

**As Reported by the House Health Committee**

**132nd General Assembly**

**Regular Session**

**2017-2018**

**Sub. H. B. No. 258**

**Representatives Hagan, Hood**

**Cosponsors: Representatives Wiggam, Romanchuk, Ginter, Patton, Patmon, Lanese, Brinkman, Blessing, DeVitis, Roegner, Slaby, Henne, Butler, Antani, Merrin, Schuring, Retherford, Conditt, Keller, Zeltwanger, Stein, Young, Becker, Green, Brenner, Hambley, Kick, Householder, Perales, Dean, LaTourette, Schaffer, Koehler, Huffman, McColley, Riedel, Sprague, Vitale, Pelanda, Goodman, Johnson, Speaker Rosenberger, Representatives Smith, R., Thompson, Landis, Faber, Hill, Lipps**

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**A BILL**

To amend sections 2317.56, 2919.171, 2919.19, 1  
2919.191, 2919.192, 2919.193, and 4731.22; to 2  
amend, for the purpose of adopting new section 3  
numbers as indicated in parentheses, sections 4  
2919.191 (2919.192), 2919.192 (2919.194), and 5  
2919.193 (2919.198); and to enact new sections 6  
2919.191 and 2919.193 and sections 2919.195, 7  
2919.196, 2919.197, 2919.199, 2919.1910, and 8  
2919.1911 of the Revised Code to generally 9  
prohibit an abortion of an unborn human 10  
individual with a detectable heartbeat and to 11  
create the Joint Legislative Committee on 12  
Adoption Promotion and Support. 13

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

**Section 1.** That sections 2317.56, 2919.171, 2919.19, 14

2919.191, 2919.192, 2919.193, and 4731.22 be amended; sections 15  
2919.191 (2919.192), 2919.192 (2919.194), and 2919.193 16  
(2919.198) be amended for the purpose of adopting new section 17  
numbers as shown in parentheses; and new sections 2919.191 and 18  
2919.193 and sections 2919.195, 2919.196, 2919.197, 2919.199, 19  
2919.1910, and 2919.1911 of the Revised Code be enacted to read 20  
as follows: 21

**Sec. 2317.56.** (A) As used in this section: 22

(1) "Medical emergency" has the same meaning as in section 23  
2919.16 of the Revised Code. 24

(2) "Medical necessity" means a medical condition of a 25  
pregnant woman that, in the reasonable judgment of the physician 26  
who is attending the woman, so complicates the pregnancy that it 27  
necessitates the immediate performance or inducement of an 28  
abortion. 29

(3) "Probable gestational age of the embryo or fetus" 30  
means the gestational age that, in the judgment of a physician, 31  
is, with reasonable probability, the gestational age of the 32  
embryo or fetus at the time that the physician informs a 33  
pregnant woman pursuant to division (B) (1) (b) of this section. 34

(B) Except when there is a medical emergency or medical 35  
necessity, an abortion shall be performed or induced only if all 36  
of the following conditions are satisfied: 37

(1) At least twenty-four hours prior to the performance or 38  
inducement of the abortion, a physician meets with the pregnant 39  
woman in person in an individual, private setting and gives her 40  
an adequate opportunity to ask questions about the abortion that 41  
will be performed or induced. At this meeting, the physician 42  
shall inform the pregnant woman, verbally or, if she is hearing 43

impaired, by other means of communication, of all of the 44  
following: 45

(a) The nature and purpose of the particular abortion 46  
procedure to be used and the medical risks associated with that 47  
procedure; 48

(b) The probable gestational age of the embryo or fetus; 49

(c) The medical risks associated with the pregnant woman 50  
carrying the pregnancy to term. 51

The meeting need not occur at the facility where the 52  
abortion is to be performed or induced, and the physician 53  
involved in the meeting need not be affiliated with that 54  
facility or with the physician who is scheduled to perform or 55  
induce the abortion. 56

(2) At least twenty-four hours prior to the performance or 57  
inducement of the abortion, the physician who is to perform or 58  
induce the abortion or the physician's agent does each of the 59  
following in person, by telephone, by certified mail, return 60  
receipt requested, or by regular mail evidenced by a certificate 61  
of mailing: 62

(a) Inform the pregnant woman of the name of the physician 63  
who is scheduled to perform or induce the abortion; 64

(b) Give the pregnant woman copies of the published 65  
materials described in division (C) of this section; 66

(c) Inform the pregnant woman that the materials given 67  
pursuant to division (B) (2) (b) of this section are published by 68  
the state and that they describe the embryo or fetus and list 69  
agencies that offer alternatives to abortion. The pregnant woman 70  
may choose to examine or not to examine the materials. A 71

physician or an agent of a physician may choose to be 72  
disassociated from the materials and may choose to comment or 73  
not comment on the materials. 74

(3) If it has been determined that the unborn human 75  
individual the pregnant woman is carrying has a detectable fetal 76  
heartbeat, the physician who is to perform or induce the 77  
abortion shall comply with the informed consent requirements in 78  
section ~~2919.192~~ 2919.194 of the Revised Code in addition to 79  
complying with the informed consent requirements in divisions 80  
(B) (1), (2), (4), and (5) of this section. 81

(4) Prior to the performance or inducement of the 82  
abortion, the pregnant woman signs a form consenting to the 83  
abortion and certifies both of the following on that form: 84

(a) She has received the information and materials 85  
described in divisions (B) (1) and (2) of this section, and her 86  
questions about the abortion that will be performed or induced 87  
have been answered in a satisfactory manner. 88

(b) She consents to the particular abortion voluntarily, 89  
knowingly, intelligently, and without coercion by any person, 90  
and she is not under the influence of any drug of abuse or 91  
alcohol. 92

The form shall contain the name and contact information of 93  
the physician who provided to the pregnant woman the information 94  
described in division (B) (1) of this section. 95

(5) Prior to the performance or inducement of the 96  
abortion, the physician who is scheduled to perform or induce 97  
the abortion or the physician's agent receives a copy of the 98  
pregnant woman's signed form on which she consents to the 99  
abortion and that includes the certification required by 100

division (B) (4) of this section. 101

(C) The department of health shall publish in English and 102  
in Spanish, in a typeface large enough to be clearly legible, 103  
and in an easily comprehensible format, the following materials 104  
on the department's web site: 105

(1) Materials that inform the pregnant woman about family 106  
planning information, of publicly funded agencies that are 107  
available to assist in family planning, and of public and 108  
private agencies and services that are available to assist her 109  
through the pregnancy, upon childbirth, and while the child is 110  
dependent, including, but not limited to, adoption agencies. The 111  
materials shall be geographically indexed; include a 112  
comprehensive list of the available agencies, a description of 113  
the services offered by the agencies, and the telephone numbers 114  
and addresses of the agencies; and inform the pregnant woman 115  
about available medical assistance benefits for prenatal care, 116  
childbirth, and neonatal care and about the support obligations 117  
of the father of a child who is born alive. The department shall 118  
ensure that the materials described in division (C) (1) of this 119  
section are comprehensive and do not directly or indirectly 120  
promote, exclude, or discourage the use of any agency or service 121  
described in this division. 122

(2) Materials that inform the pregnant woman of the 123  
probable anatomical and physiological characteristics of the 124  
zygote, blastocyte, embryo, or fetus at two-week gestational 125  
increments for the first sixteen weeks of pregnancy and at four- 126  
week gestational increments from the seventeenth week of 127  
pregnancy to full term, including any relevant information 128  
regarding the time at which the fetus possibly would be viable. 129  
The department shall cause these materials to be published only 130

after it consults with the Ohio state medical association and 131  
the Ohio section of the American college of obstetricians and 132  
gynecologists relative to the probable anatomical and 133  
physiological characteristics of a zygote, blastocyte, embryo, 134  
or fetus at the various gestational increments. The materials 135  
shall use language that is understandable by the average person 136  
who is not medically trained, shall be objective and 137  
nonjudgmental, and shall include only accurate scientific 138  
information about the zygote, blastocyte, embryo, or fetus at 139  
the various gestational increments. If the materials use a 140  
pictorial, photographic, or other depiction to provide 141  
information regarding the zygote, blastocyte, embryo, or fetus, 142  
the materials shall include, in a conspicuous manner, a scale or 143  
other explanation that is understandable by the average person 144  
and that can be used to determine the actual size of the zygote, 145  
blastocyte, embryo, or fetus at a particular gestational 146  
increment as contrasted with the depicted size of the zygote, 147  
blastocyte, embryo, or fetus at that gestational increment. 148

(D) Upon the submission of a request to the department of 149  
health by any person, hospital, physician, or medical facility 150  
for one copy of the materials published in accordance with 151  
division (C) of this section, the department shall make the 152  
requested copy of the materials available to the person, 153  
hospital, physician, or medical facility that requested the 154  
copy. 155

(E) If a medical emergency or medical necessity compels 156  
the performance or inducement of an abortion, the physician who 157  
will perform or induce the abortion, prior to its performance or 158  
inducement if possible, shall inform the pregnant woman of the 159  
medical indications supporting the physician's judgment that an 160  
immediate abortion is necessary. Any physician who performs or 161

induces an abortion without the prior satisfaction of the 162  
conditions specified in division (B) of this section because of 163  
a medical emergency or medical necessity shall enter the reasons 164  
for the conclusion that a medical emergency or medical necessity 165  
exists in the medical record of the pregnant woman. 166

(F) If the conditions specified in division (B) of this 167  
section are satisfied, consent to an abortion shall be presumed 168  
to be valid and effective. 169

(G) The performance or inducement of an abortion without 170  
the prior satisfaction of the conditions specified in division 171  
(B) of this section does not constitute, and shall not be 172  
construed as constituting, a violation of division (A) of 173  
section 2919.12 of the Revised Code. The failure of a physician 174  
to satisfy the conditions of division (B) of this section prior 175  
to performing or inducing an abortion upon a pregnant woman may 176  
be the basis of both of the following: 177

(1) A civil action for compensatory and exemplary damages 178  
as described in division (H) of this section; 179

(2) Disciplinary action under section 4731.22 of the 180  
Revised Code. 181

(H) (1) Subject to divisions (H) (2) and (3) of this 182  
section, any physician who performs or induces an abortion with 183  
actual knowledge that the conditions specified in division (B) 184  
of this section have not been satisfied or with a heedless 185  
indifference as to whether those conditions have been satisfied 186  
is liable in compensatory and exemplary damages in a civil 187  
action to any person, or the representative of the estate of any 188  
person, who sustains injury, death, or loss to person or 189  
property as a result of the failure to satisfy those conditions. 190

In the civil action, the court additionally may enter any 191  
injunctive or other equitable relief that it considers 192  
appropriate. 193

(2) The following shall be affirmative defenses in a civil 194  
action authorized by division (H)(1) of this section: 195

(a) The physician performed or induced the abortion under 196  
the circumstances described in division (E) of this section. 197

(b) The physician made a good faith effort to satisfy the 198  
conditions specified in division (B) of this section. 199

(3) An employer or other principal is not liable in 200  
damages in a civil action authorized by division (H)(1) of this 201  
section on the basis of the doctrine of respondeat superior 202  
unless either of the following applies: 203

(a) The employer or other principal had actual knowledge 204  
or, by the exercise of reasonable diligence, should have known 205  
that an employee or agent performed or induced an abortion with 206  
actual knowledge that the conditions specified in division (B) 207  
of this section had not been satisfied or with a heedless 208  
indifference as to whether those conditions had been satisfied. 209

(b) The employer or other principal negligently failed to 210  
secure the compliance of an employee or agent with division (B) 211  
of this section. 212

(4) Notwithstanding division (E) of section 2919.12 of the 213  
Revised Code, the civil action authorized by division (H)(1) of 214  
this section shall be the exclusive civil remedy for persons, or 215  
the representatives of estates of persons, who allegedly sustain 216  
injury, death, or loss to person or property as a result of a 217  
failure to satisfy the conditions specified in division (B) of 218  
this section. 219



(I) The department of job and family services shall 220  
prepare and conduct a public information program to inform women 221  
of all available governmental programs and agencies that provide 222  
services or assistance for family planning, prenatal care, child 223  
care, or alternatives to abortion. 224

**Sec. 2919.171.** (A) (1) A physician who performs or induces 225  
or attempts to perform or induce an abortion on a pregnant woman 226  
shall submit a report to the department of health in accordance 227  
with the forms, rules, and regulations adopted by the department 228  
that includes all of the information the physician is required 229  
to certify in writing or determine under ~~sections~~ section 230  
2919.17 and, section 2919.18, divisions (A) and (C) of section 231  
2919.192, division (C) of section 2919.193, division (B) of 232  
section 2919.195, or division (A) of section 2919.196 of the 233  
Revised Code~~+~~. 234

(2) If a person other than the physician described in 235  
division (A) (1) of this section makes or maintains a record 236  
required by sections 2919.192 to 2919.196 of the Revised Code on 237  
the physician's behalf or at the physician's direction, that 238  
person shall comply with the reporting requirement described in 239  
division (A) (1) of this section as if the person were the 240  
physician described in that division. 241

(B) By September 30 of each year, the department of health 242  
shall issue a public report that provides statistics for the 243  
previous calendar year compiled from all of the reports covering 244  
that calendar year submitted to the department in accordance 245  
with this section for each of the items listed in division (A) 246  
of this section. The report shall also provide the statistics 247  
for each previous calendar year in which a report was filed with 248  
the department pursuant to this section, adjusted to reflect any 249

additional information that a physician provides to the 250  
department in a late or corrected report. The department shall 251  
ensure that none of the information included in the report could 252  
reasonably lead to the identification of any pregnant woman upon 253  
whom an abortion is performed. 254

(C) (1) The physician shall submit the report described in 255  
division (A) of this section to the department of health within 256  
fifteen days after the woman is discharged. If the physician 257  
fails to submit the report more than thirty days after that 258  
fifteen-day deadline, the physician shall be subject to a late 259  
fee of five hundred dollars for each additional thirty-day 260  
period or portion of a thirty-day period the report is overdue. 261  
A physician who is required to submit to the department of 262  
health a report under division (A) of this section and who has 263  
not submitted a report or has submitted an incomplete report 264  
more than one year following the fifteen-day deadline may, in an 265  
action brought by the department of health, be directed by a 266  
court of competent jurisdiction to submit a complete report to 267  
the department of health within a period of time stated in a 268  
court order or be subject to contempt of court. 269

(2) If a physician fails to comply with the requirements 270  
of this section, other than filing a late report with the 271  
department of health, or fails to submit a complete report to 272  
the department of health in accordance with a court order, the 273  
physician is subject to division (B) (44) of section 4731.22 of 274  
the Revised Code. 275

(3) No person shall falsify any report required under this 276  
section. Whoever violates this division is guilty of abortion 277  
report falsification, a misdemeanor of the first degree. 278

(D) ~~Within ninety days of October 20, 2011, the~~ The 279

department of health shall adopt rules pursuant to section 280  
111.15 of the Revised Code to assist in compliance with this 281  
section. 282

**Sec. 2919.19.** (A) As used in this section and sections 283  
2919.191 to ~~2919.193~~ 2919.1910 of the Revised Code: 284

~~(A)~~ (1) "Conception" means fertilization. 285

(2) "Contraceptive" means a drug, device, or chemical that 286  
prevents conception. 287

(3) "DNA" means deoxyribonucleic acid. 288

(4) "Fetal heartbeat" means cardiac activity or the steady 289  
and repetitive rhythmic contraction of the fetal heart within 290  
the gestational sac. 291

~~(B)~~ (5) "Fetus" means the human offspring developing 292  
during pregnancy from the moment of conception and includes the 293  
embryonic stage of development. 294

~~(C)~~ (6) "Gestational age" means the age of an unborn human 295  
individual as calculated from the first day of the last 296  
menstrual period of a pregnant woman. 297

~~(D)~~ (7) "Gestational sac" means the structure that 298  
comprises the extraembryonic membranes that envelop the fetus 299  
and that is typically visible by ultrasound after the fourth 300  
week of pregnancy. 301

~~(E)~~ (8) "Intrauterine pregnancy" means a pregnancy in 302  
which the fetus is attached to the placenta within the uterus of 303  
the pregnant woman. 304

(9) "Medical emergency" has the same meaning as in section 305  
2919.16 of the Revised Code. 306

~~(F)~~ (10) "Physician" has the same meaning as in section 307  
2305.113 of the Revised Code. 308

~~(G)~~ (11) "Pregnancy" means the human female reproductive 309  
condition that begins with fertilization, when the woman is 310  
carrying the developing human offspring, and that is calculated 311  
from the first day of the last menstrual period of the woman. 312

~~(H)~~ (12) "Serious risk of the substantial and irreversible 313  
impairment of a major bodily function" has the same meaning as 314  
in section 2919.16 of the Revised Code. 315

~~(I)~~ (13) "Spontaneous miscarriage" means the natural or 316  
accidental termination of a pregnancy and the expulsion of the 317  
fetus, typically caused by genetic defects in the fetus or 318  
physical abnormalities in the pregnant woman. 319

(14) "Standard medical practice" means the degree of 320  
skill, care, and diligence that a physician of the same medical 321  
specialty would employ in like circumstances. As applied to the 322  
method used to determine the presence of a fetal heartbeat for 323  
purposes of section ~~2919.191~~ 2919.192 of the Revised Code, 324  
"standard medical practice" includes employing the appropriate 325  
means of detection depending on the estimated gestational age of 326  
the fetus and the condition of the woman and her pregnancy. 327

~~(J)~~ (15) "Unborn human individual" means an individual 328  
organism of the species homo sapiens from fertilization until 329  
live birth. 330

(B) (1) It is the intent of the general assembly that a 331  
court judgment or order suspending enforcement of any provision 332  
of this section or sections 2919.171 or 2919.191 to 2919.1910 of 333  
the Revised Code is not to be regarded as tantamount to repeal 334  
of that provision. 335

(2) After the issuance of a decision by the supreme court 336  
of the United States overruling Roe v. Wade, 410 U.S. 113 337  
(1973), the issuance of any other court order or judgment 338  
restoring, expanding, or clarifying the authority of states to 339  
prohibit or regulate abortion entirely or in part, or the 340  
effective date of an amendment to the Constitution of the United 341  
States restoring, expanding, or clarifying the authority of 342  
states to prohibit or regulate abortion entirely or in part, the 343  
attorney general may apply to the pertinent state or federal 344  
court for either or both of the following: 345

(a) A declaration that any one or more sections specified 346  
in division (B) (1) of this section are constitutional; 347

(b) A judgment or order lifting an injunction against the 348  
enforcement of any one or more sections specified in division 349  
(B) (1) of this section. 350

(3) If the attorney general fails to apply for the relief 351  
described in division (B) (2) of this section within the thirty- 352  
day period after an event described in that division occurs, any 353  
county prosecutor may apply to the appropriate state or federal 354  
court for such relief. 355

(4) If any provision of this section or sections 2919.171 356  
or 2919.191 to 2919.1910 of the Revised Code is held invalid, or 357  
if the application of such provision to any person or 358  
circumstance is held invalid, the invalidity of that provision 359  
does not affect any other provisions or applications of this 360  
section and sections 2919.171 and 2919.191 to 2919.1910 of the 361  
Revised Code that can be given effect without the invalid 362  
provision or application, and to this end the provisions of this 363  
section and sections 2919.171 and 2919.191 to 2919.1910 of the 364  
Revised Code are severable as provided in section 1.50 of the 365

Revised Code. In particular, it is the intent of the general 366  
assembly that any invalidity or potential invalidity of a 367  
provision of this section or sections 2919.171 or 2919.191 to 368  
2919.1910 of the Revised Code is not to impair the immediate and 369  
continuing enforceability of the remaining provisions. It is 370  
furthermore the intent of the general assembly that the 371  
provisions of this section and sections 2919.171 or 2919.191 to 372  
2919.1910 of the Revised Code are not to have the effect of 373  
repealing or limiting any other laws of this state, except as 374  
specified by this section and sections 2919.171 and 2919.191 to 375  
2919.1910 of the Revised Code. 376

**Sec. 2919.191.** (A) The general assembly hereby declares 377  
that it finds, according to contemporary medical research, all 378  
of the following: 379

(1) As many as thirty per cent of natural pregnancies end 380  
in spontaneous miscarriage. 381

(2) Less than five per cent of all natural pregnancies end 382  
in spontaneous miscarriage after detection of fetal cardiac 383  
activity. 384

(3) Over ninety per cent of in vitro pregnancies survive 385  
the first trimester if cardiac activity is detected in the 386  
gestational sac. 387

(4) Nearly ninety per cent of in vitro pregnancies do not 388  
survive the first trimester where cardiac activity is not 389  
detected in the gestational sac. 390

(5) Fetal heartbeat, therefore, has become a key medical 391  
predictor that an unborn human individual will reach live birth. 392

(6) Cardiac activity begins at a biologically identifiable 393  
moment in time, normally when the fetal heart is formed in the 394

gestational sac. 395

(7) The state of Ohio has legitimate interests from the 396  
outset of the pregnancy in protecting the health of the woman 397  
and the life of an unborn human individual who may be born. 398

(8) In order to make an informed choice about whether to 399  
continue her pregnancy, the pregnant woman has a legitimate 400  
interest in knowing the likelihood of the fetus surviving to 401  
full-term birth based upon the presence of cardiac activity. 402

(B) Sections 2919.192 to 2919.195 of the Revised Code 403  
apply only to intrauterine pregnancies. 404

**Sec. ~~2919.191~~ 2919.192.** (A) A person who intends to 405  
perform or induce an abortion on a pregnant woman shall 406  
determine whether there is a detectable fetal heartbeat of the 407  
unborn human individual the pregnant woman is carrying. The 408  
method of determining the presence of a fetal heartbeat shall be 409  
consistent with the person's good faith understanding of 410  
standard medical practice, provided that if rules have been 411  
adopted under division ~~(C)~~ (B) of this section, the method 412  
chosen shall be one that is consistent with the rules. The 413  
person who determines the presence or absence of a fetal 414  
heartbeat shall record in the pregnant woman's medical record 415  
the estimated gestational age of the unborn human individual, 416  
the method used to test for a fetal heartbeat, the date and time 417  
of the test, and the results of the test. 418

~~(B) (1) Except when a medical emergency exists that~~ 419  
~~prevents compliance with this division, no person shall perform~~ 420  
~~or induce an abortion on a pregnant woman prior to determining~~ 421  
~~if the unborn human individual the pregnant woman is carrying~~ 422  
~~has a detectable fetal heartbeat. Any person who performs or~~ 423

~~induces an abortion on a pregnant woman based on the exception— 424  
in this division shall note in the pregnant woman's medical— 425  
records that a medical emergency necessitating the abortion— 426  
existed and shall also note the medical condition of the— 427  
pregnant woman that prevented compliance with this division. The— 428  
person shall maintain a copy of the notes described in this— 429  
division in the person's own records for at least seven years— 430  
after the notes are entered into the medical records. 431~~

~~(2) The person who performs the examination for the 432  
presence of a fetal heartbeat shall give the pregnant woman the 433  
option to view or hear the fetal heartbeat. 434~~

~~(C) (B) The director of health may ~~promulgate~~ adopt rules 435  
pursuant to section 111.15 of the Revised Code specifying the 436  
appropriate methods of performing an examination for the purpose 437  
of determining the presence of a fetal heartbeat of an unborn 438  
individual based on standard medical practice. The rules shall 439  
require only that an examination shall be performed externally. 440~~

~~(D) (C) A person is not in violation of division (A) ~~or~~ 441  
~~(B)~~ of this section if that person has performed an examination 442  
for the purpose of determining the presence of a fetal heartbeat 443  
in the fetus of an unborn human individual utilizing standard 444  
medical practice, that examination does not reveal a fetal 445  
heartbeat or the person has been informed by a physician who has 446  
performed the examination for a fetal heartbeat that the 447  
examination did not reveal a fetal heartbeat, and the person 448  
notes in the pregnant woman's medical records the procedure 449  
utilized to detect the presence of a fetal heartbeat. 450~~

~~(E) Except as provided in division (F) of this section, no 451  
person shall knowingly and purposefully perform or induce an 452  
abortion on a pregnant woman before determining in accordance 453~~



~~with division (A) of this section whether the unborn human individual the pregnant woman is carrying has a detectable heartbeat. The failure of a person to satisfy the requirements of this section prior to performing or inducing an abortion on a pregnant woman may be the basis for either of the following:~~ 454  
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~~(1) A civil action for compensatory and exemplary damages;~~ 459

~~(2) Disciplinary action under section 4731.22 of the Revised Code.~~ 460  
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~~(F) Division (E) of this section does not apply to a physician who performs or induces the abortion if the physician believes that a medical emergency exists that prevents compliance with that division.~~ 462  
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~~(G) The director of health may determine and specify in rules adopted pursuant to section 111.15 of the Revised Code and based upon available medical evidence the statistical probability of bringing an unborn human individual to term based on the gestational age of an unborn human individual who possesses a detectable fetal heartbeat.~~ 466  
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~~(H) A woman on whom an abortion is performed in violation of division (B) of this section or division (B) (3) of section 2317.56 of the Revised Code may file a civil action for the wrongful death of the woman's unborn child and may receive at the mother's election at any time prior to final judgment damages in an amount equal to ten thousand dollars or an amount determined by the trier of fact after consideration of the evidence subject to the same defenses and requirements of proof, except any requirement of live birth, as would apply to a suit for the wrongful death of a child who had been born alive.~~ 472  
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Sec. 2919.193. (A) Except as provided in division (B) of 482

this section, no person shall knowingly and purposefully perform 483  
or induce an abortion on a pregnant woman before determining in 484  
accordance with division (A) of section 2919.192 of the Revised 485  
Code whether the unborn human individual the pregnant woman is 486  
carrying has a detectable heartbeat. 487

Whoever violates this division is guilty of performing or 488  
inducing an abortion before determining whether there is a 489  
detectable fetal heartbeat, a felony of the fifth degree. A 490  
violation of this division may also be the basis of either of 491  
the following: 492

(1) A civil action for compensatory and exemplary damages; 493

(2) Disciplinary action under section 4731.22 of the 494  
Revised Code. 495

(B) Division (A) of this section does not apply to a 496  
physician who performs or induces the abortion if the physician 497  
believes that a medical emergency exists that prevents 498  
compliance with that division. 499

(C) A physician who performs or induces an abortion on a 500  
pregnant woman based on the exception in division (B) of this 501  
section shall make written notations in the pregnant woman's 502  
medical records of both of the following: 503

(1) The physician's belief that a medical emergency 504  
necessitating the abortion existed; 505

(2) The medical condition of the pregnant woman that 506  
assertedly prevented compliance with division (A) of this 507  
section. 508

For at least seven years from the date the notations are 509  
made, the physician shall maintain in the physician's own 510

records a copy of the notations. 511

(D) A person is not in violation of division (A) of this 512  
section if the person acts in accordance with division (A) of 513  
section 2919.192 of the Revised Code and the method used to 514  
determine the presence of a fetal heartbeat does not reveal a 515  
fetal heartbeat. 516

**Sec. ~~2919.192~~ 2919.194.** (A) If a person who intends to 517  
perform or induce an abortion on a pregnant woman has 518  
determined, under section ~~2919.191~~ 2919.192 of the Revised Code, 519  
that the unborn human individual the pregnant woman is carrying 520  
has a detectable heartbeat, the person shall not, except as 521  
provided in division (B) of this section, perform or induce the 522  
abortion until all of the following requirements have been met 523  
and at least twenty-four hours have elapsed after the last of 524  
the requirements is met: 525

(1) The person intending to perform or induce the abortion 526  
shall inform the pregnant woman in writing that the unborn human 527  
individual the pregnant woman is carrying has a fetal heartbeat. 528

(2) The person intending to perform or induce the abortion 529  
shall inform the pregnant woman, to the best of the person's 530  
knowledge, of the statistical probability of bringing the unborn 531  
human individual possessing a detectable fetal heartbeat to term 532  
based on the gestational age of the unborn human individual the 533  
pregnant woman is carrying or, if the director of health has 534  
specified statistical probability information pursuant to rules 535  
adopted under division (C) of this section, shall provide to the 536  
pregnant woman that information. 537

(3) The pregnant woman shall sign a form acknowledging 538  
that the pregnant woman has received information from the person 539

intending to perform or induce the abortion that the unborn 540  
human individual the pregnant woman is carrying has a fetal 541  
heartbeat and that the pregnant woman is aware of the 542  
statistical probability of bringing the unborn human individual 543  
the pregnant woman is carrying to term. 544

(B) Division (A) of this section does not apply if the 545  
person who intends to perform or induce the abortion believes 546  
that a medical emergency exists that prevents compliance with 547  
that division. 548

(C) The director of health may adopt rules that specify 549  
information regarding the statistical probability of bringing an 550  
unborn human individual possessing a detectable heartbeat to 551  
term based on the gestational age of the unborn human 552  
individual. The rules shall be based on available medical 553  
evidence and shall be adopted in accordance with section 111.15 554  
of the Revised Code. 555

(D) This section does not have the effect of repealing or 556  
limiting any other provision of the Revised Code relating to 557  
informed consent for an abortion, including the provisions in 558  
section 2317.56 of the Revised Code. 559

(E) Whoever violates division (A) of this section is 560  
guilty of performing or inducing an abortion without informed 561  
consent when there is a detectable fetal heartbeat, a 562  
misdemeanor of the first degree on a first offense and a felony 563  
of the fourth degree on each subsequent offense. 564

**Sec. 2919.195.** (A) Except as provided in division (B) of 565  
this section, no person shall knowingly and purposefully perform 566  
or induce an abortion on a pregnant woman with the specific 567  
intent of causing or abetting the termination of the life of the 568

unborn human individual the pregnant woman is carrying and whose 569  
fetal heartbeat has been detected in accordance with division 570  
(A) of section 2919.192 of the Revised Code. 571

Whoever violates this division is guilty of performing or 572  
inducing an abortion after the detection of a fetal heartbeat, a 573  
felony of the fifth degree. 574

(B) Division (A) of this section does not apply to a 575  
physician who performs a medical procedure that, in the 576  
physician's reasonable medical judgment, is designed or intended 577  
to prevent the death of the pregnant woman or to prevent a 578  
serious risk of the substantial and irreversible impairment of a 579  
major bodily function of the pregnant woman. 580

A physician who performs a medical procedure as described 581  
in this division shall declare, in a written document, that the 582  
medical procedure is necessary, to the best of the physician's 583  
reasonable medical judgment, to prevent the death of the 584  
pregnant woman or to prevent a serious risk of the substantial 585  
and irreversible impairment of a major bodily function of the 586  
pregnant woman. In the document, the physician shall specify the 587  
pregnant woman's medical condition that the medical procedure is 588  
asserted to address and the medical rationale for the 589  
physician's conclusion that the medical procedure is necessary 590  
to prevent the death of the pregnant woman or to prevent a 591  
serious risk of the substantial and irreversible impairment of a 592  
major bodily function of the pregnant woman. 593

A physician who performs a medical procedure as described 594  
in this division shall place the written document required by 595  
this division in the pregnant woman's medical records. The 596  
physician shall maintain a copy of the document in the 597  
physician's own records for at least seven years from the date 598

the document is created. 599

(C) A person is not in violation of division (A) of this 600  
section if the person acts in accordance with division (A) of 601  
section 2919.192 of the Revised Code and the method used to 602  
determine the presence of a fetal heartbeat does not reveal a 603  
fetal heartbeat. 604

(D) Division (A) of this section does not have the effect 605  
of repealing or limiting any other provision of the Revised Code 606  
that restricts or regulates the performance or inducement of an 607  
abortion by a particular method or during a particular stage of 608  
a pregnancy. 609

**Sec. 2919.196.** The provisions of this section are wholly 610  
independent of the requirements of sections 2919.192 to 2919.195 611  
of the Revised Code. 612

(A) A person who performs or induces an abortion on a 613  
pregnant woman shall do whichever of the following is 614  
applicable: 615

(1) If the reason for the abortion purported is to 616  
preserve the health of the pregnant woman, the person shall 617  
specify in a written document the medical condition that the 618  
abortion is asserted to address and the medical rationale for 619  
the person's conclusion that the abortion is necessary to 620  
address that condition. 621

(2) If the reason for the abortion is other than to 622  
preserve the health of the pregnant woman, the person shall 623  
specify in a written document that maternal health is not the 624  
purpose of the abortion. 625

(B) The person who specifies the information in the 626  
document described in division (A) of this section shall place 627

the document in the pregnant woman's medical records. The person 628  
who specifies the information shall maintain a copy of the 629  
document in the person's own records for at least seven years 630  
from the date the document is created. 631

Sec. 2919.197. Nothing in sections 2919.19 to 2919.196 of 632  
the Revised Code prohibits the sale, use, prescription, or 633  
administration of a drug, device, or chemical that is designed 634  
for contraceptive purposes. 635

Sec. 2919.193-2919.198. A pregnant woman on whom an 636  
abortion is performed or induced in violation of section 637  
2919.191 or 2919.192-2919.193, 2919.194, or 2919.195 of the 638  
Revised Code is not guilty of violating any of those sections; 639  
is not guilty of attempting to commit, conspiring to commit, or 640  
complicity in committing a violation of any of those sections; 641  
and is not subject to a civil penalty based on the abortion 642  
being performed or induced in violation of any of those 643  
sections. 644

Sec. 2919.199. (A) A woman who meets either or both of the 645  
following criteria may file a civil action for the wrongful 646  
death of her unborn child: 647

(1) A woman on whom an abortion was performed or induced 648  
in violation of division (A) of section 2919.193 or division (A) 649  
of section 2919.195 of the Revised Code; 650

(2) A woman on whom an abortion was performed or induced 651  
who was not given the information described in divisions (A) (1) 652  
and (2) of section 2919.194 of the Revised Code or who did not 653  
sign a form described in division (A) (3) of section 2919.194 of 654  
the Revised code. 655

(B) A woman who prevails in an action filed under division 656

(A) of this section shall receive both of the following from the 657  
person who committed the one or more acts described in division 658  
(A) (1) or (2) of this section: 659

(1) Damages in an amount equal to ten thousand dollars or 660  
an amount determined by the trier of fact after consideration of 661  
the evidence at the mother's election at any time prior to final 662  
judgment subject to the same defenses and requirements of proof, 663  
except any requirement of live birth, as would apply to a suit 664  
for the wrongful death of a child who had been born alive; 665

(2) Court costs and reasonable attorney's fees. 666

(C) A determination that division (A) of section 2919.193 667  
of the Revised Code, division (A) (1), (2), or (3) of section 668  
2919.194 of the Revised Code, or division (A) of section 669  
2919.195 of the Revised Code is unconstitutional shall be a 670  
defense to an action filed under division (A) of this section 671  
alleging that the defendant violated the division that was 672  
determined to be unconstitutional. 673

(D) If the defendant in an action filed under division (A) 674  
of this section prevails and all of the following apply the 675  
court shall award reasonable attorney's fees to the defendant in 676  
accordance with section 2323.51 of the Revised Code: 677

(1) The court finds that the commencement of the action 678  
constitutes frivolous conduct, as defined in section 2323.51 of 679  
the Revised Code. 680

(2) The court's finding in division (D) (1) of this section 681  
is not based on that court or another court determining that 682  
division (A) of section 2919.193 of the Revised Code, division 683  
(A) (1), (2), or (3) of section 2919.194 of the Revised Code, or 684  
division (A) of section 2919.195 of the Revised Code is 685



unconstitutional. 686

(3) The court finds that the defendant was adversely 687  
affected by the frivolous conduct. 688

**Sec. 2919.1910.** (A) It is the intent of the general 689  
assembly that women whose pregnancies are protected under 690  
division (A) of section 2919.195 of the Revised Code be informed 691  
of available options for adoption. 692

(B) In furtherance of the intent expressed in division (A) 693  
of this section, there is hereby created the joint legislative 694  
committee on adoption promotion and support. The committee may 695  
review or study any matter that it considers relevant to the 696  
adoption process in this state, with priority given to the study 697  
or review of mechanisms intended to increase awareness of the 698  
process, increase its effectiveness, or both. 699

(C) The committee shall consist of three members of the 700  
house of representatives appointed by the speaker of the house 701  
of representatives and three members of the senate appointed by 702  
the president of the senate. Not more than two members appointed 703  
by the speaker of the house of representatives and not more than 704  
two members appointed by the president of the senate may be of 705  
the same political party. 706

Each member of the committee shall hold office during the 707  
general assembly in which the member is appointed and until a 708  
successor has been appointed, notwithstanding the adjournment 709  
sine die of the general assembly in which the member was 710  
appointed or the expiration of the member's term as a member of 711  
the general assembly. Any vacancies occurring among the members 712  
of the committee shall be filled in the manner of the original 713  
appointment. 714

(D) The committee has the same powers as other standing or 715  
select committees of the general assembly. 716

Sec. 2919.1911. The department of health shall inspect the 717  
medical records from any facility that performs abortions to 718  
ensure that the physicians or other persons who perform 719  
abortions at that facility are in compliance with the reporting 720  
requirements under section 2919.171 of the Revised Code. The 721  
facility shall make the medical records available for inspection 722  
to the department of health but shall not release any personal 723  
medical information in the medical records that is prohibited by 724  
law. 725

**Sec. 4731.22.** (A) The state medical board, by an 726  
affirmative vote of not fewer than six of its members, may 727  
limit, revoke, or suspend a license or certificate to practice 728  
or certificate to recommend, refuse to grant a license or 729  
certificate, refuse to renew a license or certificate, refuse to 730  
reinstate a license or certificate, or reprimand or place on 731  
probation the holder of a license or certificate if the 732  
individual applying for or holding the license or certificate is 733  
found by the board to have committed fraud during the 734  
administration of the examination for a license or certificate 735  
to practice or to have committed fraud, misrepresentation, or 736  
deception in applying for, renewing, or securing any license or 737  
certificate to practice or certificate to recommend issued by 738  
the board. 739

(B) The board, by an affirmative vote of not fewer than 740  
six members, shall, to the extent permitted by law, limit, 741  
revoke, or suspend a license or certificate to practice or 742  
certificate to recommend, refuse to issue a license or 743  
certificate, refuse to renew a license or certificate, refuse to 744

reinstate a license or certificate, or reprimand or place on 745  
probation the holder of a license or certificate for one or more 746  
of the following reasons: 747

(1) Permitting one's name or one's license or certificate 748  
to practice to be used by a person, group, or corporation when 749  
the individual concerned is not actually directing the treatment 750  
given; 751

(2) Failure to maintain minimal standards applicable to 752  
the selection or administration of drugs, or failure to employ 753  
acceptable scientific methods in the selection of drugs or other 754  
modalities for treatment of disease; 755

(3) Except as provided in section 4731.97 of the Revised 756  
Code, selling, giving away, personally furnishing, prescribing, 757  
or administering drugs for other than legal and legitimate 758  
therapeutic purposes or a plea of guilty to, a judicial finding 759  
of guilt of, or a judicial finding of eligibility for 760  
intervention in lieu of conviction of, a violation of any 761  
federal or state law regulating the possession, distribution, or 762  
use of any drug; 763

(4) Willfully betraying a professional confidence. 764

For purposes of this division, "willfully betraying a 765  
professional confidence" does not include providing any 766  
information, documents, or reports under sections 307.621 to 767  
307.629 of the Revised Code to a child fatality review board; 768  
does not include providing any information, documents, or 769  
reports to the director of health pursuant to guidelines 770  
established under section 3701.70 of the Revised Code; does not 771  
include written notice to a mental health professional under 772  
section 4731.62 of the Revised Code; and does not include the 773

making of a report of an employee's use of a drug of abuse, or a 774  
report of a condition of an employee other than one involving 775  
the use of a drug of abuse, to the employer of the employee as 776  
described in division (B) of section 2305.33 of the Revised 777  
Code. Nothing in this division affects the immunity from civil 778  
liability conferred by section 2305.33 or 4731.62 of the Revised 779  
Code upon a physician who makes a report in accordance with 780  
section 2305.33 or notifies a mental health professional in 781  
accordance with section 4731.62 of the Revised Code. As used in 782  
this division, "employee," "employer," and "physician" have the 783  
same meanings as in section 2305.33 of the Revised Code. 784

(5) Making a false, fraudulent, deceptive, or misleading 785  
statement in the solicitation of or advertising for patients; in 786  
relation to the practice of medicine and surgery, osteopathic 787  
medicine and surgery, podiatric medicine and surgery, or a 788  
limited branch of medicine; or in securing or attempting to 789  
secure any license or certificate to practice issued by the 790  
board. 791

As used in this division, "false, fraudulent, deceptive, 792  
or misleading statement" means a statement that includes a 793  
misrepresentation of fact, is likely to mislead or deceive 794  
because of a failure to disclose material facts, is intended or 795  
is likely to create false or unjustified expectations of 796  
favorable results, or includes representations or implications 797  
that in reasonable probability will cause an ordinarily prudent 798  
person to misunderstand or be deceived. 799

(6) A departure from, or the failure to conform to, 800  
minimal standards of care of similar practitioners under the 801  
same or similar circumstances, whether or not actual injury to a 802  
patient is established; 803

- (7) Representing, with the purpose of obtaining 804  
compensation or other advantage as personal gain or for any 805  
other person, that an incurable disease or injury, or other 806  
incurable condition, can be permanently cured; 807
- (8) The obtaining of, or attempting to obtain, money or 808  
anything of value by fraudulent misrepresentations in the course 809  
of practice; 810
- (9) A plea of guilty to, a judicial finding of guilt of, 811  
or a judicial finding of eligibility for intervention in lieu of 812  
conviction for, a felony; 813
- (10) Commission of an act that constitutes a felony in 814  
this state, regardless of the jurisdiction in which the act was 815  
committed; 816
- (11) A plea of guilty to, a judicial finding of guilt of, 817  
or a judicial finding of eligibility for intervention in lieu of 818  
conviction for, a misdemeanor committed in the course of 819  
practice; 820
- (12) Commission of an act in the course of practice that 821  
constitutes a misdemeanor in this state, regardless of the 822  
jurisdiction in which the act was committed; 823
- (13) A plea of guilty to, a judicial finding of guilt of, 824  
or a judicial finding of eligibility for intervention in lieu of 825  
conviction for, a misdemeanor involving moral turpitude; 826
- (14) Commission of an act involving moral turpitude that 827  
constitutes a misdemeanor in this state, regardless of the 828  
jurisdiction in which the act was committed; 829
- (15) Violation of the conditions of limitation placed by 830  
the board upon a license or certificate to practice; 831

(16) Failure to pay license renewal fees specified in this chapter; 832  
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(17) Except as authorized in section 4731.31 of the Revised Code, engaging in the division of fees for referral of patients, or the receiving of a thing of value in return for a specific referral of a patient to utilize a particular service or business; 834  
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(18) Subject to section 4731.226 of the Revised Code, violation of any provision of a code of ethics of the American medical association, the American osteopathic association, the American podiatric medical association, or any other national professional organizations that the board specifies by rule. The state medical board shall obtain and keep on file current copies of the codes of ethics of the various national professional organizations. The individual whose license or certificate is being suspended or revoked shall not be found to have violated any provision of a code of ethics of an organization not appropriate to the individual's profession. 839  
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For purposes of this division, a "provision of a code of ethics of a national professional organization" does not include any provision that would preclude the making of a report by a physician of an employee's use of a drug of abuse, or of a condition of an employee other than one involving the use of a drug of abuse, to the employer of the employee as described in division (B) of section 2305.33 of the Revised Code. Nothing in this division affects the immunity from civil liability conferred by that section upon a physician who makes either type of report in accordance with division (B) of that section. As used in this division, "employee," "employer," and "physician" have the same meanings as in section 2305.33 of the Revised 850  
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Code. 862

(19) Inability to practice according to acceptable and 863  
prevailing standards of care by reason of mental illness or 864  
physical illness, including, but not limited to, physical 865  
deterioration that adversely affects cognitive, motor, or 866  
perceptive skills. 867

In enforcing this division, the board, upon a showing of a 868  
possible violation, may compel any individual authorized to 869  
practice by this chapter or who has submitted an application 870  
pursuant to this chapter to submit to a mental examination, 871  
physical examination, including an HIV test, or both a mental 872  
and a physical examination. The expense of the examination is 873  
the responsibility of the individual compelled to be examined. 874  
Failure to submit to a mental or physical examination or consent 875  
to an HIV test ordered by the board constitutes an admission of 876  
the allegations against the individual unless the failure is due 877  
to circumstances beyond the individual's control, and a default 878  
and final order may be entered without the taking of testimony 879  
or presentation of evidence. If the board finds an individual 880  
unable to practice because of the reasons set forth in this 881  
division, the board shall require the individual to submit to 882  
care, counseling, or treatment by physicians approved or 883  
designated by the board, as a condition for initial, continued, 884  
reinstated, or renewed authority to practice. An individual 885  
affected under this division shall be afforded an opportunity to 886  
demonstrate to the board the ability to resume practice in 887  
compliance with acceptable and prevailing standards under the 888  
provisions of the individual's license or certificate. For the 889  
purpose of this division, any individual who applies for or 890  
receives a license or certificate to practice under this chapter 891  
accepts the privilege of practicing in this state and, by so 892

doing, shall be deemed to have given consent to submit to a 893  
mental or physical examination when directed to do so in writing 894  
by the board, and to have waived all objections to the 895  
admissibility of testimony or examination reports that 896  
constitute a privileged communication. 897

(20) Except as provided in division (F)(1)(b) of section 898  
4731.282 of the Revised Code or when civil penalties are imposed 899  
under section 4731.225 of the Revised Code, and subject to 900  
section 4731.226 of the Revised Code, violating or attempting to 901  
violate, directly or indirectly, or assisting in or abetting the 902  
violation of, or conspiring to violate, any provisions of this 903  
chapter or any rule promulgated by the board. 904

This division does not apply to a violation or attempted 905  
violation of, assisting in or abetting the violation of, or a 906  
conspiracy to violate, any provision of this chapter or any rule 907  
adopted by the board that would preclude the making of a report 908  
by a physician of an employee's use of a drug of abuse, or of a 909  
condition of an employee other than one involving the use of a 910  
drug of abuse, to the employer of the employee as described in 911  
division (B) of section 2305.33 of the Revised Code. Nothing in 912  
this division affects the immunity from civil liability 913  
conferred by that section upon a physician who makes either type 914  
of report in accordance with division (B) of that section. As 915  
used in this division, "employee," "employer," and "physician" 916  
have the same meanings as in section 2305.33 of the Revised 917  
Code. 918

(21) The violation of section 3701.79 of the Revised Code 919  
or of any abortion rule adopted by the director of health 920  
pursuant to section 3701.341 of the Revised Code; 921

(22) Any of the following actions taken by an agency 922



responsible for authorizing, certifying, or regulating an 923  
individual to practice a health care occupation or provide 924  
health care services in this state or another jurisdiction, for 925  
any reason other than the nonpayment of fees: the limitation, 926  
revocation, or suspension of an individual's license to 927  
practice; acceptance of an individual's license surrender; 928  
denial of a license; refusal to renew or reinstate a license; 929  
imposition of probation; or issuance of an order of censure or 930  
other reprimand; 931

(23) The violation of section 2919.12 of the Revised Code 932  
or the performance or inducement of an abortion upon a pregnant 933  
woman with actual knowledge that the conditions specified in 934  
division (B) of section 2317.56 of the Revised Code have not 935  
been satisfied or with a heedless indifference as to whether 936  
those conditions have been satisfied, unless an affirmative 937  
defense as specified in division (H) (2) of that section would 938  
apply in a civil action authorized by division (H) (1) of that 939  
section; 940

(24) The revocation, suspension, restriction, reduction, 941  
or termination of clinical privileges by the United States 942  
department of defense or department of veterans affairs or the 943  
termination or suspension of a certificate of registration to 944  
prescribe drugs by the drug enforcement administration of the 945  
United States department of justice; 946

(25) Termination or suspension from participation in the 947  
medicare or medicaid programs by the department of health and 948  
human services or other responsible agency for any act or acts 949  
that also would constitute a violation of division (B) (2), (3), 950  
(6), (8), or (19) of this section; 951

(26) Impairment of ability to practice according to 952

acceptable and prevailing standards of care because of habitual 953  
or excessive use or abuse of drugs, alcohol, or other substances 954  
that impair ability to practice. 955

For the purposes of this division, any individual 956  
authorized to practice by this chapter accepts the privilege of 957  
practicing in this state subject to supervision by the board. By 958  
filing an application for or holding a license or certificate to 959  
practice under this chapter, an individual shall be deemed to 960  
have given consent to submit to a mental or physical examination 961  
when ordered to do so by the board in writing, and to have 962  
waived all objections to the admissibility of testimony or 963  
examination reports that constitute privileged communications. 964

If it has reason to believe that any individual authorized 965  
to practice by this chapter or any applicant for licensure or 966  
certification to practice suffers such impairment, the board may 967  
compel the individual to submit to a mental or physical 968  
examination, or both. The expense of the examination is the 969  
responsibility of the individual compelled to be examined. Any 970  
mental or physical examination required under this division 971  
shall be undertaken by a treatment provider or physician who is 972  
qualified to conduct the examination and who is chosen by the 973  
board. 974

Failure to submit to a mental or physical examination 975  
ordered by the board constitutes an admission of the allegations 976  
against the individual unless the failure is due to 977  
circumstances beyond the individual's control, and a default and 978  
final order may be entered without the taking of testimony or 979  
presentation of evidence. If the board determines that the 980  
individual's ability to practice is impaired, the board shall 981  
suspend the individual's license or certificate or deny the 982

individual's application and shall require the individual, as a 983  
condition for initial, continued, reinstated, or renewed 984  
licensure or certification to practice, to submit to treatment. 985

Before being eligible to apply for reinstatement of a 986  
license or certificate suspended under this division, the 987  
impaired practitioner shall demonstrate to the board the ability 988  
to resume practice in compliance with acceptable and prevailing 989  
standards of care under the provisions of the practitioner's 990  
license or certificate. The demonstration shall include, but 991  
shall not be limited to, the following: 992

(a) Certification from a treatment provider approved under 993  
section 4731.25 of the Revised Code that the individual has 994  
successfully completed any required inpatient treatment; 995

(b) Evidence of continuing full compliance with an 996  
aftercare contract or consent agreement; 997

(c) Two written reports indicating that the individual's 998  
ability to practice has been assessed and that the individual 999  
has been found capable of practicing according to acceptable and 1000  
prevailing standards of care. The reports shall be made by 1001  
individuals or providers approved by the board for making the 1002  
assessments and shall describe the basis for their 1003  
determination. 1004

The board may reinstate a license or certificate suspended 1005  
under this division after that demonstration and after the 1006  
individual has entered into a written consent agreement. 1007

When the impaired practitioner resumes practice, the board 1008  
shall require continued monitoring of the individual. The 1009  
monitoring shall include, but not be limited to, compliance with 1010  
the written consent agreement entered into before reinstatement 1011

or with conditions imposed by board order after a hearing, and, 1012  
upon termination of the consent agreement, submission to the 1013  
board for at least two years of annual written progress reports 1014  
made under penalty of perjury stating whether the individual has 1015  
maintained sobriety. 1016

(27) A second or subsequent violation of section 4731.66 1017  
or 4731.69 of the Revised Code; 1018

(28) Except as provided in division (N) of this section: 1019

(a) Waiving the payment of all or any part of a deductible 1020  
or copayment that a patient, pursuant to a health insurance or 1021  
health care policy, contract, or plan that covers the 1022  
individual's services, otherwise would be required to pay if the 1023  
waiver is used as an enticement to a patient or group of 1024  
patients to receive health care services from that individual; 1025

(b) Advertising that the individual will waive the payment 1026  
of all or any part of a deductible or copayment that a patient, 1027  
pursuant to a health insurance or health care policy, contract, 1028  
or plan that covers the individual's services, otherwise would 1029  
be required to pay. 1030

(29) Failure to use universal blood and body fluid 1031  
precautions established by rules adopted under section 4731.051 1032  
of the Revised Code; 1033

(30) Failure to provide notice to, and receive 1034  
acknowledgment of the notice from, a patient when required by 1035  
section 4731.143 of the Revised Code prior to providing 1036  
nonemergency professional services, or failure to maintain that 1037  
notice in the patient's medical record; 1038

(31) Failure of a physician supervising a physician 1039  
assistant to maintain supervision in accordance with the 1040

requirements of Chapter 4730. of the Revised Code and the rules	1041
adopted under that chapter;	1042
(32) Failure of a physician or podiatrist to enter into a	1043
standard care arrangement with a clinical nurse specialist,	1044
certified nurse-midwife, or certified nurse practitioner with	1045
whom the physician or podiatrist is in collaboration pursuant to	1046
section 4731.27 of the Revised Code or failure to fulfill the	1047
responsibilities of collaboration after entering into a standard	1048
care arrangement;	1049
(33) Failure to comply with the terms of a consult	1050
agreement entered into with a pharmacist pursuant to section	1051
4729.39 of the Revised Code;	1052
(34) Failure to cooperate in an investigation conducted by	1053
the board under division (F) of this section, including failure	1054
to comply with a subpoena or order issued by the board or	1055
failure to answer truthfully a question presented by the board	1056
in an investigative interview, an investigative office	1057
conference, at a deposition, or in written interrogatories,	1058
except that failure to cooperate with an investigation shall not	1059
constitute grounds for discipline under this section if a court	1060
of competent jurisdiction has issued an order that either	1061
quashes a subpoena or permits the individual to withhold the	1062
testimony or evidence in issue;	1063
(35) Failure to supervise an oriental medicine	1064
practitioner or acupuncturist in accordance with Chapter 4762.	1065
of the Revised Code and the board's rules for providing that	1066
supervision;	1067
(36) Failure to supervise an anesthesiologist assistant in	1068
accordance with Chapter 4760. of the Revised Code and the	1069

board's rules for supervision of an anesthesiologist assistant;	1070
(37) Assisting suicide, as defined in section 3795.01 of the Revised Code;	1071 1072
(38) Failure to comply with the requirements of section 2317.561 of the Revised Code;	1073 1074
(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;	1075 1076 1077
(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;	1078 1079 1080 1081
(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;	1082 1083 1084 1085
(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;	1086 1087 1088 1089
(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;	1090 1091 1092 1093
(44) Failure to comply with the requirements of section 2919.171, 2919.202, or 2919.203 of the Revised Code or failure to submit to the department of health in accordance with a court order a complete report as described in section 2919.171 or	1094 1095 1096 1097

2919.202 of the Revised Code;	1098
(45) Practicing at a facility that is subject to licensure	1099
as a category III terminal distributor of dangerous drugs with a	1100
pain management clinic classification unless the person	1101
operating the facility has obtained and maintains the license	1102
with the classification;	1103
(46) Owning a facility that is subject to licensure as a	1104
category III terminal distributor of dangerous drugs with a pain	1105
management clinic classification unless the facility is licensed	1106
with the classification;	1107
(47) Failure to comply with <u>any of the <del>requirement-</del></u>	1108
<u>requirements regarding making or maintaining <del>notes</del> medical</u>	1109
<u>records or documents described in division <del>(B)</del> (A) of section</u>	1110
<u><del>2919.191</del> 2919.192, division (C) of section 2919.193, division</u>	1111
<u>(B) of section 2919.195, or division (A) of section 2919.196 of</u>	1112
<u>the Revised Code <del>or failure to satisfy the requirements of</del></u>	1113
<u><del>section 2919.191 of the Revised Code prior to performing or</del></u>	1114
<u><del>inducing an abortion upon a pregnant woman;</del></u>	1115
(48) Failure to comply with the requirements in section	1116
3719.061 of the Revised Code before issuing for a minor a	1117
prescription for an opioid analgesic, as defined in section	1118
3719.01 of the Revised Code;	1119
(49) Failure to comply with the requirements of section	1120
4731.30 of the Revised Code or rules adopted under section	1121
4731.301 of the Revised Code when recommending treatment with	1122
medical marijuana;	1123
(50) Practicing at a facility, clinic, or other location	1124
that is subject to licensure as a category III terminal	1125
distributor of dangerous drugs with an office-based opioid	1126

treatment classification unless the person operating that place 1127  
has obtained and maintains the license with the classification; 1128

(51) Owning a facility, clinic, or other location that is 1129  
subject to licensure as a category III terminal distributor of 1130  
dangerous drugs with an office-based opioid treatment 1131  
classification unless that place is licensed with the 1132  
classification. 1133

(C) Disciplinary actions taken by the board under 1134  
divisions (A) and (B) of this section shall be taken pursuant to 1135  
an adjudication under Chapter 119. of the Revised Code, except 1136  
that in lieu of an adjudication, the board may enter into a 1137  
consent agreement with an individual to resolve an allegation of 1138  
a violation of this chapter or any rule adopted under it. A 1139  
consent agreement, when ratified by an affirmative vote of not 1140  
fewer than six members of the board, shall constitute the 1141  
findings and order of the board with respect to the matter 1142  
addressed in the agreement. If the board refuses to ratify a 1143  
consent agreement, the admissions and findings contained in the 1144  
consent agreement shall be of no force or effect. 1145

A telephone conference call may be utilized for 1146  
ratification of a consent agreement that revokes or suspends an 1147  
individual's license or certificate to practice or certificate 1148  
to recommend. The telephone conference call shall be considered 1149  
a special meeting under division (F) of section 121.22 of the 1150  
Revised Code. 1151

If the board takes disciplinary action against an 1152  
individual under division (B) of this section for a second or 1153  
subsequent plea of guilty to, or judicial finding of guilt of, a 1154  
violation of section 2919.123 of the Revised Code, the 1155  
disciplinary action shall consist of a suspension of the 1156



individual's license or certificate to practice for a period of 1157  
at least one year or, if determined appropriate by the board, a 1158  
more serious sanction involving the individual's license or 1159  
certificate to practice. Any consent agreement entered into 1160  
under this division with an individual that pertains to a second 1161  
or subsequent plea of guilty to, or judicial finding of guilt 1162  
of, a violation of that section shall provide for a suspension 1163  
of the individual's license or certificate to practice for a 1164  
period of at least one year or, if determined appropriate by the 1165  
board, a more serious sanction involving the individual's 1166  
license or certificate to practice. 1167

(D) For purposes of divisions (B) (10), (12), and (14) of 1168  
this section, the commission of the act may be established by a 1169  
finding by the board, pursuant to an adjudication under Chapter 1170  
119. of the Revised Code, that the individual committed the act. 1171  
The board does not have jurisdiction under those divisions if 1172  
the trial court renders a final judgment in the individual's 1173  
favor and that judgment is based upon an adjudication on the 1174  
merits. The board has jurisdiction under those divisions if the 1175  
trial court issues an order of dismissal upon technical or 1176  
procedural grounds. 1177

(E) The sealing of conviction records by any court shall 1178  
have no effect upon a prior board order entered under this 1179  
section or upon the board's jurisdiction to take action under 1180  
this section if, based upon a plea of guilty, a judicial finding 1181  
of guilt, or a judicial finding of eligibility for intervention 1182  
in lieu of conviction, the board issued a notice of opportunity 1183  
for a hearing prior to the court's order to seal the records. 1184  
The board shall not be required to seal, destroy, redact, or 1185  
otherwise modify its records to reflect the court's sealing of 1186  
conviction records. 1187

(F) (1) The board shall investigate evidence that appears 1188  
to show that a person has violated any provision of this chapter 1189  
or any rule adopted under it. Any person may report to the board 1190  
in a signed writing any information that the person may have 1191  
that appears to show a violation of any provision of this 1192  
chapter or any rule adopted under it. In the absence of bad 1193  
faith, any person who reports information of that nature or who 1194  
testifies before the board in any adjudication conducted under 1195  
Chapter 119. of the Revised Code shall not be liable in damages 1196  
in a civil action as a result of the report or testimony. Each 1197  
complaint or allegation of a violation received by the board 1198  
shall be assigned a case number and shall be recorded by the 1199  
board. 1200

(2) Investigations of alleged violations of this chapter 1201  
or any rule adopted under it shall be supervised by the 1202  
supervising member elected by the board in accordance with 1203  
section 4731.02 of the Revised Code and by the secretary as 1204  
provided in section 4731.39 of the Revised Code. The president 1205  
may designate another member of the board to supervise the 1206  
investigation in place of the supervising member. No member of 1207  
the board who supervises the investigation of a case shall 1208  
participate in further adjudication of the case. 1209

(3) In investigating a possible violation of this chapter 1210  
or any rule adopted under this chapter, or in conducting an 1211  
inspection under division (E) of section 4731.054 of the Revised 1212  
Code, the board may question witnesses, conduct interviews, 1213  
administer oaths, order the taking of depositions, inspect and 1214  
copy any books, accounts, papers, records, or documents, issue 1215  
subpoenas, and compel the attendance of witnesses and production 1216  
of books, accounts, papers, records, documents, and testimony, 1217  
except that a subpoena for patient record information shall not 1218

be issued without consultation with the attorney general's 1219  
office and approval of the secretary and supervising member of 1220  
the board. 1221

(a) Before issuance of a subpoena for patient record 1222  
information, the secretary and supervising member shall 1223  
determine whether there is probable cause to believe that the 1224  
complaint filed alleges a violation of this chapter or any rule 1225  
adopted under it and that the records sought are relevant to the 1226  
alleged violation and material to the investigation. The 1227  
subpoena may apply only to records that cover a reasonable 1228  
period of time surrounding the alleged violation. 1229

(b) On failure to comply with any subpoena issued by the 1230  
board and after reasonable notice to the person being 1231  
subpoenaed, the board may move for an order compelling the 1232  
production of persons or records pursuant to the Rules of Civil 1233  
Procedure. 1234

(c) A subpoena issued by the board may be served by a 1235  
sheriff, the sheriff's deputy, or a board employee designated by 1236  
the board. Service of a subpoena issued by the board may be made 1237  
by delivering a copy of the subpoena to the person named 1238  
therein, reading it to the person, or leaving it at the person's 1239  
usual place of residence, usual place of business, or address on 1240  
file with the board. When serving a subpoena to an applicant for 1241  
or the holder of a license or certificate issued under this 1242  
chapter, service of the subpoena may be made by certified mail, 1243  
return receipt requested, and the subpoena shall be deemed 1244  
served on the date delivery is made or the date the person 1245  
refuses to accept delivery. If the person being served refuses 1246  
to accept the subpoena or is not located, service may be made to 1247  
an attorney who notifies the board that the attorney is 1248

representing the person. 1249

(d) A sheriff's deputy who serves a subpoena shall receive 1250  
the same fees as a sheriff. Each witness who appears before the 1251  
board in obedience to a subpoena shall receive the fees and 1252  
mileage provided for under section 119.094 of the Revised Code. 1253

(4) All hearings, investigations, and inspections of the 1254  
board shall be considered civil actions for the purposes of 1255  
section 2305.252 of the Revised Code. 1256

(5) A report required to be submitted to the board under 1257  
this chapter, a complaint, or information received by the board 1258  
pursuant to an investigation or pursuant to an inspection under 1259  
division (E) of section 4731.054 of the Revised Code is 1260  
confidential and not subject to discovery in any civil action. 1261

The board shall conduct all investigations or inspections 1262  
and proceedings in a manner that protects the confidentiality of 1263  
patients and persons who file complaints with the board. The 1264  
board shall not make public the names or any other identifying 1265  
information about patients or complainants unless proper consent 1266  
is given or, in the case of a patient, a waiver of the patient 1267  
privilege exists under division (B) of section 2317.02 of the 1268  
Revised Code, except that consent or a waiver of that nature is 1269  
not required if the board possesses reliable and substantial 1270  
evidence that no bona fide physician-patient relationship 1271  
exists. 1272

The board may share any information it receives pursuant 1273  
to an investigation or inspection, including patient records and 1274  
patient record information, with law enforcement agencies, other 1275  
licensing boards, and other governmental agencies that are 1276  
prosecuting, adjudicating, or investigating alleged violations 1277

of statutes or administrative rules. An agency or board that 1278  
receives the information shall comply with the same requirements 1279  
regarding confidentiality as those with which the state medical 1280  
board must comply, notwithstanding any conflicting provision of 1281  
the Revised Code or procedure of the agency or board that 1282  
applies when it is dealing with other information in its 1283  
possession. In a judicial proceeding, the information may be 1284  
admitted into evidence only in accordance with the Rules of 1285  
Evidence, but the court shall require that appropriate measures 1286  
are taken to ensure that confidentiality is maintained with 1287  
respect to any part of the information that contains names or 1288  
other identifying information about patients or complainants 1289  
whose confidentiality was protected by the state medical board 1290  
when the information was in the board's possession. Measures to 1291  
ensure confidentiality that may be taken by the court include 1292  
sealing its records or deleting specific information from its 1293  
records. 1294

(6) On a quarterly basis, the board shall prepare a report 1295  
that documents the disposition of all cases during the preceding 1296  
three months. The report shall contain the following information 1297  
for each case with which the board has completed its activities: 1298

(a) The case number assigned to the complaint or alleged 1299  
violation; 1300

(b) The type of license or certificate to practice, if 1301  
any, held by the individual against whom the complaint is 1302  
directed; 1303

(c) A description of the allegations contained in the 1304  
complaint; 1305

(d) The disposition of the case. 1306

The report shall state how many cases are still pending 1307  
and shall be prepared in a manner that protects the identity of 1308  
each person involved in each case. The report shall be a public 1309  
record under section 149.43 of the Revised Code. 1310

(G) If the secretary and supervising member determine both 1311  
of the following, they may recommend that the board suspend an 1312  
individual's license or certificate to practice or certificate 1313  
to recommend without a prior hearing: 1314

(1) That there is clear and convincing evidence that an 1315  
individual has violated division (B) of this section; 1316

(2) That the individual's continued practice presents a 1317  
danger of immediate and serious harm to the public. 1318

Written allegations shall be prepared for consideration by 1319  
the board. The board, upon review of those allegations and by an 1320  
affirmative vote of not fewer than six of its members, excluding 1321  
the secretary and supervising member, may suspend a license or 1322  
certificate without a prior hearing. A telephone conference call 1323  
may be utilized for reviewing the allegations and taking the 1324  
vote on the summary suspension. 1325

The board shall issue a written order of suspension by 1326  
certified mail or in person in accordance with section 119.07 of 1327  
the Revised Code. The order shall not be subject to suspension 1328  
by the court during pendency of any appeal filed under section 1329  
119.12 of the Revised Code. If the individual subject to the 1330  
summary suspension requests an adjudicatory hearing by the 1331  
board, the date set for the hearing shall be within fifteen 1332  
days, but not earlier than seven days, after the individual 1333  
requests the hearing, unless otherwise agreed to by both the 1334  
board and the individual. 1335

Any summary suspension imposed under this division shall 1336  
remain in effect, unless reversed on appeal, until a final 1337  
adjudicative order issued by the board pursuant to this section 1338  
and Chapter 119. of the Revised Code becomes effective. The 1339  
board shall issue its final adjudicative order within seventy- 1340  
five days after completion of its hearing. A failure to issue 1341  
the order within seventy-five days shall result in dissolution 1342  
of the summary suspension order but shall not invalidate any 1343  
subsequent, final adjudicative order. 1344

(H) If the board takes action under division (B) (9), (11), 1345  
or (13) of this section and the judicial finding of guilt, 1346  
guilty plea, or judicial finding of eligibility for intervention 1347  
in lieu of conviction is overturned on appeal, upon exhaustion 1348  
of the criminal appeal, a petition for reconsideration of the 1349  
order may be filed with the board along with appropriate court 1350  
documents. Upon receipt of a petition of that nature and 1351  
supporting court documents, the board shall reinstate the 1352  
individual's license or certificate to practice. The board may 1353  
then hold an adjudication under Chapter 119. of the Revised Code 1354  
to determine whether the individual committed the act in 1355  
question. Notice of an opportunity for a hearing shall be given 1356  
in accordance with Chapter 119. of the Revised Code. If the 1357  
board finds, pursuant to an adjudication held under this 1358  
division, that the individual committed the act or if no hearing 1359  
is requested, the board may order any of the sanctions 1360  
identified under division (B) of this section. 1361

(I) The license or certificate to practice issued to an 1362  
individual under this chapter and the individual's practice in 1363  
this state are automatically suspended as of the date of the 1364  
individual's second or subsequent plea of guilty to, or judicial 1365  
finding of guilt of, a violation of section 2919.123 of the 1366

Revised Code. In addition, the license or certificate to 1367  
practice or certificate to recommend issued to an individual 1368  
under this chapter and the individual's practice in this state 1369  
are automatically suspended as of the date the individual pleads 1370  
guilty to, is found by a judge or jury to be guilty of, or is 1371  
subject to a judicial finding of eligibility for intervention in 1372  
lieu of conviction in this state or treatment or intervention in 1373  
lieu of conviction in another jurisdiction for any of the 1374  
following criminal offenses in this state or a substantially 1375  
equivalent criminal offense in another jurisdiction: aggravated 1376  
murder, murder, voluntary manslaughter, felonious assault, 1377  
kidnapping, rape, sexual battery, gross sexual imposition, 1378  
aggravated arson, aggravated robbery, or aggravated burglary. 1379  
Continued practice after suspension shall be considered 1380  
practicing without a license or certificate. 1381

The board shall notify the individual subject to the 1382  
suspension by certified mail or in person in accordance with 1383  
section 119.07 of the Revised Code. If an individual whose 1384  
license or certificate is automatically suspended under this 1385  
division fails to make a timely request for an adjudication 1386  
under Chapter 119. of the Revised Code, the board shall do 1387  
whichever of the following is applicable: 1388

(1) If the automatic suspension under this division is for 1389  
a second or subsequent plea of guilty to, or judicial finding of 1390  
guilt of, a violation of section 2919.123 of the Revised Code, 1391  
the board shall enter an order suspending the individual's 1392  
license or certificate to practice for a period of at least one 1393  
year or, if determined appropriate by the board, imposing a more 1394  
serious sanction involving the individual's license or 1395  
certificate to practice. 1396



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

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

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

(L) When the board refuses to grant or issue a license or certificate to practice to an applicant, revokes an individual's license or certificate to practice, refuses to renew an individual's license or certificate to practice, or refuses to reinstate an individual's license or certificate to practice, the board may specify that its action is permanent. An individual subject to a permanent action taken by the board is forever thereafter ineligible to hold a license or certificate to practice and the board shall not accept an application for

reinstatement of the license or certificate or for issuance of a new license or certificate. 1427  
1428

(M) Notwithstanding any other provision of the Revised Code, all of the following apply: 1429  
1430

(1) The surrender of a license or certificate issued under this chapter shall not be effective unless or until accepted by the board. A telephone conference call may be utilized for acceptance of the surrender of an individual's license or certificate to practice. The telephone conference call shall be considered a special meeting under division (F) of section 121.22 of the Revised Code. Reinstatement of a license or certificate surrendered to the board requires an affirmative vote of not fewer than six members of the board. 1431  
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(2) An application for a license or certificate made under the provisions of this chapter may not be withdrawn without approval of the board. 1440  
1441  
1442

(3) Failure by an individual to renew a license or certificate to practice in accordance with this chapter or a certificate to recommend in accordance with rules adopted under section 4731.301 of the Revised Code shall not remove or limit the board's jurisdiction to take any disciplinary action under this section against the individual. 1443  
1444  
1445  
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(4) At the request of the board, a license or certificate holder shall immediately surrender to the board a license or certificate that the board has suspended, revoked, or permanently revoked. 1449  
1450  
1451  
1452

(N) Sanctions shall not be imposed under division (B) (28) of this section against any person who waives deductibles and copayments as follows: 1453  
1454  
1455

(1) In compliance with the health benefit plan that 1456  
expressly allows such a practice. Waiver of the deductibles or 1457  
copayments shall be made only with the full knowledge and 1458  
consent of the plan purchaser, payer, and third-party 1459  
administrator. Documentation of the consent shall be made 1460  
available to the board upon request. 1461

(2) For professional services rendered to any other person 1462  
authorized to practice pursuant to this chapter, to the extent 1463  
allowed by this chapter and rules adopted by the board. 1464

(0) Under the board's investigative duties described in 1465  
this section and subject to division (F) of this section, the 1466  
board shall develop and implement a quality intervention program 1467  
designed to improve through remedial education the clinical and 1468  
communication skills of individuals authorized under this 1469  
chapter to practice medicine and surgery, osteopathic medicine 1470  
and surgery, and podiatric medicine and surgery. In developing 1471  
and implementing the quality intervention program, the board may 1472  
do all of the following: 1473

(1) Offer in appropriate cases as determined by the board 1474  
an educational and assessment program pursuant to an 1475  
investigation the board conducts under this section; 1476

(2) Select providers of educational and assessment 1477  
services, including a quality intervention program panel of case 1478  
reviewers; 1479

(3) Make referrals to educational and assessment service 1480  
providers and approve individual educational programs 1481  
recommended by those providers. The board shall monitor the 1482  
progress of each individual undertaking a recommended individual 1483  
educational program. 1484

(4) Determine what constitutes successful completion of an 1485  
individual educational program and require further monitoring of 1486  
the individual who completed the program or other action that 1487  
the board determines to be appropriate; 1488

(5) Adopt rules in accordance with Chapter 119. of the 1489  
Revised Code to further implement the quality intervention 1490  
program. 1491

An individual who participates in an individual 1492  
educational program pursuant to this division shall pay the 1493  
financial obligations arising from that educational program. 1494

**Section 2.** That existing sections 2317.56, 2919.171, 1495  
2919.19, 2919.191, 2919.192, 2919.193, and 4731.22 of the 1496  
Revised Code are hereby repealed. 1497

**Section 3.** If any provisions of a section as amended or 1498  
enacted by this act, or the application thereof to any person or 1499  
circumstance is held invalid, the invalidity does not affect 1500  
other provisions or applications of the section or related 1501  
sections which can be given effect without the invalid provision 1502  
or application, and to this end the provisions are severable. 1503