guilt resulting from a plea of no contest, or a judicial finding 951  
of eligibility for a pretrial diversion program or intervention 952  
in lieu of conviction. 953

The board shall not be required to seal, destroy, redact, 954  
or otherwise modify its records to reflect the court's sealing 955  
of conviction records. 956

(F) The board may investigate an individual's criminal 957  
background in performing its duties under this section. As part 958  
of such investigation, the board may order the individual to 959  
submit, at the individual's expense, a request to the bureau of 960  
criminal identification and investigation for a criminal records 961  
check and check of federal bureau of investigation records in 962  
accordance with the procedure described in section 4723.091 of 963  
the Revised Code. 964

(G) During the course of an investigation conducted under 965  
this section, the board may compel any registered nurse, 966  
licensed practical nurse, certified midwife, certified 967  
professional midwife, or dialysis technician or applicant under 968  
this chapter to submit to a mental or physical examination, or 969  
both, as required by the board and at the expense of the 970  
individual, if the board finds reason to believe that the 971  
individual under investigation may have a physical or mental 972  
impairment that may affect the individual's ability to provide 973  
safe nursing care. Failure of any individual to submit to a 974  
mental or physical examination when directed constitutes an 975  
admission of the allegations, unless the failure is due to 976  
circumstances beyond the individual's control, and a default and 977  
final order may be entered without the taking of testimony or 978

presentation of evidence. 979

If the board finds that an individual is impaired, the 980  
board shall require the individual to submit to care, 981  
counseling, or treatment approved or designated by the board, as 982  
a condition for initial, continued, reinstated, or renewed 983  
authority to practice. The individual shall be afforded an 984  
opportunity to demonstrate to the board that the individual can 985  
begin or resume the individual's occupation in compliance with 986  
acceptable and prevailing standards of care under the provisions 987  
of the individual's authority to practice. 988

For purposes of this division, any registered nurse, 989  
licensed practical nurse, certified midwife, certified 990  
professional midwife, or dialysis technician or applicant under 991  
this chapter shall be deemed to have given consent to submit to 992  
a mental or physical examination when directed to do so in 993  
writing by the board, and to have waived all objections to the 994  
admissibility of testimony or examination reports that 995  
constitute a privileged communication. 996

(H) The board shall investigate evidence that appears to 997  
show that any person has violated any provision of this chapter 998  
or any rule of the board. Any person may report to the board any 999  
information the person may have that appears to show a violation 1000  
of any provision of this chapter or rule of the board. In the 1001  
absence of bad faith, any person who reports such information or 1002  
who testifies before the board in any adjudication conducted 1003  
under Chapter 119. of the Revised Code shall not be liable for 1004  
civil damages as a result of the report or testimony. 1005

(I) All of the following apply under this chapter with 1006  
respect to the confidentiality of information: 1007

(1) Information received by the board pursuant to a 1008  
complaint or an investigation is confidential and not subject to 1009  
discovery in any civil action, except that the board may 1010  
disclose information to law enforcement officers and government 1011  
entities for purposes of an investigation of either a licensed 1012  
health care professional, including a registered nurse, licensed 1013  
practical nurse, certified midwife, certified professional 1014  
midwife, or dialysis technician, or a person who may have 1015  
engaged in the unauthorized practice of nursing, midwifery, or 1016  
dialysis care. No law enforcement officer or government entity 1017  
with knowledge of any information disclosed by the board 1018  
pursuant to this division shall divulge the information to any 1019  
other person or government entity except for the purpose of a 1020  
government investigation, a prosecution, or an adjudication by a 1021  
court or government entity. 1022

(2) If an investigation requires a review of patient 1023  
records, the investigation and proceeding shall be conducted in 1024  
such a manner as to protect patient confidentiality. 1025

(3) All adjudications and investigations of the board 1026  
shall be considered civil actions for the purposes of section 1027  
2305.252 of the Revised Code. 1028

(4) Any board activity that involves continued monitoring 1029  
of an individual as part of or following any disciplinary action 1030  
taken under this section shall be conducted in a manner that 1031  
maintains the individual's confidentiality. Information received 1032  
or maintained by the board with respect to the board's 1033  
monitoring activities is not subject to discovery in any civil 1034  
action and is confidential, except that the board may disclose 1035  
information to law enforcement officers and government entities 1036  
for purposes of an investigation of a licensee or certificate 1037

holder. 1038

(J) Any action taken by the board under this section 1039  
resulting in a suspension from practice shall be accompanied by 1040  
a written statement of the conditions under which the person may 1041  
be reinstated to practice. 1042

(K) When the board refuses to grant a license or 1043  
certificate to an applicant, revokes a license or certificate, 1044  
or refuses to reinstate a license or certificate, the board may 1045  
specify that its action is permanent. An individual subject to 1046  
permanent action taken by the board is forever ineligible to 1047  
hold a license or certificate of the type that was refused or 1048  
revoked and the board shall not accept from the individual an 1049  
application for reinstatement of the license or certificate or 1050  
for a new license or certificate. 1051

(L) No unilateral surrender of a nursing license,  1052  
midwifery license, or dialysis technician certificate issued 1053  
under this chapter shall be effective unless accepted by 1054  
majority vote of the board. No application for a nursing 1055  
license, midwifery license, or dialysis technician certificate 1056  
issued under this chapter may be withdrawn without a majority 1057  
vote of the board. The board's jurisdiction to take disciplinary 1058  
action under this section is not removed or limited when an 1059  
individual has a license or certificate classified as inactive 1060  
or fails to renew a license or certificate. 1061

(M) Sanctions shall not be imposed under division (B) (24) 1062  
of this section against any licensee who waives deductibles and 1063  
copayments as follows: 1064

(1) In compliance with the health benefit plan that 1065  
expressly allows such a practice. Waiver of the deductibles or 1066

copayments shall be made only with the full knowledge and 1067  
consent of the plan purchaser, payer, and third-party 1068  
administrator. Documentation of the consent shall be made 1069  
available to the board upon request. 1070

(2) For professional services rendered to any other person 1071  
licensed pursuant to this chapter to the extent allowed by this 1072  
chapter and the rules of the board. 1073

**Sec. 4723.282.** (A) As used in this section, "practice 1074  
deficiency" means any activity that does not meet acceptable and 1075  
prevailing standards of safe and effective nursing care,  1076  
midwifery care, or dialysis care. 1077

(B) The board of nursing may abstain from taking 1078  
disciplinary action under section 4723.28 of the Revised Code 1079  
against the holder of a license or certificate issued under this 1080  
chapter who has a practice deficiency that has been identified 1081  
by the board through an investigation conducted under section 1082  
4723.28 of the Revised Code. The board may abstain from taking 1083  
action only if the board has reason to believe that the 1084  
individual's practice deficiency can be corrected through 1085  
remediation, and if the individual enters into an agreement with 1086  
the board to seek remediation as prescribed by the board, 1087  
complies with the terms and conditions of the remediation, and 1088  
successfully completes the remediation. If an individual fails 1089  
to complete the remediation or the board determines that 1090  
remediation cannot correct the individual's practice deficiency, 1091  
the board shall proceed with disciplinary action in accordance 1092  
with section 4723.28 of the Revised Code. 1093

(C) To implement its authority under this section to 1094  
abstain from taking disciplinary action, the board shall 1095  
establish a practice intervention and improvement program. The 1096

board shall designate an administrator to operate the program 1097  
and, in accordance with Chapter 119. of the Revised Code, adopt 1098  
rules for the program that establish the following: 1099

(1) Criteria for use in identifying an individual's 1100  
practice deficiency; 1101

(2) Requirements that an individual must meet to be 1102  
eligible for remediation and the board's abstention from 1103  
disciplinary action; 1104

(3) Standards and procedures for prescribing remediation 1105  
that is appropriate for an individual's identified practice 1106  
deficiency; 1107

(4) Terms and conditions that an individual must meet to 1108  
be successful in completing the remediation prescribed; 1109

(5) Procedures for the board's monitoring of the 1110  
individual's remediation; 1111

(6) Procedures for maintaining confidential records 1112  
regarding individuals who participate in remediation; 1113

(7) Any other requirements or procedures necessary to 1114  
develop and administer the program. 1115

(D) All records held by the board for purposes of the 1116  
program shall be confidential, are not public records for 1117  
purposes of section 149.43 of the Revised Code, and are not 1118  
subject to discovery by subpoena or admissible as evidence in 1119  
any judicial proceeding. The administrator of the program shall 1120  
maintain all records in the board's office in accordance with 1121  
the board's record retention schedule. 1122

(E) When an individual begins the remediation prescribed 1123  
by the board, the individual shall sign a waiver permitting any 1124

entity that provides services related to the remediation to 1125  
release to the board information regarding the individual's 1126  
progress. An entity that provides services related to 1127  
remediation shall report to the board if the individual fails to 1128  
complete the remediation or does not make satisfactory progress 1129  
in remediation. 1130

In the absence of fraud or bad faith, an entity that 1131  
reports to the board regarding an individual's practice 1132  
deficiency, or progress or lack of progress in remediation, is 1133  
not liable in damages to any person as a result of making the 1134  
report. 1135

(F) An individual participating in remediation prescribed 1136  
under this section is responsible for all financial obligations 1137  
that may arise from obtaining or completing the remediation. 1138

**Sec. 4723.33.** A registered nurse, licensed practical 1139  
nurse, certified midwife, certified professional midwife, 1140  
dialysis technician, community health worker, or medication aide 1141  
who in good faith makes a report under this chapter or any other 1142  
provision of the Revised Code regarding a violation of this 1143  
chapter or any other provision of the Revised Code, or 1144  
participates in any investigation, administrative proceeding, or 1145  
judicial proceeding resulting from the report, has the full 1146  
protection against retaliatory action provided by sections 1147  
4113.51 to 4113.53 of the Revised Code. 1148

**Sec. 4723.34.** (A) A person or governmental entity that 1149  
employs, or contracts directly or through another person or 1150  
governmental entity for the provision of services by, registered 1151  
nurses, licensed practical nurses, nurses holding multistate 1152  
licenses to practice registered or licensed practical nursing 1153  
issued pursuant to section 4723.11 of the Revised Code, 1154



certified midwives, certified professional midwives, dialysis 1155  
technicians, medication aides, or certified community health 1156  
workers and that knows or has reason to believe that a current 1157  
or former employee or person providing services under a contract 1158  
who holds a license or certificate issued under this chapter 1159  
engaged in conduct that would be grounds for disciplinary action 1160  
by the board of nursing under this chapter or rules adopted 1161  
under it shall report to the board of nursing the name of such 1162  
current or former employee or person providing services under a 1163  
contract. The report shall be made on the person's or 1164  
governmental entity's behalf by an individual licensed by the 1165  
board who the person or governmental entity has designated to 1166  
make such reports. 1167

A prosecutor in a case described in divisions (B) (3) to 1168  
(5) of section 4723.28 of the Revised Code, or in a case where 1169  
the trial court issued an order of dismissal upon technical or 1170  
procedural grounds of a charge of a misdemeanor committed in the 1171  
course of practice, a felony charge, or a charge of gross 1172  
immorality or moral turpitude, who knows or has reason to 1173  
believe that the person charged is licensed under this chapter 1174  
to practice nursing as a registered nurse or as a licensed 1175  
practical nurse, is licensed under this chapter to practice 1176  
midwifery, or holds a certificate issued under this chapter to 1177  
practice as a dialysis technician shall notify the board of 1178  
nursing of the charge. With regard to certified community health 1179  
workers and medication aides, the prosecutor in a case involving 1180  
a charge of a misdemeanor committed in the course of employment, 1181  
a felony charge, or a charge of gross immorality or moral 1182  
turpitude, including a case dismissed on technical or procedural 1183  
grounds, who knows or has reason to believe that the person 1184  
charged holds a community health worker or medication aide 1185

certificate issued under this chapter shall notify the board of 1186  
the charge. 1187

Each notification from a prosecutor shall be made on forms 1188  
prescribed and provided by the board. The report shall include 1189  
the name and address of the license or certificate holder, the 1190  
charge, and the certified court documents recording the action. 1191

(B) If any person or governmental entity fails to provide 1192  
a report required by this section, the board may seek an order 1193  
from a court of competent jurisdiction compelling submission of 1194  
the report. 1195

**Sec. 4723.341.** (A) As used in this section, "person" has 1196  
the same meaning as in section 1.59 of the Revised Code and also 1197  
includes the board of nursing and its members and employees; 1198  
health care facilities, associations, and societies; insurers; 1199  
and individuals. 1200

(B) In the absence of fraud or bad faith, no person 1201  
reporting to the board of nursing or testifying in an 1202  
adjudication conducted under Chapter 119. of the Revised Code 1203  
with regard to alleged incidents of negligence or malpractice or 1204  
matters subject to this chapter or sections 3123.41 to 3123.50 1205  
of the Revised Code and any applicable rules adopted under 1206  
section 3123.63 of the Revised Code shall be subject to either 1207  
of the following based on making the report or testifying: 1208

(1) Liability in damages in a civil action for injury, 1209  
death, or loss to person or property; 1210

(2) Discipline or dismissal by an employer. 1211

(C) An individual who is disciplined or dismissed in 1212  
violation of division (B) (2) of this section has the same rights 1213  
and duties accorded an employee under sections 4113.52 and 1214

4113.53 of the Revised Code. 1215

(D) In the absence of fraud or bad faith, no professional 1216  
association of registered nurses, advanced practice registered 1217  
nurses, licensed practical nurses, certified midwives, certified 1218  
professional midwives, dialysis technicians, community health 1219  
workers, or medication aides that sponsors a committee or 1220  
program to provide peer assistance to individuals with substance 1221  
abuse problems, no representative or agent of such a committee 1222  
or program, and no member of the board of nursing shall be 1223  
liable to any person for damages in a civil action by reason of 1224  
actions taken to refer a nurse, midwife, professional midwife, 1225  
dialysis technician, community health worker, or medication aide 1226  
to a treatment provider or actions or omissions of the provider 1227  
in treating a nurse, midwife, professional midwife, dialysis 1228  
technician, community health worker, or medication aide. 1229

**Sec. 4723.35.** (A) As used in this section, "substance use 1230  
disorder" means either of the following: 1231

(1) The chronic and habitual use of alcoholic beverages to 1232  
the extent that the user no longer can control the use of 1233  
alcohol or endangers the user's health, safety, or welfare or 1234  
that of others; 1235

(2) The use of a controlled substance as defined in 1236  
section 3719.01 of the Revised Code, a harmful intoxicant as 1237  
defined in section 2925.01 of the Revised Code, or a dangerous 1238  
drug as defined in section 4729.01 of the Revised Code, to the 1239  
extent that the user becomes physically or psychologically 1240  
dependent on the substance, intoxicant, or drug or endangers the 1241  
user's health, safety, or welfare or that of others. 1242

(B) The board of nursing may abstain from taking 1243

disciplinary action under section 4723.28 or 4723.86 of the 1244  
Revised Code against an individual with a substance use disorder 1245  
if it finds that the individual can be treated effectively and 1246  
there is no impairment of the individual's ability to practice 1247  
according to acceptable and prevailing standards of safe care. 1248  
The board shall establish a substance use disorder monitoring 1249  
program to monitor the registered nurses, licensed practical 1250  
nurses, midwives, professional midwives, dialysis technicians, 1251  
and certified community health workers against whom the board 1252  
has abstained from taking action. The board shall develop the 1253  
program, select the program's name, and designate a coordinator 1254  
to administer the program. 1255

(C) Determinations regarding an individual's eligibility 1256  
for admission to, continued participation in, and successful 1257  
completion of the monitoring program shall be made by the 1258  
board's supervising member for disciplinary matters in 1259  
accordance with rules adopted under division (D) of this 1260  
section. 1261

(D) The board shall adopt rules in accordance with Chapter 1262  
119. of the Revised Code that establish the following: 1263

(1) Eligibility requirements for admission to and 1264  
continued participation in the monitoring program; 1265

(2) Terms and conditions that must be met to participate 1266  
in and successfully complete the program; 1267

(3) Procedures for keeping confidential records regarding 1268  
participants; 1269

(4) Any other requirements or procedures necessary to 1270  
establish and administer the program. 1271

(E) (1) As a condition of being admitted to the monitoring 1272

program, an individual shall surrender to the program 1273  
coordinator the license or certificate that the individual 1274  
holds. While the surrender is in effect, the individual is 1275  
prohibited from engaging in the practice of nursing, engaging in 1276  
the practice of midwifery, engaging in the provision of dialysis 1277  
care, or engaging in the provision of services that were being 1278  
provided as a certified community health worker. 1279

If the board's supervising member for disciplinary matters 1280  
determines that a participant is capable of resuming practice 1281  
according to acceptable and prevailing standards of safe care, 1282  
the program coordinator shall return the participant's license 1283  
or certificate. If the participant violates the terms and 1284  
conditions of resumed practice, the coordinator shall require 1285  
the participant to surrender the license or certificate as a 1286  
condition of continued participation in the program. The 1287  
coordinator may require the surrender only on the approval of 1288  
the board's supervising member for disciplinary matters. 1289

The surrender of a license or certificate on admission to 1290  
the monitoring program or while participating in the program 1291  
does not constitute an action by the board under section 4723.28 1292  
or 4723.86 of the Revised Code. The participant may rescind the 1293  
surrender at any time and the board may proceed by taking action 1294  
under section 4723.28 or 4723.86 of the Revised Code. 1295

(2) If the program coordinator determines that a 1296  
participant is significantly out of compliance with the terms 1297  
and conditions for participation, the coordinator shall notify 1298  
the board's supervising member for disciplinary matters and the 1299  
supervising member shall determine whether to temporarily 1300  
suspend the participant's license or certificate. The board 1301  
shall notify the participant of the suspension by certified mail 1302

sent to the participant's last known address and shall refer the matter to the board for formal action under section 4723.28 or 4723.86 of the Revised Code.

(F) All of the following apply with respect to the receipt, release, and maintenance of records and information by the monitoring program:

(1) The program coordinator shall maintain all program records in the board's office, and for each participant, shall retain the records for a period of two years following the participant's date of successful completion of the program.

(2) When applying to participate in the monitoring program, the applicant shall sign a waiver permitting the board to receive and release information necessary to determine whether the individual is eligible for admission. After being admitted, the participant shall sign a waiver permitting the board to receive and release information necessary to determine whether the individual is eligible for continued participation in the program. Information that may be necessary for the board's supervising member for disciplinary matters to determine eligibility for admission or continued participation in the monitoring program includes, but is not limited to, information provided to and by employers, probation officers, law enforcement agencies, peer assistance programs, health professionals, and treatment providers. No entity with knowledge that the information has been provided to the monitoring program shall divulge that knowledge to any other person.

(3) Except as provided in division (F) (4) of this section, all records pertaining to an individual's application for or participation in the monitoring program, including medical records, treatment records, and mental health records, shall be

confidential. The records are not public records for the 1333  
purposes of section 149.43 of the Revised Code and are not 1334  
subject to discovery by subpoena or admissible as evidence in 1335  
any judicial proceeding. 1336

(4) The board may disclose information regarding a 1337  
participant's progress in the program to any person or 1338  
government entity that the participant authorizes in writing to 1339  
be given the information. In disclosing information under this 1340  
division, the board shall not include any information that is 1341  
protected under section 5119.27 of the Revised Code or any 1342  
federal statute or regulation that provides for the 1343  
confidentiality of medical, mental health, or substance abuse 1344  
records. 1345

(G) In the absence of fraud or bad faith, the board as a 1346  
whole, its individual members, and its employees and 1347  
representatives are not liable for damages in any civil action 1348  
as a result of disclosing information in accordance with 1349  
division (F)(4) of this section. In the absence of fraud or bad 1350  
faith, any person reporting to the program with regard to an 1351  
individual's substance use disorder, or the progress or lack of 1352  
progress of that individual with regard to treatment, is not 1353  
liable for damages in any civil action as a result of the 1354  
report. 1355

**Sec. 4723.41.** (A) Each person who desires to practice 1356  
nursing as a certified nurse-midwife and has not been authorized 1357  
to practice ~~midwifery-nurse-midwifery~~ prior to December 1, 1967, 1358  
and each person who desires to practice nursing as a certified 1359  
registered nurse anesthetist, clinical nurse specialist, or 1360  
certified nurse practitioner shall file with the board of 1361  
nursing a written application for a license to practice nursing 1362

as an advanced practice registered nurse and designation in the 1363  
desired specialty. The application must be filed, under oath, on 1364  
a form prescribed by the board accompanied by the application 1365  
fee required by section 4723.08 of the Revised Code. 1366

Except as provided in division (B), (C), or (D) of this 1367  
section, at the time of making application, the applicant shall 1368  
meet all of the following requirements: 1369

(1) Be a registered nurse; 1370

(2) Submit documentation satisfactory to the board that 1371  
the applicant has earned a master's or doctoral degree with a 1372  
major in a nursing specialty or in a related field that 1373  
qualifies the applicant to sit for the certification examination 1374  
of a national certifying organization approved by the board 1375  
under section 4723.46 of the Revised Code; 1376

(3) Submit documentation satisfactory to the board of 1377  
having passed the certification examination of a national 1378  
certifying organization approved by the board under section 1379  
4723.46 of the Revised Code to examine and certify, as 1380  
applicable, nurse-midwives, registered nurse anesthetists, 1381  
clinical nurse specialists, or nurse practitioners; 1382

(4) Submit an affidavit with the application that states 1383  
all of the following: 1384

(a) That the applicant is the person named in the 1385  
documents submitted under this section and is the lawful 1386  
possessor thereof; 1387

(b) The applicant's age, residence, the school at which 1388  
the applicant obtained education in the applicant's nursing 1389  
specialty, and any other facts that the board requires; 1390



(c) The specialty in which the applicant seeks 1391  
designation. 1392

(B) (1) A certified registered nurse anesthetist, clinical 1393  
nurse specialist, certified nurse-midwife, or certified nurse 1394  
practitioner who is practicing or has practiced as such in 1395  
another jurisdiction may apply for a license by endorsement to 1396  
practice nursing as an advanced practice registered nurse and 1397  
designation as a certified registered nurse anesthetist, 1398  
clinical nurse specialist, certified nurse-midwife, or certified 1399  
nurse practitioner in this state if the nurse meets the 1400  
requirements set forth in division (A) of this section or 1401  
division (B) (2) of this section. 1402

(2) If an applicant who is practicing or has practiced in 1403  
another jurisdiction applies for designation under division (B) 1404  
(2) of this section, the application shall be submitted to the 1405  
board in the form prescribed by rules of the board and be 1406  
accompanied by the application fee required by section 4723.08 1407  
of the Revised Code. The application shall include evidence that 1408  
the applicant meets the requirements of division (B) (2) of this 1409  
section, holds authority to practice nursing and is in good 1410  
standing in another jurisdiction granted after meeting 1411  
requirements approved by the entity of that jurisdiction that 1412  
regulates nurses, and other information required by rules of the 1413  
board of nursing. 1414

With respect to the educational requirements and national 1415  
certification requirements that an applicant under division (B) 1416  
(2) of this section must meet, both of the following apply: 1417

(a) If the applicant is a certified registered nurse 1418  
anesthetist, certified nurse-midwife, or certified nurse 1419  
practitioner who, on or before December 31, 2000, obtained 1420

certification in the applicant's nursing specialty with a 1421  
national certifying organization listed in division (A) (3) of 1422  
section 4723.41 of the Revised Code as that division existed 1423  
prior to March 20, 2013, or that was at that time approved by 1424  
the board under section 4723.46 of the Revised Code, the 1425  
applicant must have maintained the certification. The applicant 1426  
is not required to have earned a master's or doctoral degree 1427  
with a major in a nursing specialty or in a related field that 1428  
qualifies the applicant to sit for the certification 1429  
examination. 1430

(b) If the applicant is a clinical nurse specialist, one 1431  
of the following must apply to the applicant: 1432

(i) On or before December 31, 2000, the applicant obtained 1433  
a master's or doctoral degree with a major in a clinical area of 1434  
nursing from an educational institution accredited by a national 1435  
or regional accrediting organization. The applicant is not 1436  
required to have passed a certification examination. 1437

(ii) On or before December 31, 2000, the applicant 1438  
obtained a master's or doctoral degree in nursing or a related 1439  
field and was certified as a clinical nurse specialist by the 1440  
American nurses credentialing center or another national 1441  
certifying organization that was at that time approved by the 1442  
board under section 4723.46 of the Revised Code. 1443

(3) The board may grant a nonrenewable temporary permit to 1444  
practice nursing as an advanced practice registered nurse to an 1445  
applicant for licensure by endorsement if the board is satisfied 1446  
by the evidence that the applicant holds a valid, unrestricted 1447  
license in or equivalent authorization from another 1448  
jurisdiction. The temporary permit shall expire at the earlier 1449  
of one hundred eighty days after issuance or upon the issuance 1450

of a license by endorsement. 1451

(C) An applicant who desires to practice nursing as a 1452  
certified registered nurse anesthetist, certified nurse-midwife, 1453  
or certified nurse practitioner is exempt from the educational 1454  
requirements in division (A) (2) of this section if all of the 1455  
following are the case: 1456

(1) Before January 1, 2001, the board issued to the 1457  
applicant a certificate of authority to practice as a certified 1458  
registered nurse anesthetist, certified nurse-midwife, or 1459  
certified nurse practitioner; 1460

(2) The applicant submits documentation satisfactory to 1461  
the board that the applicant obtained certification in the 1462  
applicant's nursing specialty with a national certifying 1463  
organization listed in division (A) (3) of section 4723.41 of the 1464  
Revised Code as that division existed prior to March 20, 2013, 1465  
or that was at that time approved by the board under section 1466  
4723.46 of the Revised Code; 1467

(3) The applicant submits documentation satisfactory to 1468  
the board that the applicant has maintained the certification 1469  
described in division (C) (2) of this section. 1470

(D) An applicant who desires to practice as a clinical 1471  
nurse specialist is exempt from the examination requirement in 1472  
division (A) (3) of this section if both of the following are the 1473  
case: 1474

(1) Before January 1, 2001, the board issued to the 1475  
applicant a certificate of authority to practice as a clinical 1476  
nurse specialist; 1477

(2) The applicant submits documentation satisfactory to 1478  
the board that the applicant earned either of the following: 1479

(a) A master's or doctoral degree with a major in a 1480  
clinical area of nursing from an educational institution 1481  
accredited by a national or regional accrediting organization; 1482

(b) A master's or doctoral degree in nursing or a related 1483  
field and was certified as a clinical nurse specialist by the 1484  
American nurses credentialing center or another national 1485  
certifying organization that was at that time approved by the 1486  
board under section 4723.46 of the Revised Code. 1487

**Sec. 4723.43.** A certified registered nurse anesthetist, 1488  
clinical nurse specialist, certified nurse-midwife, or certified 1489  
nurse practitioner may provide to individuals and groups nursing 1490  
care that requires knowledge and skill obtained from advanced 1491  
formal education and clinical experience. In this capacity as an 1492  
advanced practice registered nurse, a certified nurse-midwife is 1493  
subject to division (A) of this section, a certified registered 1494  
nurse anesthetist is subject to division (B) of this section, a 1495  
certified nurse practitioner is subject to division (C) of this 1496  
section, and a clinical nurse specialist is subject to division 1497  
(D) of this section. 1498

(A) ~~A~~ Subject to sections 4723.58 to 4723.584 of the 1499  
Revised Code, a nurse authorized to practice as a certified 1500  
nurse-midwife, in collaboration with one or more physicians, may 1501  
provide the management of preventive services and those primary 1502  
care services necessary to provide health care to women 1503  
antepartally, intrapartally, postpartally, and gynecologically, 1504  
consistent with the nurse's education and certification, and in 1505  
accordance with rules adopted by the board of nursing. 1506

No certified nurse-midwife may perform version, deliver 1507  
breech or face presentation, use forceps, do any obstetric 1508  
operation, or treat any other abnormal condition, except in 1509

emergencies. Division (A) of this section does not prohibit a 1510  
certified nurse-midwife from performing episiotomies or normal 1511  
vaginal deliveries, or repairing vaginal tears. A certified 1512  
nurse-midwife may, in collaboration with one or more physicians, 1513  
prescribe drugs and therapeutic devices in accordance with 1514  
section 4723.481 of the Revised Code. A certified nurse-midwife 1515  
may, in collaboration with one or more physicians, attend births 1516  
in hospitals, homes, medical offices, and freestanding birthing 1517  
centers. 1518

(B) A nurse authorized to practice as a certified 1519  
registered nurse anesthetist, consistent with the nurse's 1520  
education and certification and in accordance with rules adopted 1521  
by the board, may do the following: 1522

(1) With supervision and in the immediate presence of a 1523  
physician, podiatrist, or dentist, administer anesthesia and 1524  
perform anesthesia induction, maintenance, and emergence; 1525

(2) With supervision, obtain informed consent for 1526  
anesthesia care and perform preanesthetic preparation and 1527  
evaluation, postanesthetic preparation and evaluation, 1528  
postanesthesia care, and, subject to section 4723.433 of the 1529  
Revised Code, clinical support functions; 1530

(3) With supervision and in accordance with section 1531  
4723.434 of the Revised Code, engage in the activities described 1532  
in division (A) of that section. 1533

The physician, podiatrist, or dentist supervising a 1534  
certified registered nurse anesthetist must be actively engaged 1535  
in practice in this state. When a certified registered nurse 1536  
anesthetist is supervised by a podiatrist, the nurse's scope of 1537  
practice is limited to the anesthesia procedures that the 1538

podiatrist has the authority under section 4731.51 of the 1539  
Revised Code to perform. A certified registered nurse 1540  
anesthetist may not administer general anesthesia under the 1541  
supervision of a podiatrist in a podiatrist's office. When a 1542  
certified registered nurse anesthetist is supervised by a 1543  
dentist, the nurse's scope of practice is limited to the 1544  
anesthesia procedures that the dentist has the authority under 1545  
Chapter 4715. of the Revised Code to perform. 1546

(C) A nurse authorized to practice as a certified nurse 1547  
practitioner, in collaboration with one or more physicians or 1548  
podiatrists, may provide preventive and primary care services, 1549  
provide services for acute illnesses, and evaluate and promote 1550  
patient wellness within the nurse's nursing specialty, 1551  
consistent with the nurse's education and certification, and in 1552  
accordance with rules adopted by the board. A certified nurse 1553  
practitioner may, in collaboration with one or more physicians 1554  
or podiatrists, prescribe drugs and therapeutic devices in 1555  
accordance with section 4723.481 of the Revised Code. 1556

When a certified nurse practitioner is collaborating with 1557  
a podiatrist, the nurse's scope of practice is limited to the 1558  
procedures that the podiatrist has the authority under section 1559  
4731.51 of the Revised Code to perform. 1560

(D) A nurse authorized to practice as a clinical nurse 1561  
specialist, in collaboration with one or more physicians or 1562  
podiatrists, may provide and manage the care of individuals and 1563  
groups with complex health problems and provide health care 1564  
services that promote, improve, and manage health care within 1565  
the nurse's nursing specialty, consistent with the nurse's 1566  
education and in accordance with rules adopted by the board. A 1567  
clinical nurse specialist may, in collaboration with one or more 1568

physicians or podiatrists, prescribe drugs and therapeutic 1569  
devices in accordance with section 4723.481 of the Revised Code. 1570

When a clinical nurse specialist is collaborating with a 1571  
podiatrist, the nurse's scope of practice is limited to the 1572  
procedures that the podiatrist has the authority under section 1573  
4731.51 of the Revised Code to perform. 1574

**Sec. 4723.431.** (A) (1) ~~An~~ A certified midwife or an 1575  
advanced practice registered nurse who is designated as a 1576  
clinical nurse specialist, certified nurse-midwife, or certified 1577  
nurse practitioner may practice only in accordance with a 1578  
standard care arrangement entered into with each physician or 1579  
podiatrist with whom the midwife or nurse collaborates. A copy 1580  
of the standard care arrangement shall be retained on file by 1581  
the midwife's or nurse's employer. Prior approval of the 1582  
standard care arrangement by the board of nursing is not 1583  
required, but the board may periodically review it for 1584  
compliance with this section. 1585

A certified midwife, clinical nurse specialist, certified 1586  
nurse-midwife, or certified nurse practitioner may enter into a 1587  
standard care arrangement with one or more collaborating 1588  
physicians or podiatrists. If a collaborating physician or 1589  
podiatrist enters into standard care arrangements with more than 1590  
five midwives or nurses, the physician or podiatrist shall not 1591  
collaborate at the same time with more than five midwives or 1592  
nurses in the prescribing component of their practices. 1593

Not later than thirty days after first engaging in the 1594  
practice of midwifery as a certified midwife or the practice of 1595  
nursing as a clinical nurse specialist, certified nurse-midwife, 1596  
or certified nurse practitioner, the midwife or nurse shall 1597  
submit to the board the name and business address of each 1598

collaborating physician or podiatrist. Thereafter, the midwife 1599  
or nurse shall notify the board of any additions or deletions to 1600  
the midwife's or nurse's collaborating physicians or 1601  
podiatrists. Except as provided in division (D) of this section, 1602  
the notice must be provided not later than thirty days after the 1603  
change takes effect. 1604

(2) All of the following conditions apply with respect to 1605  
the practice of a collaborating physician or podiatrist with 1606  
whom a certified midwife, clinical nurse specialist, certified 1607  
nurse-midwife, or certified nurse practitioner may enter into a 1608  
standard care arrangement: 1609

(a) The physician or podiatrist must be authorized to 1610  
practice in this state. 1611

(b) Except as provided in division (A) (2) (c) of this 1612  
section, the physician or podiatrist must be practicing in a 1613  
specialty that is the same as or similar to the midwife's 1614  
specialty or the nurse's nursing specialty. 1615

(c) If the nurse is a clinical nurse specialist who is 1616  
certified as a psychiatric-mental health CNS by the American 1617  
nurses credentialing center or a certified nurse practitioner 1618  
who is certified as a psychiatric-mental health NP by the 1619  
American nurses credentialing center, the nurse may enter into a 1620  
standard care arrangement with a physician but not a podiatrist 1621  
and the collaborating physician must be practicing in one of the 1622  
following specialties: 1623

(i) Psychiatry; 1624

(ii) Pediatrics; 1625

(iii) Primary care or family practice. 1626



(B) A standard care arrangement shall be in writing and 1627  
shall contain all of the following: 1628

(1) Criteria for referral of a patient by the certified 1629  
midwife, clinical nurse specialist, certified nurse-midwife, or 1630  
certified nurse practitioner to a collaborating physician or 1631  
podiatrist or another physician or podiatrist; 1632

(2) A process for the certified midwife, clinical nurse 1633  
specialist, certified nurse-midwife, or certified nurse 1634  
practitioner to obtain a consultation with a collaborating 1635  
physician or podiatrist or another physician or podiatrist; 1636

(3) A plan for coverage in instances of emergency or 1637  
planned absences of either the certified midwife, clinical nurse 1638  
specialist, certified nurse-midwife, or certified nurse 1639  
practitioner or a collaborating physician or podiatrist that 1640  
provides the means whereby a physician or podiatrist is 1641  
available for emergency care; 1642

(4) The process for resolution of disagreements regarding 1643  
matters of patient management between the certified midwife, 1644  
clinical nurse specialist, certified nurse-midwife, or certified 1645  
nurse practitioner and a collaborating physician or podiatrist; 1646

(5) Any other criteria required by rule of the board 1647  
adopted pursuant to section 4723.07 or 4723.50 of the Revised 1648  
Code. 1649

(C) (1) A standard care arrangement entered into pursuant 1650  
to this section may permit a clinical nurse specialist, 1651  
certified nurse-midwife, or certified nurse practitioner to 1652  
supervise services provided by a home health agency as defined 1653  
in section 3740.01 of the Revised Code. 1654

(2) A standard care arrangement entered into pursuant to 1655

this section may permit a clinical nurse specialist, certified 1656  
nurse-midwife, or certified nurse practitioner to admit a 1657  
patient to a hospital in accordance with section 3727.06 of the 1658  
Revised Code. 1659

(D) (1) Except as provided in division (D) (2) of this 1660  
section, if a physician or podiatrist terminates the 1661  
collaboration between the physician or podiatrist and a 1662  
certified midwife, certified nurse-midwife, certified nurse 1663  
practitioner, or clinical nurse specialist before their standard 1664  
care arrangement expires, all of the following apply: 1665

(a) The physician or podiatrist must give the midwife or 1666  
nurse written or electronic notice of the termination. 1667

(b) Once the midwife or nurse receives the termination 1668  
notice, the midwife or nurse must notify the board of nursing of 1669  
the termination as soon as practicable by submitting to the 1670  
board a copy of the physician's or podiatrist's termination 1671  
notice. 1672

(c) Notwithstanding the ~~requirement~~ requirements of 1673  
~~section~~ sections 4723.43 and 4723.57 of the Revised Code that 1674  
the midwife or nurse practice in collaboration with a physician 1675  
or podiatrist, the midwife or nurse may continue to practice 1676  
under the existing standard care arrangement without a 1677  
collaborating physician or podiatrist for not more than one 1678  
hundred twenty days after submitting to the board a copy of the 1679  
termination notice. 1680

(2) In the event that the collaboration between a 1681  
physician or podiatrist and a certified midwife, certified 1682  
nurse-midwife, certified nurse practitioner, or clinical nurse 1683  
specialist terminates because of the physician's or podiatrist's 1684

death, the midwife or nurse must notify the board of the death 1685  
as soon as practicable. The midwife or nurse may continue to 1686  
practice under the existing standard care arrangement without a 1687  
collaborating physician or podiatrist for not more than one 1688  
hundred twenty days after notifying the board of the physician's 1689  
or podiatrist's death. 1690

(E) Nothing in this section prohibits a hospital from 1691  
hiring a clinical nurse specialist, certified nurse-midwife, or 1692  
certified nurse practitioner as an employee and negotiating 1693  
standard care arrangements on behalf of the employee as 1694  
necessary to meet the requirements of this section. A standard 1695  
care arrangement between the hospital's employee and the 1696  
employee's collaborating physician is subject to approval by the 1697  
medical staff and governing body of the hospital prior to 1698  
implementation of the arrangement at the hospital. 1699

**Sec. 4723.432.** (A) ~~An~~ A certified midwife or an advanced 1700  
practice registered nurse who is designated as a clinical nurse 1701  
specialist, certified nurse-midwife, or certified nurse 1702  
practitioner shall cooperate with the state medical board in any 1703  
investigation the board conducts with respect to a physician or 1704  
podiatrist who collaborates with the midwife or nurse. The 1705  
midwife or nurse shall cooperate with the board in any 1706  
investigation the board conducts with respect to the 1707  
unauthorized practice of medicine by the midwife or nurse. 1708

(B) An advanced practice registered nurse who is 1709  
designated as a certified registered nurse anesthetist shall 1710  
cooperate with the state medical board or state dental board in 1711  
any investigation either board conducts with respect to a 1712  
physician, podiatrist, or dentist who permits the nurse to 1713  
practice with the supervision of that physician, podiatrist, or 1714

dentist. The nurse shall cooperate with either board in any 1715  
investigation it conducts with respect to the unauthorized 1716  
practice of medicine or dentistry by the nurse. 1717

**Sec. 4723.481.** This section establishes standards and 1718  
conditions regarding the authority of an advanced practice 1719  
registered nurse who is designated as a clinical nurse 1720  
specialist, certified nurse-midwife, or certified nurse 1721  
practitioner to prescribe and personally furnish drugs and 1722  
therapeutic devices under a license issued under section 4723.42 1723  
of the Revised Code. 1724

This section also establishes standards and conditions 1725  
regarding the authority of a certified midwife to prescribe and 1726  
personally furnish drugs and therapeutic devices under a license 1727  
issued under section 4723.56 of the Revised Code. 1728

(A) Except as provided in division (F) of this section, a 1729  
clinical nurse specialist, certified nurse-midwife, ~~or~~ certified 1730  
nurse practitioner, or certified midwife shall not prescribe or 1731  
furnish any drug or therapeutic device that is listed on the 1732  
exclusionary formulary established in rules adopted under 1733  
section 4723.50 of the Revised Code. 1734

(B) The prescriptive authority of a clinical nurse 1735  
specialist, certified nurse-midwife, ~~or~~ certified nurse 1736  
practitioner, or certified midwife shall not exceed the 1737  
prescriptive authority of the collaborating physician or 1738  
podiatrist, including the collaborating physician's authority to 1739  
treat chronic pain with controlled substances and products 1740  
containing tramadol as described in section 4731.052 of the 1741  
Revised Code. 1742

(C) (1) Except as provided in division (C) (2) or (3) of 1743

this section, a clinical nurse specialist, certified nurse- 1744  
midwife, ~~or~~ certified nurse practitioner, or certified midwife 1745  
may prescribe to a patient a schedule II controlled substance 1746  
only if all of the following are the case: 1747

(a) The patient has a terminal condition, as defined in 1748  
section 2133.01 of the Revised Code. 1749

(b) A physician initially prescribed the substance for the 1750  
patient. 1751

(c) The prescription is for an amount that does not exceed 1752  
the amount necessary for the patient's use in a single, seventy- 1753  
two-hour period. 1754

(2) The restrictions on prescriptive authority in division 1755  
(C) (1) of this section do not apply if a clinical nurse 1756  
specialist, certified nurse-midwife, ~~or~~ certified nurse 1757  
practitioner, or certified midwife issues the prescription to 1758  
the patient from any of the following locations: 1759

(a) A hospital registered under section 3701.07 of the 1760  
Revised Code; 1761

(b) An entity owned or controlled, in whole or in part, by 1762  
a hospital or by an entity that owns or controls, in whole or in 1763  
part, one or more hospitals; 1764

(c) A health care facility operated by the department of 1765  
mental health and addiction services or the department of 1766  
developmental disabilities; 1767

(d) A nursing home licensed under section 3721.02 of the 1768  
Revised Code or by a political subdivision certified under 1769  
section 3721.09 of the Revised Code; 1770

(e) A county home or district home operated under Chapter 1771

5155. of the Revised Code that is certified under the medicare 1772  
or medicaid program; 1773

(f) A hospice care program, as defined in section 3712.01 1774  
of the Revised Code; 1775

(g) A community mental health services provider, as 1776  
defined in section 5122.01 of the Revised Code; 1777

(h) An ambulatory surgical facility, as defined in section 1778  
3702.30 of the Revised Code; 1779

(i) A freestanding birthing center, as defined in section 1780  
3702.141 of the Revised Code; 1781

(j) A federally qualified health center, as defined in 1782  
section 3701.047 of the Revised Code; 1783

(k) A federally qualified health center look-alike, as 1784  
defined in section 3701.047 of the Revised Code; 1785

(l) A health care office or facility operated by the board 1786  
of health of a city or general health district or the authority 1787  
having the duties of a board of health under section 3709.05 of 1788  
the Revised Code; 1789

(m) A site where a medical practice is operated, but only 1790  
if the practice is comprised of one or more physicians who also 1791  
are owners of the practice; the practice is organized to provide 1792  
direct patient care; and the clinical nurse specialist, 1793  
certified nurse-midwife, ~~or~~ certified nurse practitioner, or 1794  
certified midwife providing services at the site has a standard 1795  
care arrangement and collaborates with at least one of the 1796  
physician owners who practices primarily at that site; 1797

(n) A residential care facility, as defined in section 1798  
3721.01 of the Revised Code. 1799

(3) A clinical nurse specialist, certified nurse-midwife, 1800  
~~or~~-certified nurse practitioner, or certified midwife shall not 1801  
issue to a patient a prescription for a schedule II controlled 1802  
substance from a convenience care clinic even if the clinic is 1803  
owned or operated by an entity specified in division (C) (2) of 1804  
this section. 1805

(D) A pharmacist who acts in good faith reliance on a 1806  
prescription issued by a clinical nurse specialist, certified 1807  
nurse-midwife, ~~or~~-certified nurse practitioner, or certified 1808  
midwife under division (C) (2) of this section is not liable for 1809  
or subject to any of the following for relying on the 1810  
prescription: damages in any civil action, prosecution in any 1811  
criminal proceeding, or professional disciplinary action by the 1812  
state board of pharmacy under Chapter 4729. of the Revised Code. 1813

(E) A clinical nurse specialist, certified nurse-midwife, 1814  
~~or~~-certified nurse practitioner, or certified midwife shall 1815  
comply with section 3719.061 of the Revised Code if the nurse 1816  
prescribes for a minor, as defined in that section, an opioid 1817  
analgesic, as defined in section 3719.01 of the Revised Code. 1818

(F) Until the board of nursing establishes a new formulary 1819  
in rules adopted under section 4723.50 of the Revised Code, a 1820  
clinical nurse specialist, certified nurse-midwife, ~~or~~-certified 1821  
nurse practitioner, or certified midwife who prescribes or 1822  
furnishes any drug or therapeutic device shall do so in 1823  
accordance with the formulary established by the board prior to 1824  
~~the effective date of this amendment~~ April 6, 2017. 1825

**Sec. 4723.483.** (A) (1) Subject to division (A) (2) of this 1826  
section, and notwithstanding any provision of this chapter or 1827  
rule adopted by the board of nursing, a clinical nurse 1828  
specialist, certified nurse-midwife, ~~or~~-certified nurse 1829

~~practitioner who holds a certificate to prescribe issued under~~ 1830  
~~section 4723.48 of the Revised Code, or certified midwife~~ may do 1831  
either of the following without having examined an individual to 1832  
whom epinephrine may be administered: 1833

(a) Personally furnish a supply of epinephrine 1834  
autoinjectors for use in accordance with sections 3313.7110, 1835  
3313.7111, 3314.143, 3326.28, 3328.29, 3728.03 to 3728.05, and 1836  
5101.76 of the Revised Code; 1837

(b) Issue a prescription for epinephrine autoinjectors for 1838  
use in accordance with sections 3313.7110, 3313.7111, 3314.143, 1839  
3326.28, 3328.29, 3728.03 to 3728.05, and 5101.76 of the Revised 1840  
Code. 1841

(2) An epinephrine autoinjector personally furnished or 1842  
prescribed under division (A)(1) of this section must be 1843  
furnished or prescribed in such a manner that it may be 1844  
administered only in a manufactured dosage form. 1845

(B) A nurse or midwife who acts in good faith in 1846  
accordance with this section is not liable for or subject to any 1847  
of the following for any action or omission of an entity to 1848  
which an epinephrine autoinjector is furnished or a prescription 1849  
is issued: damages in any civil action, prosecution in any 1850  
criminal proceeding, or professional disciplinary action. 1851

**Sec. 4723.484.** (A) Notwithstanding any provision of this 1852  
chapter or rule adopted by the board of nursing, an advanced 1853  
practice registered nurse who is designated as a clinical nurse 1854  
specialist, certified nurse-midwife, or certified nurse 1855  
practitioner or a certified midwife may personally furnish a 1856  
supply of naloxone, or issue a prescription for naloxone, 1857  
without having examined the individual to whom it may be 1858



administered if both of the following conditions are met: 1859

(1) The naloxone supply is furnished to, or the 1860  
prescription is issued to and in the name of, a family member, 1861  
friend, or other individual in a position to assist an 1862  
individual who there is reason to believe is at risk of 1863  
experiencing an opioid-related overdose. 1864

(2) The advanced practice registered nurse or certified 1865  
midwife instructs the individual receiving the naloxone supply 1866  
or prescription to summon emergency services as soon as 1867  
practicable either before or after administering naloxone to an 1868  
individual apparently experiencing an opioid-related overdose. 1869

(B) An advanced practice registered nurse or midwife who 1870  
under division (A) of this section in good faith furnishes a 1871  
supply of naloxone or issues a prescription for naloxone is not 1872  
liable for or subject to any of the following for any action or 1873  
omission of the individual to whom the naloxone is furnished or 1874  
the prescription is issued: damages in any civil action, 1875  
prosecution in any criminal proceeding, or professional 1876  
disciplinary action. 1877

**Sec. 4723.487.** (A) As used in this section: 1878

(1) "Drug database" means the database established and 1879  
maintained by the state board of pharmacy pursuant to section 1880  
4729.75 of the Revised Code. 1881

(2) "Opioid analgesic" and "benzodiazepine" have the same 1882  
meanings as in section 3719.01 of the Revised Code. 1883

(B) Except as provided in divisions (C) and (E) of this 1884  
section, an advanced practice registered nurse who is designated 1885  
as a clinical nurse specialist, certified nurse-midwife, or 1886  
certified nurse practitioner or a certified midwife shall comply 1887

with all of the following as conditions of prescribing a drug 1888  
that is either an opioid analgesic or a benzodiazepine as part 1889  
of a patient's course of treatment for a particular condition: 1890

(1) Before initially prescribing the drug, the advanced 1891  
practice registered nurse or certified midwife or the advanced 1892  
practice registered nurse's or certified midwife's delegate 1893  
shall request from the drug database a report of information 1894  
related to the patient that covers at least the twelve months 1895  
immediately preceding the date of the request. If the advanced 1896  
practice registered nurse or certified midwife practices 1897  
primarily in a county of this state that adjoins another state, 1898  
the advanced practice registered nurse or certified midwife or 1899  
delegate also shall request a report of any information 1900  
available in the drug database that pertains to prescriptions 1901  
issued or drugs furnished to the patient in the state adjoining 1902  
that county. 1903

(2) If the patient's course of treatment for the condition 1904  
continues for more than ninety days after the initial report is 1905  
requested, the advanced practice registered nurse or certified 1906  
midwife or delegate shall make periodic requests for reports of 1907  
information from the drug database until the course of treatment 1908  
has ended. The requests shall be made at intervals not exceeding 1909  
ninety days, determined according to the date the initial 1910  
request was made. The request shall be made in the same manner 1911  
provided in division (B) (1) of this section for requesting the 1912  
initial report of information from the drug database. 1913

(3) On receipt of a report under division (B) (1) or (2) of 1914  
this section, the advanced practice registered nurse or 1915  
certified midwife shall assess the information in the report. 1916  
The advanced practice registered nurse or certified midwife 1917

shall document in the patient's record that the report was 1918  
received and the information was assessed. 1919

(C) Division (B) of this section does not apply ~~if~~ in any 1920  
of the following circumstances: 1921

(1) A drug database report regarding the patient is not 1922  
available, in which case the advanced practice registered nurse 1923  
or certified midwife shall document in the patient's record the 1924  
reason that the report is not available. 1925

(2) The drug is prescribed in an amount indicated for a 1926  
period not to exceed seven days. 1927

(3) The drug is prescribed for the treatment of cancer or 1928  
another condition associated with cancer. 1929

(4) The drug is prescribed to a hospice patient in a 1930  
hospice care program, as those terms are defined in section 1931  
3712.01 of the Revised Code, or any other patient diagnosed as 1932  
terminally ill. 1933

(5) The drug is prescribed for administration in a 1934  
hospital, nursing home, or residential care facility. 1935

(D) The board of nursing may adopt rules, in accordance 1936  
with Chapter 119. of the Revised Code, that establish standards 1937  
and procedures to be followed by an advanced practice registered 1938  
nurse or certified midwife regarding the review of patient 1939  
information available through the drug database under division 1940  
(A) (5) of section 4729.80 of the Revised Code. The rules shall 1941  
be adopted in accordance with Chapter 119. of the Revised Code. 1942

(E) This section and any rules adopted under it do not 1943  
apply if the state board of pharmacy no longer maintains the 1944  
drug database. 1945

**Sec. 4723.488.** (A) Except as provided in division (B) of 1946  
this section, in the case of a license holder who is seeking 1947  
renewal of a license to practice nursing as an advanced practice 1948  
registered nurse or a license to practice midwifery and who 1949  
prescribes opioid analgesics or benzodiazepines, as defined in 1950  
section 3719.01 of the Revised Code, the holder shall certify to 1951  
the board whether the holder has been granted access to the drug 1952  
database established and maintained by the state board of 1953  
pharmacy pursuant to section 4729.75 of the Revised Code. 1954

(B) The requirement in division (A) of this section does 1955  
not apply if any of the following is the case: 1956

(1) The state board of pharmacy notifies the board of 1957  
nursing pursuant to section 4729.861 of the Revised Code that 1958  
the license holder has been restricted from obtaining further 1959  
information from the drug database. 1960

(2) The state board of pharmacy no longer maintains the 1961  
drug database. 1962

(3) The license holder does not practice nursing or 1963  
midwifery in this state. 1964

(C) If a license holder certifies to the board of nursing 1965  
that the holder has been granted access to the drug database and 1966  
the board finds through an audit or other means that the holder 1967  
has not been granted access, the board may take action under 1968  
section 4723.28 of the Revised Code. 1969

**Sec. 4723.4810.** (A) (1) Notwithstanding any conflicting 1970  
provision of this chapter or rule adopted by the board of 1971  
nursing, a certified midwife or a clinical nurse specialist, 1972  
certified nurse-midwife, or certified nurse practitioner who 1973  
holds a license to practice nursing as an advanced practice 1974

registered nurse issued under section 4723.42 of the Revised Code may issue a prescription for or personally furnish a complete or partial supply of a drug to treat chlamydia, gonorrhea, or trichomoniasis, without having examined the individual for whom the drug is intended, if all of the following conditions are met:

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

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

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

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

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

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

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

associated with the drug;	2004
(2) Recommend to the patient that the individual seek treatment from a health professional;	2005 2006
(3) Document all of the following in the patient's record:	2007
(a) The name of the drug prescribed or furnished and its dosage;	2008 2009
(b) That information concerning the drug was provided to the patient for the purpose of sharing the information with the individual;	2010 2011 2012
(c) If known, any adverse reactions the individual experiences from treatment with the drug.	2013 2014
(C) A <u>midwife or nurse</u> who prescribes or personally furnishes a drug under this section may contact the individual for whom the drug is intended.	2015 2016 2017
(1) If the <u>midwife or nurse</u> contacts the individual, the <u>midwife or nurse</u> shall do all of the following:	2018 2019
(a) Inform the individual that the individual may have been exposed to chlamydia, gonorrhea, or trichomoniasis;	2020 2021
(b) Encourage the individual to seek treatment from a health professional;	2022 2023
(c) Explain the treatment options available to the individual, including treatment with a prescription drug, directions for use of the drug, and any side effects, adverse reactions, or known contraindications associated with the drug;	2024 2025 2026 2027
(d) Document in the patient's record that the <u>midwife or nurse</u> contacted the individual.	2028 2029
(2) If the <u>midwife or nurse</u> does not contact the	2030

individual, the midwife or nurse shall document that fact in the 2031  
patient's record. 2032

(D) A midwife or nurse who in good faith prescribes or 2033  
personally furnishes a drug under this section is not liable for 2034  
or subject to any of the following: 2035

(1) Damages in any civil action; 2036

(2) Prosecution in any criminal proceeding; 2037

(3) Professional disciplinary action. 2038

**Sec. 4723.4811.** (A) (1) Subject to division (A) (2) of this 2039  
section, and notwithstanding any provision of this chapter or 2040  
rule adopted by the board of nursing, a certified midwife or a 2041  
clinical nurse specialist, certified nurse-midwife, or certified 2042  
nurse practitioner licensed as an advanced practice registered 2043  
nurse under Chapter 4723. of the Revised Code may do either of 2044  
the following without having examined an individual to whom 2045  
glucagon may be administered: 2046

(a) Personally furnish a supply of injectable or nasally 2047  
administered glucagon for use in accordance with sections 2048  
3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5101.78 of 2049  
the Revised Code; 2050

(b) Issue a prescription for injectable or nasally 2051  
administered glucagon for use in accordance with sections 2052  
3313.7115, 3313.7116, 3314.147, 3326.60, 3328.38, and 5101.78 of 2053  
the Revised Code. 2054

(2) Injectable or nasally administered glucagon personally 2055  
furnished or prescribed under division (A) (1) of this section 2056  
must be furnished or prescribed in such a manner that it may be 2057  
administered only in a manufactured dosage form. 2058

(B) A midwife or nurse who acts in good faith in 2059  
accordance with this section is not liable for or subject to any 2060  
of the following for any action or omission of an entity to 2061  
which injectable or nasally administered glucagon is furnished 2062  
or a prescription is issued: damages in any civil action, 2063  
prosecution in any criminal proceeding, or professional 2064  
disciplinary action. 2065

**Sec. 4723.50.** (A) As used in this section: 2066

(1) "Controlled substance" has the same meaning as in 2067  
section 3719.01 of the Revised Code. 2068

(2) "Medication-assisted treatment" has the same meaning 2069  
as in section 340.01 of the Revised Code. 2070

(B) In accordance with Chapter 119. of the Revised Code, 2071  
the board of nursing shall adopt rules as necessary to implement 2072  
the provisions of this chapter pertaining to the authority of 2073  
~~advanced practice registered nurses who are designated as~~ 2074  
clinical nurse specialists, certified nurse-midwives, ~~and~~ 2075  
certified nurse practitioners, and certified midwives to 2076  
prescribe and furnish drugs and therapeutic devices. 2077

The board shall adopt rules that are consistent with a 2078  
recommended exclusionary formulary the board received from the 2079  
former committee on prescriptive governance that was established 2080  
pursuant to H.B. 216 of the 131st general assembly. After 2081  
reviewing a formulary submitted by the committee, the board may 2082  
either adopt the formulary as a rule or ask the committee to 2083  
reconsider and resubmit the formulary. The board shall not adopt 2084  
any rule that does not conform to a formulary developed by the 2085  
committee. 2086

The exclusionary formulary shall permit, in a manner 2087



consistent with section 4723.481 of the Revised Code, the 2088  
prescribing of controlled substances, including drugs that 2089  
contain buprenorphine used in medication-assisted treatment and 2090  
both oral and long-acting opioid antagonists. The formulary 2091  
shall not permit the prescribing or furnishing of any of the 2092  
following: 2093

(1) A drug or device to perform or induce an abortion; 2094

(2) A drug or device prohibited by federal or state law. 2095

(C) In addition to the rules described in division (B) of 2096  
this section, the board shall adopt rules under this section 2097  
that do the following: 2098

(1) Establish standards for board approval of the course 2099  
of study in advanced pharmacology and related topics required by 2100  
~~section~~sections 4723.482 and 4723.551 of the Revised Code; 2101

(2) Establish requirements for board approval of the two- 2102  
hour course of instruction in the laws of this state as required 2103  
under division (C) (1) of section 4723.482 of the Revised Code; 2104

(3) Establish criteria for the components of the standard 2105  
care arrangements described in section 4723.431 of the Revised 2106  
Code that apply to the authority to prescribe, including the 2107  
components that apply to the authority to prescribe schedule II 2108  
controlled substances. The rules shall be consistent with that 2109  
section and include all of the following: 2110

(a) Quality assurance standards; 2111

(b) Standards for periodic review by a collaborating 2112  
physician or podiatrist of the records of patients treated by 2113  
the clinical nurse specialist, certified nurse-midwife, or 2114  
certified nurse practitioner; 2115

(c) Acceptable travel time between the location at which 2116  
the clinical nurse specialist, certified nurse-midwife, or 2117  
certified nurse practitioner is engaging in the prescribing 2118  
components of the nurse's practice and the location of the 2119  
nurse's collaborating physician or podiatrist; 2120

(d) Any other criteria recommended by the former committee 2121  
on prescriptive governance. 2122

Sec. 4723.53. As used in sections 4723.53 to 4723.60 of 2123  
the Revised Code: 2124

(A) "Accreditation commission for midwifery education" 2125  
means the organization known by that name or its successor 2126  
organization. 2127

(B) "American midwifery certification board" means the 2128  
organization known by that name or its successor organization. 2129

(C) "Midwifery education accreditation council" means the 2130  
organization known by that name or its successor organization. 2131

(D) "North American registry of midwives" means the 2132  
organization known by that name or its successor organization. 2133

Sec. 4723.54. (A) (1) Except as provided in division (B) of 2134  
this section, no individual shall knowingly practice as a 2135  
certified midwife unless the individual holds a current, valid 2136  
license to practice as a certified midwife issued under section 2137  
4723.56 of the Revised Code. 2138

(2) Except as provided in division (B) of this section, no 2139  
individual shall knowingly practice as a certified professional 2140  
midwife unless the individual holds a current, valid license to 2141  
practice as a certified professional midwife issued under 2142  
section 4723.56 of the Revised Code. 2143

(B) Division (A) of this section does not apply to any of 2144  
the following: 2145

(1) A physician authorized under Chapter 4731. of the 2146  
Revised Code to practice medicine and surgery, osteopathic 2147  
medicine and surgery, or podiatric medicine and surgery; 2148

(2) A physician assistant authorized under Chapter 4730. 2149  
of the Revised Code to practice as a physician assistant; 2150

(3) A registered nurse, advanced practice registered 2151  
nurse, or licensed practical nurse authorized under Chapter 2152  
4723. of the Revised Code to practice nursing as a registered 2153  
nurse, advanced practice registered nurse, or licensed practical 2154  
nurse; 2155

(4) A person who provides midwifery services without a 2156  
license while engaging in good faith in the practice of the 2157  
religious tenets of any church or in any religious act; 2158

(5) A person who is not engaged in the practice of the 2159  
religious tenets of any church or in any religious act but who 2160  
provides midwifery services without a license to others engaging 2161  
in good faith in the practice of the religious tenets of any 2162  
church or in any religious act; 2163

(6) A person who is a member of a Native American 2164  
community and provides midwifery services without a license to 2165  
another member of the community. 2166

**Sec. 4723.55.** (A) An individual seeking a license to 2167  
practice as a certified midwife or certified professional 2168  
midwife shall file with the board of nursing an application in a 2169  
manner prescribed by the board. The application shall include 2170  
all the information the board considers necessary to process the 2171  
application, including evidence satisfactory to the board that 2172

<u>the applicant meets the requirements specified in division (B)</u>	2173
<u>(1) or (2) of this section.</u>	2174
<u>(B)(1) To be eligible to receive a license to practice as</u>	2175
<u>a certified midwife, an applicant shall demonstrate to the board</u>	2176
<u>that the applicant meets all of the following requirements:</u>	2177
<u>(a) Is at least eighteen years of age;</u>	2178
<u>(b) Has attained a master's degree or higher;</u>	2179
<u>(c) Has graduated from a midwifery education program</u>	2180
<u>accredited by the accreditation commission for midwifery</u>	2181
<u>education;</u>	2182
<u>(d) Is certified by the American midwifery certification</u>	2183
<u>board;</u>	2184
<u>(e) Is certified in neonatal and adult cardiopulmonary</u>	2185
<u>resuscitation;</u>	2186
<u>(f) Has successfully completed the course of study in</u>	2187
<u>advanced pharmacology required by section 4723.551 of the</u>	2188
<u>Revised Code.</u>	2189
<u>(2)(a) To be eligible to receive a license to practice as</u>	2190
<u>a certified professional midwife, an applicant shall demonstrate</u>	2191
<u>to the board that the applicant meets all of the following</u>	2192
<u>requirements:</u>	2193
<u>(i) Is at least eighteen years of age;</u>	2194
<u>(ii) Has attained a high school degree or equivalent;</u>	2195
<u>(iii) Has graduated from a midwifery education program</u>	2196
<u>accredited by the midwifery education accreditation council;</u>	2197
<u>(iv) Is certified by the north American registry of</u>	2198
<u>midwives;</u>	2199

(v) Is certified in neonatal and adult cardiopulmonary resuscitation. 2200  
2201

(b) In lieu of meeting the requirements described in division (B) (2) (a) (iii) or (iv) of this section, an applicant may demonstrate either of the following: 2202  
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(i) That the applicant holds a current, valid license to practice as a certified professional midwife issued by another state and remains in good standing with the entity responsible for issuing that license; 2205  
2206  
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2208

(ii) That the applicant is certified by the north American registry of midwives and holds a midwifery bridge certificate. 2209  
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(C) The board shall review all applications received under this section. After receiving an application it considers complete, the board shall determine whether the applicant meets the requirements for a license to practice as a certified midwife or a license to practice as a certified professional midwife. 2211  
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**Sec. 4723.551.** (A) An applicant for a license to practice as a certified midwife shall include with the application submitted under section 4723.55 of the Revised Code evidence of successfully completing the course of study in advanced pharmacology and related topics in accordance with the requirements specified in division (B) of this section. 2217  
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(B) With respect to the course of study in advanced pharmacology and related topics, all of the following requirements apply: 2223  
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(1) The course of study shall be completed not more than five years before the application is filed. 2226  
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- (2) The course of study shall include at least forty-five contact hours. 2228  
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- (3) The course of study shall meet the requirements to be approved by the board in accordance with standards established in rules adopted under section 4723.50 of the Revised Code. 2230  
2231  
2232
- (4) The content of the course of study shall be specific to midwifery. 2233  
2234
- (5) The instruction provided in the course of study shall include all of the following: 2235  
2236
- (a) A minimum of thirty-six contact hours of instruction in advanced pharmacology that includes pharmacokinetic principles and clinical application and the use of drugs and therapeutic devices in the prevention of illness and maintenance of health; 2237  
2238  
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- (b) Instruction in the fiscal and ethical implications of prescribing drugs and therapeutic devices; 2242  
2243
- (c) Instruction in the state and federal laws that apply to the authority to prescribe; 2244  
2245
- (d) Instruction that is specific to schedule II controlled substances, including instruction in all of the following: 2246  
2247
- (i) Indications for the use of schedule II controlled substances in drug therapies; 2248  
2249
- (ii) The most recent guidelines for pain management therapies, as established by state and national organizations such as the Ohio pain initiative and the American pain society; 2250  
2251  
2252
- (iii) Fiscal and ethical implications of prescribing schedule II controlled substances; 2253  
2254

(iv) State and federal laws that apply to the authority to 2255  
prescribe schedule II controlled substances; 2256

(v) Prevention of abuse and diversion of schedule II 2257  
controlled substances, including identification of the risk of 2258  
abuse and diversion, recognition of abuse and diversion, types 2259  
of assistance available for prevention of abuse and diversion, 2260  
and methods of establishing safeguards against abuse and 2261  
diversion. 2262

**Sec. 4723.56.** (A) If the board of nursing determines under 2263  
section 4723.55 of the Revised Code that an applicant meets the 2264  
requirements for a license to practice as a certified midwife or 2265  
a license to practice as a certified professional midwife, the 2266  
secretary of the board shall issue the respective license to the 2267  
applicant. 2268

(B) Each license shall be valid for a two-year period 2269  
unless revoked or suspended, shall expire on the date that is 2270  
two years after the date of issuance, and may be renewed for 2271  
additional two-year periods in accordance with rules adopted 2272  
under section 4723.59 of the Revised Code. 2273

(C) To renew a license to practice as a certified midwife 2274  
or a license to practice as a certified professional midwife, an 2275  
applicant for renewal shall demonstrate the following to the 2276  
board: 2277

(1) That the applicant has maintained certification in 2278  
neonatal and adult cardiopulmonary resuscitation; 2279

(2) In the case of a certified midwife, that the applicant 2280  
has satisfied the continuing education requirements of the 2281  
American midwifery certification board; 2282

(3) In the case of a certified professional midwife, that 2283

the applicant has satisfied the continuing education 2284  
requirements of the north American registry of midwives. 2285

**Sec. 4723.57.** (A) An individual who holds a current, valid 2286  
license to practice as a certified midwife may, in collaboration 2287  
with one or more physicians, engage in one or more of the 2288  
following activities: 2289

(1) Providing primary health care services for women from 2290  
adolescence and beyond menopause, including the independent 2291  
provision of gynecologic and family planning services, 2292  
preconception care, and care during pregnancy, childbirth, and 2293  
the postpartum period; 2294

(2) Attending births in hospitals, homes, medical offices, 2295  
and freestanding birthing centers; 2296

(3) Providing care for normal newborns during the first 2297  
twenty-eight days of life; 2298

(4) Providing initial and ongoing comprehensive 2299  
assessment, diagnosis, and treatment; 2300

(5) Conducting physical examinations; 2301

(6) Ordering and interpreting laboratory and diagnostic 2302  
tests; 2303

(7) Providing care that includes health promotion, disease 2304  
prevention, and individualized wellness education and 2305  
counseling. 2306

(B) An individual who holds a current, valid license to 2307  
practice as a certified professional midwife may engage in one 2308  
or more of the following activities: 2309

(1) Offering care, education, counseling, and support to 2310



<u>women and their families during pregnancy, birth, and the</u>	2311
<u>postpartum period;</u>	2312
<u>(2) Attending births in hospitals, homes, medical offices,</u>	2313
<u>and freestanding birthing centers;</u>	2314
<u>(3) Providing ongoing care throughout pregnancy and hands-</u>	2315
<u>on care during labor, birth, and the immediate postpartum</u>	2316
<u>period;</u>	2317
<u>(4) Providing maternal and well-baby care for the six- to</u>	2318
<u>eight-week period following delivery;</u>	2319
<u>(5) Providing initial and ongoing comprehensive</u>	2320
<u>assessment, diagnosis, and treatment;</u>	2321
<u>(6) Recognizing abnormal or dangerous conditions requiring</u>	2322
<u>consultations with or referrals to other licensed health care</u>	2323
<u>professionals;</u>	2324
<u>(7) Conducting physical examinations;</u>	2325
<u>(8) Ordering and interpreting laboratory and diagnostic</u>	2326
<u>tests, including without a physician's order.</u>	2327
<u>(C) An individual who holds a current, valid license to</u>	2328
<u>practice as a certified professional midwife shall not engage in</u>	2329
<u>any of the following activities:</u>	2330
<u>(1) Administering cytotec or oxytocics, including pitocin</u>	2331
<u>and methergine, except when indicated during the postpartum</u>	2332
<u>period;</u>	2333
<u>(2) Using forceps or vacuum extraction to assist with</u>	2334
<u>birth;</u>	2335
<u>(3) Performing any operative procedures or surgical</u>	2336
<u>repairs other than the following: artificial rupture of</u>	2337

membranes; episiotomies; perineal, vaginal, or labial repairs; 2338  
clamping or cutting the umbilical cord. 2339

(D) For the purpose of engaging in one or more of the 2340  
activities permitted under division (B) of this section, a 2341  
certified professional midwife may obtain and administer the 2342  
following: 2343

(1) Subject to division (C) of this section, an 2344  
antihemorrhagic agent, including tranexamic acid, pitocin, 2345  
oxytocin, misoprostol, and methergine; 2346

(2) Intravenous fluids to stabilize the laboring or 2347  
postpartum patient or as necessary to administer another drug 2348  
authorized by this division; 2349

(3) Neonatal injectable vitamin K; 2350

(4) Newborn antibiotic eye prophylaxis; 2351

(5) Oxygen; 2352

(6) Intravenous antibiotics for group B streptococcal 2353  
prophylaxis; 2354

(7) Rho (D) immune globulin; 2355

(8) Local anesthesia; 2356

(9) Epinephrine, but only to address an adverse reaction 2357  
to a medication; 2358

(10) A drug prescribed for the patient by a prescriber. 2359

A certified professional midwife also may obtain, without 2360  
a physician's order, one or more supplies necessary to 2361  
administer any of the drugs described in division (D) of this 2362  
section. 2363

(E) This section does not authorize a certified professional midwife to prescribe, personally furnish, obtain, or administer either of the following: 2364  
2365  
2366

(1) Any controlled substance as defined in section 3719.01 of the Revised Code; 2367  
2368

(2) A drug or device to perform or induce an abortion. 2369

(F) When engaging in any of the activities permitted under this section, a certified midwife or certified professional midwife shall maintain appropriate medical records regarding patient history, treatment, and outcomes. 2370  
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**Sec. 4723.58.** (A) Before engaging in any of the activities permitted under section 4723.43 or 4723.57 of the Revised Code, including attending a home birth or providing care during a high-risk pregnancy, a certified nurse-midwife, certified midwife, or certified professional midwife shall first obtain a patient's informed consent. In doing so, the following information shall be exchanged in writing between the certified nurse-midwife, certified professional midwife, or certified professional midwife and patient: 2374  
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(1) The name and license number of the certified nurse-midwife, certified midwife, or certified professional midwife; 2383  
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(2) The patient's name, address, telephone number, and primary care provider, if the patient has one; 2385  
2386

(3) A description of the certified nurse-midwife's, certified midwife's, or certified professional midwife's education, training, and experience in nurse-midwifery or midwifery; 2387  
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(4) A description of the certified nurse-midwife's, 2391

<u>certified midwife's, or certified professional midwife's peer</u>	2392
<u>review process;</u>	2393
<u>(5) The certified nurse-midwife's, certified midwife's, or</u>	2394
<u>certified professional midwife's practice philosophy;</u>	2395
<u>(6) A promise to provide the patient, upon request, with</u>	2396
<u>separate documents describing the rules governing the practice</u>	2397
<u>of nurse-midwifery or midwifery, including a list of conditions</u>	2398
<u>indicating the need for consultation, referral, transfer, or</u>	2399
<u>mandatory transfer and the certified nurse-midwife's, certified</u>	2400
<u>midwife's, or certified professional midwife's personal written</u>	2401
<u>practice guidelines;</u>	2402
<u>(7) A written plan for medical consultation and transfer</u>	2403
<u>of care;</u>	2404
<u>(8) A description of any hospital care and procedures that</u>	2405
<u>may be necessary in the event of an emergency transfer or care;</u>	2406
<u>(9) A description of the services provided to the patient</u>	2407
<u>by the certified nurse-midwife, certified midwife, or certified</u>	2408
<u>professional midwife;</u>	2409
<u>(10) That the certified nurse-midwife, certified midwife,</u>	2410
<u>or certified professional midwife holds a current, valid license</u>	2411
<u>to practice issued under this chapter;</u>	2412
<u>(11) The availability of a grievance process;</u>	2413
<u>(12) Whether the certified nurse-midwife, certified</u>	2414
<u>midwife, or certified professional midwife is covered by</u>	2415
<u>professional liability insurance;</u>	2416
<u>(13) Any other information required in rules adopted by</u>	2417
<u>the board.</u>	2418

(B) Once the required information has been exchanged and 2419  
if the patient consents to treatment, the patient and certified 2420  
nurse-midwife, certified midwife, or certified professional 2421  
midwife shall sign a written document to indicate as such. The 2422  
certified nurse-midwife, certified midwife, or certified 2423  
professional midwife shall retain a copy of the document for at 2424  
least four years from the date on which the document was signed. 2425

**Sec. 4723.581.** (A) The board of nursing shall adopt rules 2426  
establishing the circumstances in which a certified nurse- 2427  
midwife, certified midwife, or certified professional midwife 2428  
shall be prohibited from attending a home birth, which may 2429  
include a high-risk pregnancy. In adopting the rules, the board 2430  
shall allow a midwife to attend any of the following as a home 2431  
birth only if the conditions described in division (B) of this 2432  
section are satisfied: a vaginal birth after cesarean, birth of 2433  
twins, or breech birth. 2434

(B) In the event of a home birth described in division (A) 2435  
of this section, a certified nurse-midwife, certified midwife, 2436  
or certified professional midwife may attend the birth only if 2437  
all of the following conditions are satisfied: 2438

(1) In addition to the informed consent required under 2439  
section 4723.58 of the Revised Code, the certified nurse- 2440  
midwife, certified midwife, or certified professional midwife 2441  
obtains the patient's written informed consent for the vaginal 2442  
birth after cesarean, birth of twins, or breech birth, including 2443  
a description of risks associated with the procedure. 2444

(2) The certified nurse-midwife, certified midwife, or 2445  
certified professional midwife consults with a physician or 2446  
other health care provider about the patient and together with 2447  
the physician or provider determines whether referral is 2448

appropriate for the patient. 2449

If a referral is determined to be appropriate and the 2450  
patient consents to the referral, the certified nurse-midwife, 2451  
certified midwife, or certified professional midwife shall refer 2452  
the patient to the physician or provider. If the patient refuses 2453  
the referral, the certified nurse-midwife, certified midwife, or 2454  
certified professional midwife shall document the refusal and 2455  
may continue to provide care to the patient, including attending 2456  
the vaginal birth after cesarean, birth of twins, or breech 2457  
birth at home. 2458

(3) The certified nurse-midwife, certified midwife, or 2459  
certified professional midwife satisfies any other conditions 2460  
required in rules adopted by the board of nursing. 2461

(C) In adopting rules under this section, the board of 2462  
nursing shall do both of the following: 2463

(1) Consider the recommendations of the midwifery advisory 2464  
council and any relevant peer-reviewed medical literature; 2465

(2) Specify the content and format of the document to be 2466  
used when obtaining informed consent as described in this 2467  
section. 2468

**Sec. 4723.582.** (A) As used in this section and section 2469  
4723.583 of the Revised Code, "emergency medical service," 2470  
"emergency medical service personnel," and "emergency medical 2471  
service organization" have the same meanings as in section 2472  
4765.01 of the Revised Code. 2473

(B) For any pregnancy or childbirth in which a certified 2474  
nurse-midwife, certified midwife, or certified professional 2475  
midwife provides care and a home birth is planned, both of the 2476  
following apply: 2477

(1) The certified nurse-midwife, certified midwife, or certified professional midwife shall create an individualized transfer of care plan with each patient. 2478  
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(2) The certified nurse-midwife, certified midwife, or certified professional midwife shall assess the status of the patient, fetus, and newborn throughout the maternity care cycle and shall determine when or if a transfer to a hospital is necessary. 2481  
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(C) Each individualized transfer of care plan shall contain all of the following: 2486  
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(1) The name and location of geographically adjacent hospitals and other facilities that are appropriately equipped to provide emergency care, obstetrical care, and newborn care; 2488  
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(2) The approximate travel time to each hospital or facility; 2491  
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(3) A list of the modes of transport services available, including an emergency medical service organization available by calling 9-1-1; 2493  
2494  
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(4) The requirements for activating each mode of transportation; 2496  
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(5) The mechanism by which medical records and other information concerning the patient may be rapidly transmitted to each hospital or facility; 2498  
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(6) Each hospital's or facility's preferences regarding the registration of a patient prior to transfer as well as the hospital's or facility's procedures for confirming such a registration; 2501  
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(7) Contact information for either a health care provider 2505

or practice group who has agreed in advance to accept patients 2506  
in transfer, or a hospital's or facility's preferred method of 2507  
accessing care by the hospital's or facility's designated 2508  
provider on call; 2509

(8) Any other information required in rules adopted by the 2510  
board of nursing. 2511

(D) When it becomes necessary to transfer a patient, a 2512  
certified nurse-midwife, certified midwife, or certified 2513  
professional midwife shall notify the receiving provider, 2514  
hospital, or facility of all of the following: 2515

(1) The incoming transfer; 2516

(2) The reason for the transfer; 2517

(3) A brief relevant clinical history; 2518

(4) The planned mode of transport; 2519

(5) The expected time of arrival; 2520

(6) Any other information required in rules adopted by the 2521  
board. 2522

The certified nurse-midwife, certified midwife, or 2523  
certified professional midwife shall continue to provide routine 2524  
or urgent care en route in coordination with any emergency 2525  
medical services personnel or emergency medical service 2526  
organization and shall address the psychosocial needs of the 2527  
patient during the change of birth setting. 2528

(E) On arrival at the hospital or facility, the certified 2529  
nurse-midwife, certified midwife, or certified professional 2530  
midwife shall do all of the following: 2531

(1) Provide a verbal report that includes details on the 2532



<u>patient's current health status and the need for urgent care;</u>	2533
<u>(2) Provide a legible copy of relevant prenatal and labor</u>	2534
<u>medical records;</u>	2535
<u>(3) Transfer clinical responsibility to the receiving</u>	2536
<u>provider, hospital, or facility;</u>	2537
<u>(4) Satisfy any other requirement established in rules</u>	2538
<u>adopted by the board of nursing.</u>	2539
<u>If the patient chooses, the certified nurse-midwife,</u>	2540
<u>certified midwife, or certified professional midwife may remain</u>	2541
<u>at the hospital or facility to provide continuous support. The</u>	2542
<u>certified nurse-midwife, certified midwife, or certified</u>	2543
<u>professional midwife also may continue to provide midwifery</u>	2544
<u>services, but only if the hospital or facility has granted the</u>	2545
<u>nurse-midwife, midwife, or professional midwife clinical</u>	2546
<u>privileges. Whenever possible, the patient and her newborn shall</u>	2547
<u>be together during the transfer and after admission to the</u>	2548
<u>hospital or facility.</u>	2549
<u><b>Sec. 4723.583.</b> Emergency medical service personnel or an</u>	2550
<u>emergency medical service organization, hospital, facility, or</u>	2551
<u>physician that provides services or care following an adverse</u>	2552
<u>incident as defined in section 4723.584 of the Revised Code or</u>	2553
<u>during and after a transfer of care as described in section</u>	2554
<u>4723.582 of the Revised Code are not liable in damages in a tort</u>	2555
<u>or other civil action for injury or loss to person or property</u>	2556
<u>arising from the services or care, unless the services or care</u>	2557
<u>are provided in a manner that constitutes willful or wanton</u>	2558
<u>misconduct.</u>	2559
<u><b>Sec. 4723.584.</b> (A) As used in this section, "adverse</u>	2560
<u>incident" means an incident over which a certified nurse-</u>	2561

midwife, certified midwife, or certified professional midwife 2562  
could exercise control, that is associated with an attempted or 2563  
completed birth in a setting or facility other than a hospital, 2564  
and that results in one or more of the following injuries or 2565  
conditions: 2566

(1) A maternal death that occurs during delivery or within 2567  
forty-two days after delivery; 2568

(2) The transfer of a maternal patient to a hospital 2569  
intensive care unit; 2570

(3) A maternal patient experiencing hemorrhagic shock or 2571  
requiring a transfusion of more than four units of blood or 2572  
blood products; 2573

(4) A fetal or newborn death, including a stillbirth, 2574  
associated with an obstetrical delivery; 2575

(5) A transfer of a newborn to a neonatal intensive care 2576  
unit due to a traumatic physical or neurological birth injury, 2577  
including any degree of a brachial plexus injury; 2578

(6) A transfer of a newborn to a neonatal intensive care 2579  
unit within the first seventy-two hours after birth if the 2580  
newborn remains in such unit for more than seventy-two hours; 2581

(7) Any other condition as determined by board of nursing 2582  
rule. 2583

(B) Beginning July 1, 2023, a certified nurse-midwife, 2584  
certified midwife, or certified professional midwife who attends 2585  
a birth planned for a facility or setting other than a hospital 2586  
must report any adverse incident, along with a medical summary 2587  
of events, to both of the following within fifteen days after 2588  
the adverse incident occurs: 2589

<u>(1) The board of nursing;</u>	2590
<u>(2) The Ohio perinatal quality collaborative.</u>	2591
<u>(C) The board of nursing shall review each incident report</u>	2592
<u>and determine, in consultation with the midwifery advisory</u>	2593
<u>council, whether to impose sanctions under section 4723.28 of</u>	2594
<u>the Revised Code.</u>	2595
<u>(D) Beginning on the date that is one year after the</u>	2596
<u>effective date of this section, each certified nurse-midwife,</u>	2597
<u>certified midwife, or certified professional midwife shall</u>	2598
<u>report annually to the board of nursing the following</u>	2599
<u>information regarding cases in which the midwife provided</u>	2600
<u>services when the intended place of birth at the onset of care</u>	2601
<u>was in a facility or setting other than a hospital:</u>	2602
<u>(1) The total number of patients provided midwifery</u>	2603
<u>services at the onset of care;</u>	2604
<u>(2) The number of live births attended;</u>	2605
<u>(3) The number of cases of fetal demise, newborn deaths,</u>	2606
<u>and maternal deaths attended as a certified nurse-midwife,</u>	2607
<u>certified midwife, or certified professional midwife at the</u>	2608
<u>discovery of the demise or death;</u>	2609
<u>(4) The number, reason for, and outcome of each transport</u>	2610
<u>of a patient in the antepartum, intrapartum period, or immediate</u>	2611
<u>postpartum period;</u>	2612
<u>(5) A brief description of any complications resulting in</u>	2613
<u>the morbidity or mortality of a maternal patient or a newborn;</u>	2614
<u>(6) The planned delivery setting and the actual setting;</u>	2615
<u>(7) Any other information required in rules adopted by the</u>	2616

board. 2617

(E) The board shall adopt rules to implement this section 2618  
and shall develop a form to be used for the reporting required 2619  
under divisions (B) and (D) of this section. 2620

**Sec. 4723.59.** (A) In addition to the rules described in 2621  
section 4723.07 of the Revised Code, the board of nursing shall 2622  
adopt rules establishing standards and procedures for the 2623  
licensure and regulation of certified midwives and certified 2624  
professional midwives, including those establishing license 2625  
application and renewal procedures. The rules shall be adopted 2626  
in accordance with Chapter 119. of the Revised Code. 2627

(B) The board also may adopt any other rules it considers 2628  
necessary to implement and administer sections 4723.53 to 2629  
4723.60 of the Revised Code. The rules may require the 2630  
completion of a criminal records check and, in the case of a 2631  
license to practice as a certified midwife issued by another 2632  
jurisdiction, may provide for licensure by endorsement. 2633

**Sec. 4723.60.** (A) There is hereby created within the board 2634  
of nursing the midwifery advisory council. The council shall 2635  
consist of all of the following members: 2636

(1) Two certified nurse-midwives or certified midwives, 2637  
including, if applicable, the certified nurse-midwife or 2638  
certified midwife appointed to the board as described in section 2639  
4723.02 of the Revised Code; 2640

(2) Three certified professional midwives, including, if 2641  
applicable, the certified professional midwife appointed to the 2642  
board as described in section 4723.02 of the Revised Code; 2643

(3) One physician who is board-certified in obstetrics and 2644  
gynecology, as those designations are issued by a medical 2645

specialty certifying board recognized by the American board of 2646  
medical specialties or American osteopathic association, and 2647  
with experience consulting with midwives who provide midwifery 2648  
services in locations other than hospitals; 2649

(4) One physician who is board-certified in neonatal 2650  
medicine, as that designation is issued by a medical specialty 2651  
certifying board recognized by the American board of medical 2652  
specialties or American osteopathic association, and with 2653  
experience consulting with midwives who provide midwifery 2654  
services in locations other than hospitals; 2655

(5) One physician with experience in both of the 2656  
following: 2657

(a) Providing care to families, mothers, and infants; 2658

(b) Consulting with midwives who provide midwifery 2659  
services in locations other than hospitals. 2660

(6) One member of the public who has experience utilizing 2661  
or receiving midwifery services in locations other than 2662  
hospitals. 2663

Of the members who are certified midwives and certified 2664  
professional midwives, each shall obtain licensure as a 2665  
certified midwife or certified professional midwife under this 2666  
chapter not later than January 1, 2025. 2667

(B) The board of nursing shall appoint the members 2668  
described in division (A) of this section. The board may solicit 2669  
nominations for initial appointments and for filling any 2670  
vacancies from individuals or organizations with an interest in 2671  
midwifery services. If the board does not receive any 2672  
nominations or receives an insufficient number of nominations, 2673  
the board shall appoint members and fill vacancies on its own 2674

advice. 2675

Initial appointments to the council shall be made not 2676  
later than ninety days after the effective date of this section. 2677  
Of the initial appointments described in division (A) of this 2678  
section, four shall be for terms of three years and five shall 2679  
be for terms of four years. Thereafter, terms shall be for four 2680  
years, with each term ending on the same day of the same month 2681  
as did the term that it succeeds. Vacancies shall be filled in 2682  
the same manner as appointments. 2683

When the term of any member expires, a successor shall be 2684  
appointed in the same manner as the initial appointment. Any 2685  
member appointed to fill a vacancy occurring prior to the 2686  
expiration of the term for which the member's predecessor was 2687  
appointed shall hold office for the remainder of that term. A 2688  
member shall continue in office subsequent to the expiration 2689  
date of the member's term until the member's successor takes 2690  
office or until a period of sixty days has elapsed, whichever 2691  
occurs first. A member may be reappointed. 2692

(C) The council shall organize by selecting a chairperson 2693  
from among its members. The council may select a new chairperson 2694  
at any time. Five members constitute a quorum for the 2695  
transaction of official business. Members shall serve without 2696  
compensation but shall receive payment for their actual and 2697  
necessary expenses incurred in the performance of their official 2698  
duties. The expenses shall be paid by the board of nursing. 2699

(D) The council shall advise and make recommendations to 2700  
the board of nursing regarding the practice and regulation of 2701  
nurse-midwives and midwives. The board shall consider such 2702  
advice and recommendations when adopting any rules governing the 2703  
practice of nurse-midwifery or midwifery, including rules to 2704

address the following: 2705

(1) Circumstances in which attending a home birth is prohibited, as described in section 4723.581 of the Revised Code; 2706  
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(2) Limitations on providing care during a high-risk pregnancy, including when a home birth is planned; 2709  
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(3) Adverse incident reporting and annual reporting, both required under section 4723.584 of the Revised Code; 2711  
2712

(4) Obtaining a patient's informed consent, as described in section 4723.58 of the Revised Code; 2713  
2714

(5) Creating an individualized transfer of care plan, as described in section 4723.582 of the Revised Code; 2715  
2716

(6) Satisfying continuing education requirements, as described in section 4723.56 of the Revised Code. 2717  
2718

**Sec. 4723.91.** On receipt of a notice pursuant to section 3123.43 of the Revised Code, the board of nursing shall comply with sections 3123.41 to 3123.50 of the Revised Code and any applicable rules adopted under section 3123.63 of the Revised Code with respect to a nursing license, midwifery license, medication aide certificate, dialysis technician certificate, or community health worker certificate issued pursuant to this chapter. 2719  
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**Sec. 4723.99.** (A) Except as provided in division (B) of this section, whoever violates section 4723.03, 4723.44, 4723.54, 4723.653, or 4723.73 of the Revised Code is guilty of a felony of the fifth degree on a first offense and a felony of the fourth degree on each subsequent offense. 2727  
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(B) Each of the following is guilty of a minor 2732

misdemeanor: 2733

(1) A registered nurse, advanced practice registered nurse, or licensed practical nurse who violates division (A), (B), (C), or (D) of section 4723.03 of the Revised Code by reason of a license to practice nursing that has lapsed for failure to renew or by practicing nursing after a license has been classified as inactive; 2734  
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(2) A medication aide who violates section 4723.653 of the Revised Code by reason of a medication aide certificate that has lapsed for failure to renew or by administering medication as a medication aide after a certificate has been classified as inactive. 2740  
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**Sec. 4731.22.** (A) The state medical board, by an affirmative vote of not fewer than six of its members, may limit, revoke, or suspend a license or certificate to practice or certificate to recommend, refuse to grant a license or certificate, refuse to renew a license or certificate, refuse to reinstate a license or certificate, or reprimand or place on probation the holder of a license or certificate if the individual applying for or holding the license or certificate is found by the board to have committed fraud during the administration of the examination for a license or certificate to practice or to have committed fraud, misrepresentation, or deception in applying for, renewing, or securing any license or certificate to practice or certificate to recommend issued by the board. 2745  
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(B) Except as provided in division (P) of this section, the board, by an affirmative vote of not fewer than six members, shall, to the extent permitted by law, limit, revoke, or suspend a license or certificate to practice or certificate to 2759  
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recommend, refuse to issue a license or certificate, refuse to  
renew a license or certificate, refuse to reinstate a license or  
certificate, or reprimand or place on probation the holder of a  
license or certificate for one or more of the following reasons:

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

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

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

(4) Willfully betraying a professional confidence.

For purposes of this division, "willfully betraying a  
professional confidence" does not include providing any  
information, documents, or reports under sections 307.621 to  
307.629 of the Revised Code to a child fatality review board;  
does not include providing any information, documents, or  
reports under sections 307.631 to 307.6410 of the Revised Code  
to a drug overdose fatality review committee, a suicide fatality  
review committee, or hybrid drug overdose fatality and suicide

fatality review committee; does not include providing any 2792  
information, documents, or reports to the director of health 2793  
pursuant to guidelines established under section 3701.70 of the 2794  
Revised Code; does not include written notice to a mental health 2795  
professional under section 4731.62 of the Revised Code; and does 2796  
not include the making of a report of an employee's use of a 2797  
drug of abuse, or a report of a condition of an employee other 2798  
than one involving the use of a drug of abuse, to the employer 2799  
of the employee as described in division (B) of section 2305.33 2800  
of the Revised Code. Nothing in this division affects the 2801  
immunity from civil liability conferred by section 2305.33 or 2802  
4731.62 of the Revised Code upon a physician who makes a report 2803  
in accordance with section 2305.33 or notifies a mental health 2804  
professional in accordance with section 4731.62 of the Revised 2805  
Code. As used in this division, "employee," "employer," and 2806  
"physician" have the same meanings as in section 2305.33 of the 2807  
Revised Code. 2808

(5) Making a false, fraudulent, deceptive, or misleading 2809  
statement in the solicitation of or advertising for patients; in 2810  
relation to the practice of medicine and surgery, osteopathic 2811  
medicine and surgery, podiatric medicine and surgery, or a 2812  
limited branch of medicine; or in securing or attempting to 2813  
secure any license or certificate to practice issued by the 2814  
board. 2815

As used in this division, "false, fraudulent, deceptive, 2816  
or misleading statement" means a statement that includes a 2817  
misrepresentation of fact, is likely to mislead or deceive 2818  
because of a failure to disclose material facts, is intended or 2819  
is likely to create false or unjustified expectations of 2820  
favorable results, or includes representations or implications 2821  
that in reasonable probability will cause an ordinarily prudent 2822

person to misunderstand or be deceived.	2823
(6) A departure from, or the failure to conform to,	2824
minimal standards of care of similar practitioners under the	2825
same or similar circumstances, whether or not actual injury to a	2826
patient is established;	2827
(7) Representing, with the purpose of obtaining	2828
compensation or other advantage as personal gain or for any	2829
other person, that an incurable disease or injury, or other	2830
incurable condition, can be permanently cured;	2831
(8) The obtaining of, or attempting to obtain, money or	2832
anything of value by fraudulent misrepresentations in the course	2833
of practice;	2834
(9) A plea of guilty to, a judicial finding of guilt of,	2835
or a judicial finding of eligibility for intervention in lieu of	2836
conviction for, a felony;	2837
(10) Commission of an act that constitutes a felony in	2838
this state, regardless of the jurisdiction in which the act was	2839
committed;	2840
(11) A plea of guilty to, a judicial finding of guilt of,	2841
or a judicial finding of eligibility for intervention in lieu of	2842
conviction for, a misdemeanor committed in the course of	2843
practice;	2844
(12) Commission of an act in the course of practice that	2845
constitutes a misdemeanor in this state, regardless of the	2846
jurisdiction in which the act was committed;	2847
(13) A plea of guilty to, a judicial finding of guilt of,	2848
or a judicial finding of eligibility for intervention in lieu of	2849
conviction for, a misdemeanor involving moral turpitude;	2850

(14) Commission of an act involving moral turpitude that 2851  
constitutes a misdemeanor in this state, regardless of the 2852  
jurisdiction in which the act was committed; 2853

(15) Violation of the conditions of limitation placed by 2854  
the board upon a license or certificate to practice; 2855

(16) Failure to pay license renewal fees specified in this 2856  
chapter; 2857

(17) Except as authorized in section 4731.31 of the 2858  
Revised Code, engaging in the division of fees for referral of 2859  
patients, or the receiving of a thing of value in return for a 2860  
specific referral of a patient to utilize a particular service 2861  
or business; 2862

(18) Subject to section 4731.226 of the Revised Code, 2863  
violation of any provision of a code of ethics of the American 2864  
medical association, the American osteopathic association, the 2865  
American podiatric medical association, or any other national 2866  
professional organizations that the board specifies by rule. The 2867  
state medical board shall obtain and keep on file current copies 2868  
of the codes of ethics of the various national professional 2869  
organizations. The individual whose license or certificate is 2870  
being suspended or revoked shall not be found to have violated 2871  
any provision of a code of ethics of an organization not 2872  
appropriate to the individual's profession. 2873

For purposes of this division, a "provision of a code of 2874  
ethics of a national professional organization" does not include 2875  
any provision that would preclude the making of a report by a 2876  
physician of an employee's use of a drug of abuse, or of a 2877  
condition of an employee other than one involving the use of a 2878  
drug of abuse, to the employer of the employee as described in 2879

division (B) of section 2305.33 of the Revised Code. Nothing in 2880  
this division affects the immunity from civil liability 2881  
conferred by that section upon a physician who makes either type 2882  
of report in accordance with division (B) of that section. As 2883  
used in this division, "employee," "employer," and "physician" 2884  
have the same meanings as in section 2305.33 of the Revised 2885  
Code. 2886

(19) Inability to practice according to acceptable and 2887  
prevailing standards of care by reason of mental illness or 2888  
physical illness, including, but not limited to, physical 2889  
deterioration that adversely affects cognitive, motor, or 2890  
perceptive skills. 2891

In enforcing this division, the board, upon a showing of a 2892  
possible violation, may compel any individual authorized to 2893  
practice by this chapter or who has submitted an application 2894  
pursuant to this chapter to submit to a mental examination, 2895  
physical examination, including an HIV test, or both a mental 2896  
and a physical examination. The expense of the examination is 2897  
the responsibility of the individual compelled to be examined. 2898  
Failure to submit to a mental or physical examination or consent 2899  
to an HIV test ordered by the board constitutes an admission of 2900  
the allegations against the individual unless the failure is due 2901  
to circumstances beyond the individual's control, and a default 2902  
and final order may be entered without the taking of testimony 2903  
or presentation of evidence. If the board finds an individual 2904  
unable to practice because of the reasons set forth in this 2905  
division, the board shall require the individual to submit to 2906  
care, counseling, or treatment by physicians approved or 2907  
designated by the board, as a condition for initial, continued, 2908  
reinstated, or renewed authority to practice. An individual 2909  
affected under this division shall be afforded an opportunity to 2910

demonstrate to the board the ability to resume practice in 2911  
compliance with acceptable and prevailing standards under the 2912  
provisions of the individual's license or certificate. For the 2913  
purpose of this division, any individual who applies for or 2914  
receives a license or certificate to practice under this chapter 2915  
accepts the privilege of practicing in this state and, by so 2916  
doing, shall be deemed to have given consent to submit to a 2917  
mental or physical examination when directed to do so in writing 2918  
by the board, and to have waived all objections to the 2919  
admissibility of testimony or examination reports that 2920  
constitute a privileged communication. 2921

(20) Except as provided in division (F)(1)(b) of section 2922  
4731.282 of the Revised Code or when civil penalties are imposed 2923  
under section 4731.225 of the Revised Code, and subject to 2924  
section 4731.226 of the Revised Code, violating or attempting to 2925  
violate, directly or indirectly, or assisting in or abetting the 2926  
violation of, or conspiring to violate, any provisions of this 2927  
chapter or any rule promulgated by the board. 2928

This division does not apply to a violation or attempted 2929  
violation of, assisting in or abetting the violation of, or a 2930  
conspiracy to violate, any provision of this chapter or any rule 2931  
adopted by the board that would preclude the making of a report 2932  
by a physician of an employee's use of a drug of abuse, or of a 2933  
condition of an employee other than one involving the use of a 2934  
drug of abuse, to the employer of the employee as described in 2935  
division (B) of section 2305.33 of the Revised Code. Nothing in 2936  
this division affects the immunity from civil liability 2937  
conferred by that section upon a physician who makes either type 2938  
of report in accordance with division (B) of that section. As 2939  
used in this division, "employee," "employer," and "physician" 2940  
have the same meanings as in section 2305.33 of the Revised 2941

Code.	2942
(21) The violation of section 3701.79 of the Revised Code	2943
or of any abortion rule adopted by the director of health	2944
pursuant to section 3701.341 of the Revised Code;	2945
(22) Any of the following actions taken by an agency	2946
responsible for authorizing, certifying, or regulating an	2947
individual to practice a health care occupation or provide	2948
health care services in this state or another jurisdiction, for	2949
any reason other than the nonpayment of fees: the limitation,	2950
revocation, or suspension of an individual's license to	2951
practice; acceptance of an individual's license surrender;	2952
denial of a license; refusal to renew or reinstate a license;	2953
imposition of probation; or issuance of an order of censure or	2954
other reprimand;	2955
(23) The violation of section 2919.12 of the Revised Code	2956
or the performance or inducement of an abortion upon a pregnant	2957
woman with actual knowledge that the conditions specified in	2958
division (B) of section 2317.56 of the Revised Code have not	2959
been satisfied or with a heedless indifference as to whether	2960
those conditions have been satisfied, unless an affirmative	2961
defense as specified in division (H) (2) of that section would	2962
apply in a civil action authorized by division (H) (1) of that	2963
section;	2964
(24) The revocation, suspension, restriction, reduction,	2965
or termination of clinical privileges by the United States	2966
department of defense or department of veterans affairs or the	2967
termination or suspension of a certificate of registration to	2968
prescribe drugs by the drug enforcement administration of the	2969
United States department of justice;	2970

(25) Termination or suspension from participation in the 2971  
medicare or medicaid programs by the department of health and 2972  
human services or other responsible agency; 2973

(26) Impairment of ability to practice according to 2974  
acceptable and prevailing standards of care because of habitual 2975  
or excessive use or abuse of drugs, alcohol, or other substances 2976  
that impair ability to practice. 2977

For the purposes of this division, any individual 2978  
authorized to practice by this chapter accepts the privilege of 2979  
practicing in this state subject to supervision by the board. By 2980  
filing an application for or holding a license or certificate to 2981  
practice under this chapter, an individual shall be deemed to 2982  
have given consent to submit to a mental or physical examination 2983  
when ordered to do so by the board in writing, and to have 2984  
waived all objections to the admissibility of testimony or 2985  
examination reports that constitute privileged communications. 2986

If it has reason to believe that any individual authorized 2987  
to practice by this chapter or any applicant for licensure or 2988  
certification to practice suffers such impairment, the board may 2989  
compel the individual to submit to a mental or physical 2990  
examination, or both. The expense of the examination is the 2991  
responsibility of the individual compelled to be examined. Any 2992  
mental or physical examination required under this division 2993  
shall be undertaken by a treatment provider or physician who is 2994  
qualified to conduct the examination and who is chosen by the 2995  
board. 2996

Failure to submit to a mental or physical examination 2997  
ordered by the board constitutes an admission of the allegations 2998  
against the individual unless the failure is due to 2999  
circumstances beyond the individual's control, and a default and 3000



final order may be entered without the taking of testimony or 3001  
presentation of evidence. If the board determines that the 3002  
individual's ability to practice is impaired, the board shall 3003  
suspend the individual's license or certificate or deny the 3004  
individual's application and shall require the individual, as a 3005  
condition for initial, continued, reinstated, or renewed 3006  
licensure or certification to practice, to submit to treatment. 3007

Before being eligible to apply for reinstatement of a 3008  
license or certificate suspended under this division, the 3009  
impaired practitioner shall demonstrate to the board the ability 3010  
to resume practice in compliance with acceptable and prevailing 3011  
standards of care under the provisions of the practitioner's 3012  
license or certificate. The demonstration shall include, but 3013  
shall not be limited to, the following: 3014

(a) Certification from a treatment provider approved under 3015  
section 4731.25 of the Revised Code that the individual has 3016  
successfully completed any required inpatient treatment; 3017

(b) Evidence of continuing full compliance with an 3018  
aftercare contract or consent agreement; 3019

(c) Two written reports indicating that the individual's 3020  
ability to practice has been assessed and that the individual 3021  
has been found capable of practicing according to acceptable and 3022  
prevailing standards of care. The reports shall be made by 3023  
individuals or providers approved by the board for making the 3024  
assessments and shall describe the basis for their 3025  
determination. 3026

The board may reinstate a license or certificate suspended 3027  
under this division after that demonstration and after the 3028  
individual has entered into a written consent agreement. 3029

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

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

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

(a) Waiving the payment of all or any part of a deductible or copayment that a patient, pursuant to a health insurance or health care policy, contract, or plan that covers the individual's services, otherwise would be required to pay if the waiver is used as an enticement to a patient or group of patients to receive health care services from that individual;

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

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

(30) Failure to provide notice to, and receive acknowledgment of the notice from, a patient when required by section 4731.143 of the Revised Code prior to providing

nonemergency professional services, or failure to maintain that 3059  
notice in the patient's medical record; 3060

(31) Failure of a physician supervising a physician 3061  
assistant to maintain supervision in accordance with the 3062  
requirements of Chapter 4730. of the Revised Code and the rules 3063  
adopted under that chapter; 3064

(32) Failure of a physician or podiatrist to enter into a 3065  
standard care arrangement with a certified midwife, clinical 3066  
nurse specialist, certified nurse-midwife, or certified nurse 3067  
practitioner with whom the physician or podiatrist is in 3068  
collaboration pursuant to section 4731.27 of the Revised Code or 3069  
failure to fulfill the responsibilities of collaboration after 3070  
entering into a standard care arrangement; 3071

(33) Failure to comply with the terms of a consult 3072  
agreement entered into with a pharmacist pursuant to section 3073  
4729.39 of the Revised Code; 3074

(34) Failure to cooperate in an investigation conducted by 3075  
the board under division (F) of this section, including failure 3076  
to comply with a subpoena or order issued by the board or 3077  
failure to answer truthfully a question presented by the board 3078  
in an investigative interview, an investigative office 3079  
conference, at a deposition, or in written interrogatories, 3080  
except that failure to cooperate with an investigation shall not 3081  
constitute grounds for discipline under this section if a court 3082  
of competent jurisdiction has issued an order that either 3083  
quashes a subpoena or permits the individual to withhold the 3084  
testimony or evidence in issue; 3085

(35) Failure to supervise an acupuncturist in accordance 3086  
with Chapter 4762. of the Revised Code and the board's rules for 3087

providing that supervision;	3088
(36) Failure to supervise an anesthesiologist assistant in accordance with Chapter 4760. of the Revised Code and the board's rules for supervision of an anesthesiologist assistant;	3089 3090 3091
(37) Assisting suicide, as defined in section 3795.01 of the Revised Code;	3092 3093
(38) Failure to comply with the requirements of section 2317.561 of the Revised Code;	3094 3095
(39) Failure to supervise a radiologist assistant in accordance with Chapter 4774. of the Revised Code and the board's rules for supervision of radiologist assistants;	3096 3097 3098
(40) Performing or inducing an abortion at an office or facility with knowledge that the office or facility fails to post the notice required under section 3701.791 of the Revised Code;	3099 3100 3101 3102
(41) Failure to comply with the standards and procedures established in rules under section 4731.054 of the Revised Code for the operation of or the provision of care at a pain management clinic;	3103 3104 3105 3106
(42) Failure to comply with the standards and procedures established in rules under section 4731.054 of the Revised Code for providing supervision, direction, and control of individuals at a pain management clinic;	3107 3108 3109 3110
(43) Failure to comply with the requirements of section 4729.79 or 4731.055 of the Revised Code, unless the state board of pharmacy no longer maintains a drug database pursuant to section 4729.75 of the Revised Code;	3111 3112 3113 3114
(44) Failure to comply with the requirements of section	3115

2919.171, 2919.202, or 2919.203 of the Revised Code or failure	3116
to submit to the department of health in accordance with a court	3117
order a complete report as described in section 2919.171 or	3118
2919.202 of the Revised Code;	3119
(45) Practicing at a facility that is subject to licensure	3120
as a category III terminal distributor of dangerous drugs with a	3121
pain management clinic classification unless the person	3122
operating the facility has obtained and maintains the license	3123
with the classification;	3124
(46) Owning a facility that is subject to licensure as a	3125
category III terminal distributor of dangerous drugs with a pain	3126
management clinic classification unless the facility is licensed	3127
with the classification;	3128
(47) Failure to comply with any of the requirements	3129
regarding making or maintaining medical records or documents	3130
described in division (A) of section 2919.192, division (C) of	3131
section 2919.193, division (B) of section 2919.195, or division	3132
(A) of section 2919.196 of the Revised Code;	3133
(48) Failure to comply with the requirements in section	3134
3719.061 of the Revised Code before issuing for a minor a	3135
prescription for an opioid analgesic, as defined in section	3136
3719.01 of the Revised Code;	3137
(49) Failure to comply with the requirements of section	3138
4731.30 of the Revised Code or rules adopted under section	3139
4731.301 of the Revised Code when recommending treatment with	3140
medical marijuana;	3141
(50) Practicing at a facility, clinic, or other location	3142
that is subject to licensure as a category III terminal	3143
distributor of dangerous drugs with an office-based opioid	3144

treatment classification unless the person operating that place 3145  
has obtained and maintains the license with the classification; 3146

(51) Owning a facility, clinic, or other location that is 3147  
subject to licensure as a category III terminal distributor of 3148  
dangerous drugs with an office-based opioid treatment 3149  
classification unless that place is licensed with the 3150  
classification; 3151

(52) A pattern of continuous or repeated violations of 3152  
division (E) (2) or (3) of section 3963.02 of the Revised Code. 3153

(C) Disciplinary actions taken by the board under 3154  
divisions (A) and (B) of this section shall be taken pursuant to 3155  
an adjudication under Chapter 119. of the Revised Code, except 3156  
that in lieu of an adjudication, the board may enter into a 3157  
consent agreement with an individual to resolve an allegation of 3158  
a violation of this chapter or any rule adopted under it. A 3159  
consent agreement, when ratified by an affirmative vote of not 3160  
fewer than six members of the board, shall constitute the 3161  
findings and order of the board with respect to the matter 3162  
addressed in the agreement. If the board refuses to ratify a 3163  
consent agreement, the admissions and findings contained in the 3164  
consent agreement shall be of no force or effect. 3165

A telephone conference call may be utilized for 3166  
ratification of a consent agreement that revokes or suspends an 3167  
individual's license or certificate to practice or certificate 3168  
to recommend. The telephone conference call shall be considered 3169  
a special meeting under division (F) of section 121.22 of the 3170  
Revised Code. 3171

If the board takes disciplinary action against an 3172  
individual under division (B) of this section for a second or 3173

subsequent plea of guilty to, or judicial finding of guilt of, a 3174  
violation of section 2919.123 or 2919.124 of the Revised Code, 3175  
the disciplinary action shall consist of a suspension of the 3176  
individual's license or certificate to practice for a period of 3177  
at least one year or, if determined appropriate by the board, a 3178  
more serious sanction involving the individual's license or 3179  
certificate to practice. Any consent agreement entered into 3180  
under this division with an individual that pertains to a second 3181  
or subsequent plea of guilty to, or judicial finding of guilt 3182  
of, a violation of that section shall provide for a suspension 3183  
of the individual's license or certificate to practice for a 3184  
period of at least one year or, if determined appropriate by the 3185  
board, a more serious sanction involving the individual's 3186  
license or certificate to practice. 3187

(D) For purposes of divisions (B) (10), (12), and (14) of 3188  
this section, the commission of the act may be established by a 3189  
finding by the board, pursuant to an adjudication under Chapter 3190  
119. of the Revised Code, that the individual committed the act. 3191  
The board does not have jurisdiction under those divisions if 3192  
the trial court renders a final judgment in the individual's 3193  
favor and that judgment is based upon an adjudication on the 3194  
merits. The board has jurisdiction under those divisions if the 3195  
trial court issues an order of dismissal upon technical or 3196  
procedural grounds. 3197

(E) The sealing of conviction records by any court shall 3198  
have no effect upon a prior board order entered under this 3199  
section or upon the board's jurisdiction to take action under 3200  
this section if, based upon a plea of guilty, a judicial finding 3201  
of guilt, or a judicial finding of eligibility for intervention 3202  
in lieu of conviction, the board issued a notice of opportunity 3203  
for a hearing prior to the court's order to seal the records. 3204

The board shall not be required to seal, destroy, redact, or 3205  
otherwise modify its records to reflect the court's sealing of 3206  
conviction records. 3207

(F) (1) The board shall investigate evidence that appears 3208  
to show that a person has violated any provision of this chapter 3209  
or any rule adopted under it. Any person may report to the board 3210  
in a signed writing any information that the person may have 3211  
that appears to show a violation of any provision of this 3212  
chapter or any rule adopted under it. In the absence of bad 3213  
faith, any person who reports information of that nature or who 3214  
testifies before the board in any adjudication conducted under 3215  
Chapter 119. of the Revised Code shall not be liable in damages 3216  
in a civil action as a result of the report or testimony. Each 3217  
complaint or allegation of a violation received by the board 3218  
shall be assigned a case number and shall be recorded by the 3219  
board. 3220

(2) Investigations of alleged violations of this chapter 3221  
or any rule adopted under it shall be supervised by the 3222  
supervising member elected by the board in accordance with 3223  
section 4731.02 of the Revised Code and by the secretary as 3224  
provided in section 4731.39 of the Revised Code. The president 3225  
may designate another member of the board to supervise the 3226  
investigation in place of the supervising member. No member of 3227  
the board who supervises the investigation of a case shall 3228  
participate in further adjudication of the case. 3229

(3) In investigating a possible violation of this chapter 3230  
or any rule adopted under this chapter, or in conducting an 3231  
inspection under division (E) of section 4731.054 of the Revised 3232  
Code, the board may question witnesses, conduct interviews, 3233  
administer oaths, order the taking of depositions, inspect and 3234



copy any books, accounts, papers, records, or documents, issue 3235  
subpoenas, and compel the attendance of witnesses and production 3236  
of books, accounts, papers, records, documents, and testimony, 3237  
except that a subpoena for patient record information shall not 3238  
be issued without consultation with the attorney general's 3239  
office and approval of the secretary and supervising member of 3240  
the board. 3241

(a) Before issuance of a subpoena for patient record 3242  
information, the secretary and supervising member shall 3243  
determine whether there is probable cause to believe that the 3244  
complaint filed alleges a violation of this chapter or any rule 3245  
adopted under it and that the records sought are relevant to the 3246  
alleged violation and material to the investigation. The 3247  
subpoena may apply only to records that cover a reasonable 3248  
period of time surrounding the alleged violation. 3249

(b) On failure to comply with any subpoena issued by the 3250  
board and after reasonable notice to the person being 3251  
subpoenaed, the board may move for an order compelling the 3252  
production of persons or records pursuant to the Rules of Civil 3253  
Procedure. 3254

(c) A subpoena issued by the board may be served by a 3255  
sheriff, the sheriff's deputy, or a board employee or agent 3256  
designated by the board. Service of a subpoena issued by the 3257  
board may be made by delivering a copy of the subpoena to the 3258  
person named therein, reading it to the person, or leaving it at 3259  
the person's usual place of residence, usual place of business, 3260  
or address on file with the board. When serving a subpoena to an 3261  
applicant for or the holder of a license or certificate issued 3262  
under this chapter, service of the subpoena may be made by 3263  
certified mail, return receipt requested, and the subpoena shall 3264

be deemed served on the date delivery is made or the date the 3265  
person refuses to accept delivery. If the person being served 3266  
refuses to accept the subpoena or is not located, service may be 3267  
made to an attorney who notifies the board that the attorney is 3268  
representing the person. 3269

(d) A sheriff's deputy who serves a subpoena shall receive 3270  
the same fees as a sheriff. Each witness who appears before the 3271  
board in obedience to a subpoena shall receive the fees and 3272  
mileage provided for under section 119.094 of the Revised Code. 3273

(4) All hearings, investigations, and inspections of the 3274  
board shall be considered civil actions for the purposes of 3275  
section 2305.252 of the Revised Code. 3276

(5) A report required to be submitted to the board under 3277  
this chapter, a complaint, or information received by the board 3278  
pursuant to an investigation or pursuant to an inspection under 3279  
division (E) of section 4731.054 of the Revised Code is 3280  
confidential and not subject to discovery in any civil action. 3281

The board shall conduct all investigations or inspections 3282  
and proceedings in a manner that protects the confidentiality of 3283  
patients and persons who file complaints with the board. The 3284  
board shall not make public the names or any other identifying 3285  
information about patients or complainants unless proper consent 3286  
is given or, in the case of a patient, a waiver of the patient 3287  
privilege exists under division (B) of section 2317.02 of the 3288  
Revised Code, except that consent or a waiver of that nature is 3289  
not required if the board possesses reliable and substantial 3290  
evidence that no bona fide physician-patient relationship 3291  
exists. 3292

The board may share any information it receives pursuant 3293

to an investigation or inspection, including patient records and 3294  
patient record information, with law enforcement agencies, other 3295  
licensing boards, and other governmental agencies that are 3296  
prosecuting, adjudicating, or investigating alleged violations 3297  
of statutes or administrative rules. An agency or board that 3298  
receives the information shall comply with the same requirements 3299  
regarding confidentiality as those with which the state medical 3300  
board must comply, notwithstanding any conflicting provision of 3301  
the Revised Code or procedure of the agency or board that 3302  
applies when it is dealing with other information in its 3303  
possession. In a judicial proceeding, the information may be 3304  
admitted into evidence only in accordance with the Rules of 3305  
Evidence, but the court shall require that appropriate measures 3306  
are taken to ensure that confidentiality is maintained with 3307  
respect to any part of the information that contains names or 3308  
other identifying information about patients or complainants 3309  
whose confidentiality was protected by the state medical board 3310  
when the information was in the board's possession. Measures to 3311  
ensure confidentiality that may be taken by the court include 3312  
sealing its records or deleting specific information from its 3313  
records. 3314

(6) On a quarterly basis, the board shall prepare a report 3315  
that documents the disposition of all cases during the preceding 3316  
three months. The report shall contain the following information 3317  
for each case with which the board has completed its activities: 3318

(a) The case number assigned to the complaint or alleged 3319  
violation; 3320

(b) The type of license or certificate to practice, if 3321  
any, held by the individual against whom the complaint is 3322  
directed; 3323

(c) A description of the allegations contained in the complaint; 3324  
3325

(d) The disposition of the case. 3326

The report shall state how many cases are still pending and shall be prepared in a manner that protects the identity of each person involved in each case. The report shall be a public record under section 149.43 of the Revised Code. 3327  
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(G) If the secretary and supervising member determine both of the following, they may recommend that the board suspend an individual's license or certificate to practice or certificate to recommend without a prior hearing: 3331  
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3333  
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(1) That there is clear and convincing evidence that an individual has violated division (B) of this section; 3335  
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(2) That the individual's continued practice presents a danger of immediate and serious harm to the public. 3337  
3338

Written allegations shall be prepared for consideration by the board. The board, upon review of those allegations and by an affirmative vote of not fewer than six of its members, excluding the secretary and supervising member, may suspend a license or certificate without a prior hearing. A telephone conference call may be utilized for reviewing the allegations and taking the vote on the summary suspension. 3339  
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The board shall issue a written order of suspension by certified mail or in person in accordance with section 119.07 of the Revised Code. The order shall not be subject to suspension by the court during pendency of any appeal filed under section 119.12 of the Revised Code. If the individual subject to the summary suspension requests an adjudicatory hearing by the board, the date set for the hearing shall be within fifteen 3346  
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days, but not earlier than seven days, after the individual 3353  
requests the hearing, unless otherwise agreed to by both the 3354  
board and the individual. 3355

Any summary suspension imposed under this division shall 3356  
remain in effect, unless reversed on appeal, until a final 3357  
adjudicative order issued by the board pursuant to this section 3358  
and Chapter 119. of the Revised Code becomes effective. The 3359  
board shall issue its final adjudicative order within seventy- 3360  
five days after completion of its hearing. A failure to issue 3361  
the order within seventy-five days shall result in dissolution 3362  
of the summary suspension order but shall not invalidate any 3363  
subsequent, final adjudicative order. 3364

(H) If the board takes action under division (B) (9), (11), 3365  
or (13) of this section and the judicial finding of guilt, 3366  
guilty plea, or judicial finding of eligibility for intervention 3367  
in lieu of conviction is overturned on appeal, upon exhaustion 3368  
of the criminal appeal, a petition for reconsideration of the 3369  
order may be filed with the board along with appropriate court 3370  
documents. Upon receipt of a petition of that nature and 3371  
supporting court documents, the board shall reinstate the 3372  
individual's license or certificate to practice. The board may 3373  
then hold an adjudication under Chapter 119. of the Revised Code 3374  
to determine whether the individual committed the act in 3375  
question. Notice of an opportunity for a hearing shall be given 3376  
in accordance with Chapter 119. of the Revised Code. If the 3377  
board finds, pursuant to an adjudication held under this 3378  
division, that the individual committed the act or if no hearing 3379  
is requested, the board may order any of the sanctions 3380  
identified under division (B) of this section. 3381

(I) The license or certificate to practice issued to an 3382

individual under this chapter and the individual's practice in 3383  
this state are automatically suspended as of the date of the 3384  
individual's second or subsequent plea of guilty to, or judicial 3385  
finding of guilt of, a violation of section 2919.123 or 2919.124 3386  
of the Revised Code. In addition, the license or certificate to 3387  
practice or certificate to recommend issued to an individual 3388  
under this chapter and the individual's practice in this state 3389  
are automatically suspended as of the date the individual pleads 3390  
guilty to, is found by a judge or jury to be guilty of, or is 3391  
subject to a judicial finding of eligibility for intervention in 3392  
lieu of conviction in this state or treatment or intervention in 3393  
lieu of conviction in another jurisdiction for any of the 3394  
following criminal offenses in this state or a substantially 3395  
equivalent criminal offense in another jurisdiction: aggravated 3396  
murder, murder, voluntary manslaughter, felonious assault, 3397  
kidnapping, rape, sexual battery, gross sexual imposition, 3398  
aggravated arson, aggravated robbery, or aggravated burglary. 3399  
Continued practice after suspension shall be considered 3400  
practicing without a license or certificate. 3401

The board shall notify the individual subject to the 3402  
suspension by certified mail or in person in accordance with 3403  
section 119.07 of the Revised Code. If an individual whose 3404  
license or certificate is automatically suspended under this 3405  
division fails to make a timely request for an adjudication 3406  
under Chapter 119. of the Revised Code, the board shall do 3407  
whichever of the following is applicable: 3408

(1) If the automatic suspension under this division is for 3409  
a second or subsequent plea of guilty to, or judicial finding of 3410  
guilt of, a violation of section 2919.123 or 2919.124 of the 3411  
Revised Code, the board shall enter an order suspending the 3412  
individual's license or certificate to practice for a period of 3413

at least one year or, if determined appropriate by the board, 3414  
imposing a more serious sanction involving the individual's 3415  
license or certificate to practice. 3416

(2) In all circumstances in which division (I)(1) of this 3417  
section does not apply, enter a final order permanently revoking 3418  
the individual's license or certificate to practice. 3419

(J) If the board is required by Chapter 119. of the 3420  
Revised Code to give notice of an opportunity for a hearing and 3421  
if the individual subject to the notice does not timely request 3422  
a hearing in accordance with section 119.07 of the Revised Code, 3423  
the board is not required to hold a hearing, but may adopt, by 3424  
an affirmative vote of not fewer than six of its members, a 3425  
final order that contains the board's findings. In that final 3426  
order, the board may order any of the sanctions identified under 3427  
division (A) or (B) of this section. 3428

(K) Any action taken by the board under division (B) of 3429  
this section resulting in a suspension from practice shall be 3430  
accompanied by a written statement of the conditions under which 3431  
the individual's license or certificate to practice may be 3432  
reinstated. The board shall adopt rules governing conditions to 3433  
be imposed for reinstatement. Reinstatement of a license or 3434  
certificate suspended pursuant to division (B) of this section 3435  
requires an affirmative vote of not fewer than six members of 3436  
the board. 3437

(L) When the board refuses to grant or issue a license or 3438  
certificate to practice to an applicant, revokes an individual's 3439  
license or certificate to practice, refuses to renew an 3440  
individual's license or certificate to practice, or refuses to 3441  
reinstate an individual's license or certificate to practice, 3442  
the board may specify that its action is permanent. An 3443

individual subject to a permanent action taken by the board is 3444  
forever thereafter ineligible to hold a license or certificate 3445  
to practice and the board shall not accept an application for 3446  
reinstatement of the license or certificate or for issuance of a 3447  
new license or certificate. 3448

(M) Notwithstanding any other provision of the Revised 3449  
Code, all of the following apply: 3450

(1) The surrender of a license or certificate issued under 3451  
this chapter shall not be effective unless or until accepted by 3452  
the board. A telephone conference call may be utilized for 3453  
acceptance of the surrender of an individual's license or 3454  
certificate to practice. The telephone conference call shall be 3455  
considered a special meeting under division (F) of section 3456  
121.22 of the Revised Code. Reinstatement of a license or 3457  
certificate surrendered to the board requires an affirmative 3458  
vote of not fewer than six members of the board. 3459

(2) An application for a license or certificate made under 3460  
the provisions of this chapter may not be withdrawn without 3461  
approval of the board. 3462

(3) Failure by an individual to renew a license or 3463  
certificate to practice in accordance with this chapter or a 3464  
certificate to recommend in accordance with rules adopted under 3465  
section 4731.301 of the Revised Code shall not remove or limit 3466  
the board's jurisdiction to take any disciplinary action under 3467  
this section against the individual. 3468

(4) At the request of the board, a license or certificate 3469  
holder shall immediately surrender to the board a license or 3470  
certificate that the board has suspended, revoked, or 3471  
permanently revoked. 3472



(N) Sanctions shall not be imposed under division (B) (28) 3473  
of this section against any person who waives deductibles and 3474  
copayments as follows: 3475

(1) In compliance with the health benefit plan that 3476  
expressly allows such a practice. Waiver of the deductibles or 3477  
copayments shall be made only with the full knowledge and 3478  
consent of the plan purchaser, payer, and third-party 3479  
administrator. Documentation of the consent shall be made 3480  
available to the board upon request. 3481

(2) For professional services rendered to any other person 3482  
authorized to practice pursuant to this chapter, to the extent 3483  
allowed by this chapter and rules adopted by the board. 3484

(O) Under the board's investigative duties described in 3485  
this section and subject to division (F) of this section, the 3486  
board shall develop and implement a quality intervention program 3487  
designed to improve through remedial education the clinical and 3488  
communication skills of individuals authorized under this 3489  
chapter to practice medicine and surgery, osteopathic medicine 3490  
and surgery, and podiatric medicine and surgery. In developing 3491  
and implementing the quality intervention program, the board may 3492  
do all of the following: 3493

(1) Offer in appropriate cases as determined by the board 3494  
an educational and assessment program pursuant to an 3495  
investigation the board conducts under this section; 3496

(2) Select providers of educational and assessment 3497  
services, including a quality intervention program panel of case 3498  
reviewers; 3499

(3) Make referrals to educational and assessment service 3500  
providers and approve individual educational programs 3501

recommended by those providers. The board shall monitor the 3502  
progress of each individual undertaking a recommended individual 3503  
educational program. 3504

(4) Determine what constitutes successful completion of an 3505  
individual educational program and require further monitoring of 3506  
the individual who completed the program or other action that 3507  
the board determines to be appropriate; 3508

(5) Adopt rules in accordance with Chapter 119. of the 3509  
Revised Code to further implement the quality intervention 3510  
program. 3511

An individual who participates in an individual 3512  
educational program pursuant to this division shall pay the 3513  
financial obligations arising from that educational program. 3514

(P) The board shall not refuse to issue a license to an 3515  
applicant because of a conviction, plea of guilty, judicial 3516  
finding of guilt, judicial finding of eligibility for 3517  
intervention in lieu of conviction, or the commission of an act 3518  
that constitutes a criminal offense, unless the refusal is in 3519  
accordance with section 9.79 of the Revised Code. 3520

**Sec. 4731.27.** (A) As used in this section, 3521  
"collaboration," "physician," "standard care arrangement," and 3522  
"supervision" have the same meanings as in section 4723.01 of 3523  
the Revised Code. 3524

(B) A physician or podiatrist shall enter into a standard 3525  
care arrangement with each certified midwife, clinical nurse 3526  
specialist, certified nurse-midwife, or certified nurse 3527  
practitioner with whom the physician or podiatrist is in 3528  
collaboration. 3529

The collaborating physician or podiatrist shall fulfill 3530

the responsibilities of collaboration, as specified in the 3531  
arrangement and in accordance with division (A) of section 3532  
4723.431 of the Revised Code. A copy of the standard care 3533  
arrangement shall be retained on file by the midwife's or 3534  
nurse's employer. Prior approval of the standard care 3535  
arrangement by the state medical board is not required, but the 3536  
board may periodically review it. 3537

A physician or podiatrist who terminates collaboration 3538  
with a certified midwife, certified nurse-midwife, certified 3539  
nurse practitioner, or clinical nurse specialist before their 3540  
standard care arrangement expires shall give the midwife or 3541  
nurse the written or electronic notice of termination required 3542  
by division (D) (1) of section 4723.431 of the Revised Code. 3543

Nothing in this division prohibits a hospital from hiring 3544  
a certified midwife, clinical nurse specialist, certified nurse- 3545  
midwife, or certified nurse practitioner as an employee and 3546  
negotiating standard care arrangements on behalf of the employee 3547  
as necessary to meet the requirements of this section. A 3548  
standard care arrangement between the hospital's employee and 3549  
the employee's collaborating physician is subject to approval by 3550  
the medical staff and governing body of the hospital prior to 3551  
implementation of the arrangement at the hospital. 3552

(C) A physician or podiatrist shall cooperate with the 3553  
board of nursing in any investigation the board conducts with 3554  
respect to a certified midwife, clinical nurse specialist, 3555  
certified nurse-midwife, or certified nurse practitioner who 3556  
collaborates with the physician or podiatrist or with respect to 3557  
a certified registered nurse anesthetist who practices with the 3558  
supervision of the physician or podiatrist. 3559

**Section 2.** That existing sections 3701.351, 4723.01, 3560

4723.02, 4723.06, 4723.07, 4723.08, 4723.271, 4723.28, 4723.282, 3561  
4723.33, 4723.34, 4723.341, 4723.35, 4723.41, 4723.43, 4723.431, 3562  
4723.432, 4723.481, 4723.483, 4723.484, 4723.487, 4723.488, 3563  
4723.4810, 4723.4811, 4723.50, 4723.91, 4723.99, 4731.22, and 3564  
4731.27 of the Revised Code are hereby repealed. 3565

**Section 3.** That the versions of sections 3701.351, 3566  
4723.431, and 4723.481 of the Revised Code that are scheduled to 3567  
take effect on September 30, 2024, be amended to read as 3568  
follows: 3569

**Sec. 3701.351.** (A) The governing body of every hospital 3570  
shall set standards and procedures to be applied by the hospital 3571  
and its medical staff in considering and acting upon 3572  
applications for staff membership or professional privileges. 3573  
These standards and procedures shall be available for public 3574  
inspection. 3575

(B) The governing body of any hospital, in considering and 3576  
acting upon applications for staff membership or professional 3577  
privileges within the scope of the applicants' respective 3578  
licensures, shall not discriminate against a qualified person 3579  
solely on the basis of whether that person is licensed to 3580  
practice medicine, osteopathic medicine, or podiatry, is 3581  
licensed to practice dentistry or psychology, ~~or~~ is licensed to 3582  
practice nursing as an advanced practice registered nurse, or is 3583  
licensed to practice as a certified midwife or certified 3584  
professional midwife. Staff membership or professional 3585  
privileges shall be considered and acted on in accordance with 3586  
standards and procedures established under division (A) of this 3587  
section. 3588

(C) The governing body of any hospital that provides 3589  
maternity services, in considering and acting upon applications 3590

for clinical privileges, shall not discriminate against a 3591  
qualified person solely on the basis that the person is 3592  
authorized to practice nurse-midwifery or midwifery. An 3593  
application from a certified nurse-midwife or certified midwife 3594  
who is not employed by the hospital shall contain the name of a 3595  
physician member of the hospital's medical staff who holds 3596  
clinical privileges in obstetrics at that hospital and who has 3597  
agreed to be the collaborating physician for the applicant in 3598  
accordance with section ~~4723.43~~ 4723.431 of the Revised Code. 3599

(D) Any person may apply to the court of common pleas for 3600  
temporary or permanent injunctions restraining a violation of 3601  
division (A), (B), or (C) of this section. This action is an 3602  
additional remedy not dependent on the adequacy of the remedy at 3603  
law. 3604

(E) (1) If a hospital does not provide or permit the 3605  
provision of any diagnostic or treatment service for mental or 3606  
emotional disorders or any other service that may be legally 3607  
performed by a psychologist licensed under Chapter 4732. of the 3608  
Revised Code, this section does not require the hospital to 3609  
provide or permit the provision of any such service and the 3610  
hospital shall be exempt from requirements of this section 3611  
pertaining to psychologists. 3612

(2) This section does not impair the right of a hospital 3613  
to enter into an employment, personal service, or any other kind 3614  
of contract with a licensed psychologist, upon any such terms as 3615  
the parties may mutually agree, for the provision of any service 3616  
that may be legally performed by a licensed psychologist. 3617

**Sec. 4723.431.** (A) (1) ~~An~~ A certified midwife or advanced 3618  
practice registered nurse who is designated as a clinical nurse 3619  
specialist, certified nurse-midwife, or certified nurse 3620

practitioner may practice only in accordance with a standard 3621  
care arrangement entered into with each physician or podiatrist 3622  
with whom the midwife or nurse collaborates. A copy of the 3623  
standard care arrangement shall be retained on file by the 3624  
midwife's or nurse's employer. Prior approval of the standard 3625  
care arrangement by the board of nursing is not required, but 3626  
the board may periodically review it for compliance with this 3627  
section. 3628

A certified midwife, clinical nurse specialist, certified 3629  
nurse-midwife, or certified nurse practitioner may enter into a 3630  
standard care arrangement with one or more collaborating 3631  
physicians or podiatrists. If a collaborating physician or 3632  
podiatrist enters into standard care arrangements with more than 3633  
five midwives or nurses, the physician or podiatrist shall not 3634  
collaborate at the same time with more than five midwives or 3635  
nurses in the prescribing component of their practices. 3636

Not later than thirty days after first engaging in the 3637  
practice of midwifery as a certified midwife or the practice of 3638  
nursing as a clinical nurse specialist, certified nurse-midwife, 3639  
or certified nurse practitioner, the midwife or nurse shall 3640  
submit to the board the name and business address of each 3641  
collaborating physician or podiatrist. Thereafter, the midwife 3642  
or nurse shall notify the board of any additions or deletions to 3643  
the midwife's or nurse's collaborating physicians or 3644  
podiatrists. Except as provided in division (D) of this section, 3645  
the notice must be provided not later than thirty days after the 3646  
change takes effect. 3647

(2) All of the following conditions apply with respect to 3648  
the practice of a collaborating physician or podiatrist with 3649  
whom a certified midwife, clinical nurse specialist, certified 3650

nurse-midwife, or certified nurse practitioner may enter into a standard care arrangement:

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

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

(c) If the nurse is a clinical nurse specialist who is certified as a psychiatric-mental health CNS by the American nurses credentialing center or a certified nurse practitioner who is certified as a psychiatric-mental health NP by the American nurses credentialing center, the nurse may enter into a standard care arrangement with a physician but not a podiatrist and the collaborating physician must be practicing in one of the following specialties:

(i) Psychiatry;

(ii) Pediatrics;

(iii) Primary care or family practice.

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

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

(2) A process for the certified midwife, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner to obtain a consultation with a collaborating

physician or podiatrist or another physician or podiatrist; 3679

(3) A plan for coverage in instances of emergency or 3680  
planned absences of either the certified midwife, clinical nurse 3681  
specialist, certified nurse-midwife, or certified nurse 3682  
practitioner or a collaborating physician or podiatrist that 3683  
provides the means whereby a physician or podiatrist is 3684  
available for emergency care; 3685

(4) The process for resolution of disagreements regarding 3686  
matters of patient management between the certified midwife, 3687  
clinical nurse specialist, certified nurse-midwife, or certified 3688  
nurse practitioner and a collaborating physician or podiatrist; 3689

(5) Any other criteria required by rule of the board 3690  
adopted pursuant to section 4723.07 or 4723.50 of the Revised 3691  
Code. 3692

(C) (1) A standard care arrangement entered into pursuant 3693  
to this section may permit a clinical nurse specialist, 3694  
certified nurse-midwife, or certified nurse practitioner to 3695  
supervise services provided by a home health agency as defined 3696  
in section 3740.01 of the Revised Code. 3697

(2) A standard care arrangement entered into pursuant to 3698  
this section may permit a clinical nurse specialist, certified 3699  
nurse-midwife, or certified nurse practitioner to admit a 3700  
patient to a hospital. 3701

(D) (1) Except as provided in division (D) (2) of this 3702  
section, if a physician or podiatrist terminates the 3703  
collaboration between the physician or podiatrist and a 3704  
certified midwife, certified nurse-midwife, certified nurse 3705  
practitioner, or clinical nurse specialist before their standard 3706  
care arrangement expires, all of the following apply: 3707



(a) The physician or podiatrist must give the midwife or 3708  
nurse written or electronic notice of the termination. 3709

(b) Once the midwife or nurse receives the termination 3710  
notice, the midwife or nurse must notify the board of nursing of 3711  
the termination as soon as practicable by submitting to the 3712  
board a copy of the physician's or podiatrist's termination 3713  
notice. 3714

(c) Notwithstanding the ~~requirement~~ requirements of 3715  
~~section~~ sections 4723.43 and 4723.57 of the Revised Code that 3716  
the midwife or nurse practice in collaboration with a physician 3717  
or podiatrist, the midwife or nurse may continue to practice 3718  
under the existing standard care arrangement without a 3719  
collaborating physician or podiatrist for not more than one 3720  
hundred twenty days after submitting to the board a copy of the 3721  
termination notice. 3722

(2) In the event that the collaboration between a 3723  
physician or podiatrist and a certified midwife, certified 3724  
nurse-midwife, certified nurse practitioner, or clinical nurse 3725  
specialist terminates because of the physician's or podiatrist's 3726  
death, the midwife or nurse must notify the board of the death 3727  
as soon as practicable. The midwife or nurse may continue to 3728  
practice under the existing standard care arrangement without a 3729  
collaborating physician or podiatrist for not more than one 3730  
hundred twenty days after notifying the board of the physician's 3731  
or podiatrist's death. 3732

(E) Nothing in this section prohibits a hospital from 3733  
hiring a clinical nurse specialist, certified nurse-midwife, or 3734  
certified nurse practitioner as an employee and negotiating 3735  
standard care arrangements on behalf of the employee as 3736  
necessary to meet the requirements of this section. A standard 3737

care arrangement between the hospital's employee and the 3738  
employee's collaborating physician is subject to approval by the 3739  
medical staff and governing body of the hospital prior to 3740  
implementation of the arrangement at the hospital. 3741

**Sec. 4723.481.** This section establishes standards and 3742  
conditions regarding the authority of an advanced practice 3743  
registered nurse who is designated as a clinical nurse 3744  
specialist, certified nurse-midwife, or certified nurse 3745  
practitioner to prescribe and personally furnish drugs and 3746  
therapeutic devices under a license issued under section 4723.42 3747  
of the Revised Code. 3748

This section also establishes standards and conditions 3749  
regarding the authority of a certified midwife to prescribe and 3750  
personally furnish drugs and therapeutic devices under a license 3751  
issued under section 4723.56 of the Revised Code. 3752

(A) Except as provided in division (F) of this section, a 3753  
clinical nurse specialist, certified nurse-midwife, ~~or~~ certified 3754  
nurse practitioner, or certified midwife shall not prescribe or 3755  
furnish any drug or therapeutic device that is listed on the 3756  
exclusionary formulary established in rules adopted under 3757  
section 4723.50 of the Revised Code. 3758

(B) The prescriptive authority of a clinical nurse 3759  
specialist, certified nurse-midwife, ~~or~~ certified nurse 3760  
practitioner, or certified midwife shall not exceed the 3761  
prescriptive authority of the collaborating physician or 3762  
podiatrist, including the collaborating physician's authority to 3763  
treat chronic pain with controlled substances and products 3764  
containing tramadol as described in section 4731.052 of the 3765  
Revised Code. 3766

(C) (1) Except as provided in division (C) (2) or (3) of 3767  
this section, a clinical nurse specialist, certified nurse- 3768  
midwife, ~~or~~ certified nurse practitioner, or certified midwife 3769  
may prescribe to a patient a schedule II controlled substance 3770  
only if all of the following are the case: 3771

(a) The patient has a terminal condition, as defined in 3772  
section 2133.01 of the Revised Code. 3773

(b) A physician initially prescribed the substance for the 3774  
patient. 3775

(c) The prescription is for an amount that does not exceed 3776  
the amount necessary for the patient's use in a single, seventy- 3777  
two-hour period. 3778

(2) The restrictions on prescriptive authority in division 3779  
(C) (1) of this section do not apply if a clinical nurse 3780  
specialist, certified nurse-midwife, ~~or~~ certified nurse 3781  
practitioner, or certified midwife issues the prescription to 3782  
the patient from any of the following locations: 3783

(a) A hospital as defined in section 3722.01 of the 3784  
Revised Code; 3785

(b) An entity owned or controlled, in whole or in part, by 3786  
a hospital or by an entity that owns or controls, in whole or in 3787  
part, one or more hospitals; 3788

(c) A health care facility operated by the department of 3789  
mental health and addiction services or the department of 3790  
developmental disabilities; 3791

(d) A nursing home licensed under section 3721.02 of the 3792  
Revised Code or by a political subdivision certified under 3793  
section 3721.09 of the Revised Code; 3794

(e) A county home or district home operated under Chapter 5155. of the Revised Code that is certified under the medicare or medicaid program;	3795 3796 3797
(f) A hospice care program, as defined in section 3712.01 of the Revised Code;	3798 3799
(g) A community mental health services provider, as defined in section 5122.01 of the Revised Code;	3800 3801
(h) An ambulatory surgical facility, as defined in section 3702.30 of the Revised Code;	3802 3803
(i) A freestanding birthing center, as defined in section 3701.503 of the Revised Code;	3804 3805
(j) A federally qualified health center, as defined in section 3701.047 of the Revised Code;	3806 3807
(k) A federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code;	3808 3809
(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;	3810 3811 3812 3813
(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, <del>or</del> certified nurse practitioner, <u>or</u> <u>certified midwife</u> 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;	3814 3815 3816 3817 3818 3819 3820 3821
(n) A residential care facility, as defined in section	3822

3721.01 of the Revised Code. 3823

(3) A clinical nurse specialist, certified nurse-midwife, 3824  
~~or~~certified nurse practitioner, or certified midwife shall not 3825  
issue to a patient a prescription for a schedule II controlled 3826  
substance from a convenience care clinic even if the clinic is 3827  
owned or operated by an entity specified in division (C) (2) of 3828  
this section. 3829

(D) A pharmacist who acts in good faith reliance on a 3830  
prescription issued by a clinical nurse specialist, certified 3831  
nurse-midwife, ~~or~~certified nurse practitioner, or certified 3832  
midwife under division (C) (2) of this section is not liable for 3833  
or subject to any of the following for relying on the 3834  
prescription: damages in any civil action, prosecution in any 3835  
criminal proceeding, or professional disciplinary action by the 3836  
state board of pharmacy under Chapter 4729. of the Revised Code. 3837

(E) A clinical nurse specialist, certified nurse-midwife, 3838  
~~or~~certified nurse practitioner, or certified midwife shall 3839  
comply with section 3719.061 of the Revised Code if the nurse 3840  
prescribes for a minor, as defined in that section, an opioid 3841  
analgesic, as defined in section 3719.01 of the Revised Code. 3842

(F) Until the board of nursing establishes a new formulary 3843  
in rules adopted under section 4723.50 of the Revised Code, a 3844  
clinical nurse specialist, certified nurse-midwife, ~~or~~certified 3845  
nurse practitioner, or certified midwife who prescribes or 3846  
furnishes any drug or therapeutic device shall do so in 3847  
accordance with the formulary established by the board prior to 3848  
April 6, 2017. 3849

**Section 4.** That the existing versions of sections 3850  
3701.351, 4723.431, and 4723.481 of the Revised Code that are 3851

scheduled to take effect on September 30, 2024, are hereby 3852  
repealed. 3853

**Section 5.** Sections 3 and 4 of this act take effect on 3854  
September 30, 2024. 3855

**Section 6.** Section 4723.54 of the Revised Code, as enacted 3856  
by this act, takes effect January 1, 2025. 3857

**Section 7.** The General Assembly, applying the principle 3858  
stated in division (B) of section 1.52 of the Revised Code that 3859  
amendments are to be harmonized if reasonably capable of 3860  
simultaneous operation, finds that the following sections, 3861  
presented in this act as composites of the sections as amended 3862  
by the acts indicated, are the resulting versions of the 3863  
sections in effect prior to the effective date of the sections 3864  
as presented in this act: 3865

Section 4723.28 of the Revised Code, as amended by both 3866  
H.B. 203 and H.B. 263 of the 133rd General Assembly. 3867

The version of section 4723.431 of the Revised Code 3868  
scheduled to take effect September 30, 2024, as amended by both 3869  
Section 101.01 and Section 130.10 of H.B. 110 of the 134th 3870  
General Assembly. 3871

Section 4723.50 of the Revised Code, as amended by H.B. 3872  
231, H.B. 341, and S.B. 331, all of the 133rd General Assembly. 3873

Section 4731.22 of the Revised Code, as amended by H.B. 3874  
263, H.B. 442, and S.B. 260 of the 133rd General Assembly and 3875  
H.B. 110 of the 134th General Assembly. 3876