

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

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Sub. H. B. No. 284

Representatives Gonzales, Letson

**Cosponsors: Representatives Stebelton, Wachtmann, Boyd, Slesnick,
Gerberry, O'Brien, Murray, Reece, Mallory, Amstutz, Antonio, Boose, Carney,
Celeste, Duffey, Fedor, Foley, Gardner, Garland, Hottinger, McClain,
Milkovich, Newbold, Pelanda, Phillips, Pillich, Ramos, Schuring, Sears,
Sprague, Terhar, Young, Yuko Speaker Batchelder**

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A B I L L

To amend sections 2133.211, 3719.06, 4730.06, 1
4730.09, 4730.10, 4730.11, 4730.38, 4730.39, 2
4730.40, 4730.41, 4730.42, 4730.44, 4730.46, 3
4755.48, 4755.481, 4765.01, 4765.35, 4765.36, 4
4765.37, 4765.38, 4765.39, 4765.49, and 4765.51, 5
to enact sections 4723.36, 4730.04, 4730.092, and 6
4730.411, and to repeal section 4730.401 of the 7
Revised Code to modify the laws governing 8
physician assistants and to authorize certain 9
nurses to determine and pronounce death under 10
specified circumstances. 11

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

Section 1. That sections 2133.211, 3719.06, 4730.06, 4730.09, 12
4730.10, 4730.11, 4730.38, 4730.39, 4730.40, 4730.41, 4730.42, 13
4730.44, 4730.46, 4755.48, 4755.481, 4765.01, 4765.35, 4765.36, 14
4765.37, 4765.38, 4765.39, 4765.49, and 4765.51 be amended and 15

sections 4723.36, 4730.04, 4730.092, and 4730.411 of the Revised Code be enacted to read as follows:

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

A person who holds a certificate to practice as a physician assistant issued under Chapter 4730. of the Revised Code may take any action that may be taken by an attending physician under sections 2133.21 to 2133.26 of the Revised Code and has the immunity provided by section 2133.22 of the Revised Code if the action is taken pursuant to a physician supervisory plan approved pursuant to section 4730.17 of the Revised Code or the policies of a health care facility in which the physician assistant is practicing.

Sec. 3719.06. (A)(1) A licensed health professional authorized to prescribe drugs, if acting in the course of professional practice, in accordance with the laws regulating the professional's practice, and in accordance with rules adopted by the state board of pharmacy, may, except as provided in division (A)(2) or (3) of this section, do the following:

(a) Prescribe schedule II, III, IV, and V controlled substances;

(b) Administer or personally furnish to patients schedule II, III, IV, and V controlled substances;

(c) Cause schedule II, III, IV, and V controlled substances to be administered under the prescriber's direction and supervision.

(2) A licensed health professional authorized to prescribe drugs who is a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner is subject to both of the following:

(a) A schedule II controlled substance may be prescribed only in accordance with division (C) of section 4723.481 of the Revised Code.

(b) No schedule II controlled substance shall be personally furnished to any patient.

(3) A licensed health professional authorized to prescribe drugs who is a physician assistant ~~shall not prescribe or personally furnish to patients any~~ is subject to all of the following:

(a) A controlled substance that is not may be prescribed or personally furnished only if it is included in the physician-delegated prescriptive authority granted to the physician assistant in accordance with Chapter 4730. of the Revised Code.

(b) A schedule II controlled substance may be prescribed only in accordance with division (B)(4) of section 4730.41 and section 4730.411 of the Revised Code.

(c) No schedule II controlled substance shall be personally furnished to any patient.

(B) No licensed health professional authorized to prescribe drugs shall prescribe, administer, or personally furnish a schedule III anabolic steroid for the purpose of human muscle building or enhancing human athletic performance and no pharmacist

shall dispense a schedule III anabolic steroid for either purpose, 75
unless it has been approved for that purpose under the "Federal 76
Food, Drug, and Cosmetic Act," 52 Stat. 1040 (1938), 21 U.S.C.A. 77
301, as amended. 78

(C) Each written prescription shall be properly executed, 79
dated, and signed by the prescriber on the day when issued and 80
shall bear the full name and address of the person for whom, or 81
the owner of the animal for which, the controlled substance is 82
prescribed and the full name, address, and registry number under 83
the federal drug abuse control laws of the prescriber. If the 84
prescription is for an animal, it shall state the species of the 85
animal for which the controlled substance is prescribed. 86

Sec. 4723.36. (A) A certified nurse practitioner or clinical 87
nurse specialist may determine and pronounce an individual's 88
death, but only if the individual's respiratory and circulatory 89
functions are not being artificially sustained and, at the time 90
the determination and pronouncement of death is made, either or 91
both of the following apply: 92

(1) The individual was receiving care in one of the 93
following: 94

(a) A nursing home licensed under section 3721.02 of the 95
Revised Code or by a political subdivision under section 3721.09 96
of the Revised Code; 97

(b) A residential care facility or home for the aging 98
licensed under Chapter 3721. of the Revised Code; 99

(c) A county home or district home operated pursuant to 100
Chapter 5155. of the Revised Code; 101

(d) A residential facility licensed under section 5123.19 of 102
the Revised Code. 103

(2) The certified nurse practitioner or clinical nurse 104

specialist is providing or supervising the individual's care 105
through a hospice care program licensed under Chapter 3712. of the 106
Revised Code or any other entity that provides palliative care. 107

(B) A registered nurse may determine and pronounce an 108
individual's death, but only if the individual's respiratory and 109
circulatory functions are not being artificially sustained and, at 110
the time the determination and pronouncement of death is made, the 111
registered nurse is providing or supervising the individual's care 112
through a hospice care program licensed under Chapter 3712. of the 113
Revised Code or any other entity that provides palliative care. 114

(C) If a certified nurse practitioner, clinical nurse 115
specialist, or registered nurse determines and pronounces an 116
individual's death, the nurse shall comply with both of the 117
following: 118

(1) The nurse shall not complete any portion of the 119
individual's death certificate. 120

(2) The nurse shall notify the individual's attending 121
physician of the determination and pronouncement of death in order 122
for the physician to fulfill the physician's duties under section 123
3705.16 of the Revised Code. The nurse shall provide the 124
notification within a period of time that is reasonable but not 125
later than twenty-four hours following the determination and 126
pronouncement of the individual's death. 127

Sec. 4730.04. (A) As used in this section: 128

(1) "Disaster" means any imminent threat or actual occurrence 129
of widespread or severe damage to or loss of property, personal 130
hardship or injury, or loss of life that results from any natural 131
phenomenon or act of a human. 132

(2) "Emergency" means an occurrence or event that poses an 133
imminent threat to the health or life of a human. 134

(B) Nothing in this chapter prohibits any of the following individuals from providing medical care, to the extent the individual is able, in response to a need for medical care precipitated by a disaster or emergency: 135
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(1) An individual who holds a certificate to practice as a physician assistant issued under this chapter; 139
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(2) An individual licensed or authorized to practice as a physician assistant in another state; 141
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(3) An individual credentialed or employed as a physician assistant by an agency, office, or other instrumentality of the federal government. 143
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(C) For purposes of the medical care provided by a physician assistant pursuant to division (B)(1) of this section, both of the following apply notwithstanding any supervision requirement of this chapter to the contrary: 146
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(1) The physician who supervises the physician assistant pursuant to a physician supervisory plan approved by the state medical board under section 4730.17 of the Revised Code is not required to meet the supervision requirements established under this chapter. 150
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(2) The physician designated as the medical director of the disaster or emergency may supervise the medical care provided by the physician assistant. 155
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Sec. 4730.06. (A) The physician assistant policy committee of the state medical board shall review, and shall submit to the board recommendations concerning, all of the following: 158
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(1) Requirements for issuance of certificates to practice as a physician assistant, including the educational requirements that must be met to receive a certificate to practice; 161
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(2) Existing and proposed rules pertaining to the practice of 164

physician assistants, the supervisory relationship between 165
physician assistants and supervising physicians, and the 166
administration and enforcement of this chapter; 167

(3) ~~Physician-delegated~~ In accordance with section 4730.38 of 168
the Revised Code, physician-delegated prescriptive authority for 169
physician assistants, in accordance with and proposed changes to 170
the physician assistant formulary the board adopts pursuant to 171
division (A)(1) of section 4730.38 4730.39 of the Revised Code; 172

(4) Application procedures and forms for certificates to 173
practice as a physician assistant, physician supervisory plans, 174
and supervision agreements; 175

(5) Fees required by this chapter for issuance and renewal of 176
certificates to practice as a physician assistant; 177

(6) Criteria to be included in applications submitted to the 178
board for approval of physician supervisory plans, including 179
criteria to be included in applications for approval to delegate 180
to physician assistants the performance of special services; 181

(7) Criteria to be included in supervision agreements 182
submitted to the board for approval and renewal of the board's 183
approval; 184

(8) Any issue the board asks the committee to consider. 185

(B) In addition to the matters that are required to be 186
reviewed under division (A) of this section, the committee may 187
review, and may submit to the board recommendations concerning, 188
either or both of the following: 189

(1) Quality assurance activities to be performed by a 190
supervising physician and physician assistant under a quality 191
assurance system established pursuant to division (F) of section 192
4730.21 of the Revised Code; 193

(2) The development and approval of one or more model 194

physician supervisory plans and one or more models for a special 195
services portion of the one or more model physician supervisory 196
plans. The committee may submit recommendations for model plans 197
that reflect various medical specialties. 198

(C) The board shall take into consideration all 199
recommendations submitted by the committee. Not later than ninety 200
days after receiving a recommendation from the committee, the 201
board shall approve or disapprove the recommendation and notify 202
the committee of its decision. If a recommendation is disapproved, 203
the board shall inform the committee of its reasons for making 204
that decision. The committee may resubmit the recommendation after 205
addressing the concerns expressed by the board and modifying the 206
disapproved recommendation accordingly. Not later than ninety days 207
after receiving a resubmitted recommendation, the board shall 208
approve or disapprove the recommendation. There is no limit on the 209
number of times the committee may resubmit a recommendation for 210
consideration by the board. 211

(D)(1) Except as provided in division (D)(2) of this section, 212
the board may not take action regarding a matter that is subject 213
to the committee's review under division (A) or (B) of this 214
section unless the committee has made a recommendation to the 215
board concerning the matter. 216

(2) If the board submits to the committee a request for a 217
recommendation regarding a matter that is subject to the 218
committee's review under division (A) or (B) of this section, and 219
the committee does not provide a recommendation before the 220
sixty-first day after the request is submitted, the board may take 221
action regarding the matter without a recommendation. 222

Sec. 4730.09. (A) Under a physician supervisory plan approved 223
under section 4730.17 of the Revised Code, a physician assistant 224
may provide any or all of the following services without approval 225

by the state medical board as special services:	226
(1) Obtaining comprehensive patient histories;	227
(2) Performing physical examinations, including audiometry screening, routine visual screening, and pelvic, rectal, and genital-urinary examinations, when indicated;	228 229 230
(3) Ordering, performing, or ordering and performing routine diagnostic procedures, as indicated;	231 232
(4) Identifying normal and abnormal findings on histories, physical examinations, and commonly performed diagnostic studies;	233 234
(5) Assessing patients and developing and implementing treatment plans for patients;	235 236
(6) Monitoring the effectiveness of therapeutic interventions;	237 238
(7) Exercising physician-delegated prescriptive authority pursuant to a certificate to prescribe issued under this chapter;	239 240
(8) Carrying out or relaying the supervising physician's orders for the administration of medication, to the extent permitted by law;	241 242 243
(9) Providing patient education;	244
(10) Instituting and changing orders on patient charts;	245
(11) Performing developmental screening examinations on children with regard to neurological, motor, and mental functions;	246 247
(12) Performing wound care management, suturing minor lacerations and removing the sutures, and incision and drainage of uncomplicated superficial abscesses;	248 249 250
(13) Removing superficial foreign bodies;	251
(14) Administering intravenous fluids;	252
(15) Inserting a foley or cudae catheter into the urinary	253

bladder and removing the catheter;	254
(16) Removing intrauterine devices;	255
(17) Performing biopsies of superficial lesions;	256
(18) <u>(17)</u> Making appropriate referrals as directed by the supervising physician;	257 258
(19) Removing nonplant capsules;	259
(20) <u>(18)</u> Performing penile duplex ultrasound;	260
(21) <u>(19)</u> Changing of a tracheostomy;	261
(22) <u>(20)</u> Performing bone marrow aspirations from the posterior iliac crest;	262 263
(23) <u>(21)</u> Performing bone marrow biopsies from the posterior iliac crest;	264 265
(24) <u>(22)</u> Performing cystograms;	266
(25) <u>(23)</u> Performing nephrostograms after physician placement of nephrostomy tubes;	267 268
(26) <u>(24)</u> Fitting or, inserting family planning, or removing <u>birth control</u> devices, including intrauterine devices, diaphragms, and cervical caps;	269 270 271
(27) <u>(25)</u> Removing cervical polyps;	272
(28) <u>(26)</u> Performing nerve conduction testing;	273
(29) <u>(27)</u> Performing endometrial biopsies;	274
(30) <u>(28)</u> Inserting filiform and follower catheters;	275
(31) <u>(29)</u> Performing arthrocentesis of the knee;	276
(32) <u>(30)</u> Performing knee joint injections;	277
(33) <u>(31)</u> Performing endotracheal intubation with successful completion of an advanced cardiac life support course;	278 279
(34) <u>(32)</u> Performing lumbar punctures;	280

(35) (33) In accordance with rules adopted by the board, using	281
light-based medical devices for the purpose of hair removal;	282
(36) (34) Administering, monitoring, or maintaining local	283
anesthesia, as defined in section 4730.091 of the Revised Code;	284
(37) (35) Applying or removing a cast or splint;	285
(38) (36) <u>Inserting or removing chest tubes;</u>	286
<u>(37) Prescribing physical therapy or referring a patient to a</u>	287
<u>physical therapist for the purpose of receiving physical therapy;</u>	288
<u>(38) Ordering occupational therapy or referring a patient to</u>	289
<u>an occupational therapist for the purpose of receiving</u>	290
<u>occupational therapy;</u>	291
<u>(39) Taking any action that may be taken by an attending</u>	292
<u>physician under sections 2133.21 to 2133.26 of the Revised Code,</u>	293
<u>as specified in section 2133.211 of the Revised Code;</u>	294
<u>(40) Determining and pronouncing death in accordance with</u>	295
<u>section 4730.092 of the Revised Code;</u>	296
<u>(41) Performing other services that are within the</u>	297
supervising physician's normal course of practice and expertise,	298
if the services are included in any model physician supervisory	299
plan approved under section 4730.06 of the Revised Code or the	300
services are designated by the board by rule or other means as	301
services that are not subject to approval as special services.	302
(B) Under the policies of a health care facility, the	303
services a physician assistant may provide are limited to the	304
services the facility has authorized the physician assistant to	305
provide for the facility. The services a health care facility may	306
authorize a physician assistant to provide for the facility	307
include the following:	308
(1) Any or all of the services specified in division (A) of	309
this section;	310

(2) Assisting in surgery in the health care facility;	311
(3) Any other services permitted by the policies of the health care facility, except that the facility may not authorize a physician assistant to perform a service that is prohibited by this chapter.	312 313 314 315
<u>Sec. 4730.092. (A) A physician assistant may determine and pronounce an individual's death, but only if the individual's respiratory and circulatory functions are not being artificially sustained and, at the time the determination and pronouncement of death is made, either or both of the following apply:</u>	316 317 318 319 320
<u>(1) The individual was receiving care in one of the following:</u>	321 322
<u>(a) A nursing home licensed under section 3721.02 of the Revised Code or by a political subdivision under section 3721.09 of the Revised Code;</u>	323 324 325
<u>(b) A residential care facility or home for the aging licensed under Chapter 3721. of the Revised Code;</u>	326 327
<u>(c) A county home or district home operated pursuant to Chapter 5155. of the Revised Code;</u>	328 329
<u>(d) A residential facility licensed under section 5123.19 of the Revised Code.</u>	330 331
<u>(2) The physician assistant is providing or supervising the individual's care through a hospice care program licensed under Chapter 3712. of the Revised Code or any other entity that provides palliative care.</u>	332 333 334 335
<u>(B) If a physician assistant determines and pronounces an individual's death, the physician assistant shall comply with both of the following:</u>	336 337 338
<u>(1) The physician assistant shall not complete any portion of</u>	339

the individual's death certificate. 340

(2) The physician assistant shall notify the individual's 341
attending physician of the determination and pronouncement of 342
death in order for the physician to fulfill the physician's duties 343
under section 3705.16 of the Revised Code. The physician assistant 344
shall provide the notification within a period of time that is 345
reasonable but not later than twenty-four hours following the 346
determination and pronouncement of the individual's death. 347

Sec. 4730.10. (A) An individual seeking a certificate to 348
practice as a physician assistant shall file with the state 349
medical board a written application on a form prescribed and 350
supplied by the board. The application shall include all of the 351
following: 352

(1) The applicant's name, residential address, business 353
address, if any, and social security number; 354

(2) Satisfactory proof that the applicant meets the age and 355
moral character requirements specified in divisions (A)(1) and (2) 356
of section 4730.11 of the Revised Code; 357

(3) ~~Effective January 1, 2008, except as provided in division~~ 358
~~(B) of section 4730.11 of the Revised Code, satisfactory~~ 359
Satisfactory proof that the applicant meets ~~one of~~ either the 360
educational requirements specified in division ~~(A)(4)~~ (B)(1) or 361
(2) of section 4730.11 of the Revised Code or the educational or 362
other applicable requirements specified in division (C)(1), (2), 363
or (3) of that section; 364

(4) Any other information the board requires. 365

(B) At the time of making application for a certificate to 366
practice, the applicant shall pay the board a fee of two hundred 367
dollars, no part of which shall be returned. ~~Such~~ The fees shall 368
be deposited in accordance with section 4731.24 of the Revised 369

Code. 370

Sec. 4730.11. (A) ~~For an individual to~~ To be eligible to 371
receive a certificate to practice as a physician assistant, all of 372
the following apply to an applicant: 373

(1) The applicant shall be at least eighteen years of age. 374

(2) The applicant shall be of good moral character. 375

(3) The applicant shall hold current certification by the 376
national commission on certification of physician assistants or a 377
successor organization that is recognized by the state medical 378
board. 379

(4) The applicant shall meet either of the following 380
requirements: 381

(a) The educational requirements specified in division (B)(1) 382
or (2) of this section; 383

(b) The educational or other applicable requirements 384
specified in division (C)(1), (2), or (3) of this section. 385

(B) Effective January 1, 2008, except as provided in for 386
purposes of division ~~(B)(A)(4)(a)~~ of this section, the an 387
applicant shall meet ~~one~~ either of the following educational 388
requirements: 389

~~(a)(1)~~ (1) The applicant shall hold a master's or higher degree 390
~~that was~~ obtained from a program accredited by the accreditation 391
review commission on education for the physician assistant or a 392
predecessor or successor organization recognized by the board. 393

~~(b)(2)~~ (2) The applicant shall hold a both of the following 394
degrees: 395

(a) A degree other than a master's or higher degree ~~that was~~ 396
obtained from a program accredited by the accreditation review 397
commission on education for the physician assistant or a 398

predecessor or successor organization recognized by the board and 399
~~shall hold a;~~ 400

(b) A master's or higher degree in a course of study with 401
clinical relevance to the practice of physician assistants that 402
was and obtained from a program accredited by a regional or 403
specialized and professional accrediting agency recognized by the 404
council for higher education accreditation. 405

~~(B) It is not necessary for an applicant to hold a master's 406
or higher degree as a condition of receiving a certificate to 407
practice as a physician assistant if the applicant presents (C) 408
For purposes of division (A)(4)(b) of this section, an applicant 409
shall present evidence satisfactory to the board of holding either 410
meeting one of the following requirements in lieu of meeting the 411
educational requirements specified in division (B)(1) or (2) of 412
this section: 413~~

~~(1) A The applicant shall hold a current, valid license or 414
other form of authority to practice as a physician assistant that 415
was issued by another jurisdiction prior to January 1, 2008. 416~~

~~(2) A degree, other than a master's or higher degree, that is 417
The applicant shall hold a degree obtained as a result of being 418
enrolled on January 1, 2008, in a program in this state that was 419
accredited by the accreditation review commission on education for 420
the physician assistant but did not grant a master's or higher 421
degree to individuals enrolled in the program on that date, and 422
completing the program on or before December 31, 2009. 423~~

~~(C)(3) The applicant shall meet both of the following 424
educational and military experience requirements: 425~~

~~(a) Hold a degree obtained from a program accredited by the 426
accreditation review commission on education for the physician 427
assistant; 428~~

~~(b) Have experience practicing as a physician assistant for 429~~

at least three consecutive years while on active duty, with 430
evidence of service under honorable conditions, in any of the 431
armed forces of the United States or the national guard of any 432
state, including any experience attained while practicing as a 433
physician assistant at a health care facility or clinic operated 434
by the United States department of veterans affairs. 435

(D) This section does not require an individual to obtain a 436
master's or higher degree as a condition of retaining or renewing 437
a certificate to practice as a physician assistant if ~~any~~ the 438
individual received the certificate without holding a master's or 439
higher degree as provided in either of the following ~~apply~~: 440

(1) ~~Prior to~~ Before the educational requirements specified in 441
division (B)(1) or (2) of this section became effective January 1, 442
2008, the individual received a certificate to practice as a 443
physician assistant under this chapter without holding a master's 444
or higher degree.; 445

(2) ~~On or after January 1, 2008, the individual received a~~ 446
certificate to practice as a physician assistant under this 447
chapter on the basis of holding a license issued in another 448
jurisdiction, as specified in division (B)(1) of this section. 449

(3) ~~On or after January 1, 2008, the individual received a~~ 450
certificate to practice as a physician assistant under this 451
chapter on the basis of obtaining a degree as specified in 452
division (B)(2) By meeting the educational or other applicable 453
requirements specified in division (C)(1), (2), or (3) of this 454
section. 455

Sec. 4730.38. (A) ~~Not later than six months after the~~ 456
effective date Except as provided in division (B) of this section, 457
the physician assistant policy committee of the state medical 458
board shall, at such times the committee determines to be 459
necessary, submit to the board ~~its initial~~ recommendations 460

regarding physician-delegated prescriptive authority for physician 461
assistants. The committee's recommendations shall address ~~all~~ both 462
of the following: 463

(1) Policy and procedures regarding physician-delegated 464
prescriptive authority, including the issuance of certificates to 465
prescribe under this chapter; 466

~~(2) Subject to the limitations specified in section 4730.40 467
of the Revised Code, a formulary listing the drugs and therapeutic 468
devices by class and specific nomenclature that a supervising 469
physician may include in the physician-delegated prescriptive 470
authority granted to a physician assistant who holds a certificate 471
to prescribe issued under this chapter; 472~~

~~(3) Any issue the committee considers necessary to assist the 473
board in fulfilling its duty to adopt rules governing 474
physician-delegated prescriptive authority, including the issuance 475
of certificates to prescribe. 476~~

~~(B) After the board's adoption of initial rules under section 477
4730.39 of the Revised Code, the committee shall conduct an annual 478
review of its recommendations regarding physician-delegated 479
prescriptive authority. Based on its review, the committee shall 480
submit recommendations to the board as the committee considers 481
necessary Not less than every six months beginning on the first 482
day of June following the effective date of this amendment, the 483
committee shall review the physician assistant formulary the board 484
adopts pursuant to division (A)(1) of section 4730.39 of the 485
Revised Code and, to the extent it determines to be necessary, 486
submit recommendations proposing changes to the formulary. 487~~

(C) Recommendations submitted under this section are subject 488
to the procedures and time frames specified in division (C) of 489
section 4730.06 of the Revised Code. 490

~~Sec. 4730.39. (A) Not later than six months after receiving~~ 491
~~the initial recommendations of the physician assistant policy~~ 492
~~committee submitted pursuant to division (A) of section 4730.38 of~~ 493
~~the Revised Code, the~~ The state medical board shall adopt do both 494
of the following: 495

(1) Adopt a formulary listing the drugs and therapeutic 496
devices by class and specific generic nomenclature that a 497
physician may include in the physician-delegated prescriptive 498
authority granted to a physician assistant who holds a certificate 499
to prescribe under this chapter; 500

(2) Adopt rules governing physician-delegated prescriptive 501
authority for physician assistants, including the issuance of 502
certificates to prescribe under this chapter. ~~The~~ 503

(B) The board's rules governing physician-delegated 504
prescriptive authority adopted pursuant to division (A)(2) of this 505
section shall be adopted in accordance with Chapter 119. of the 506
Revised Code and shall establish all of the following: 507

~~(1) Subject to the limitations specified in section 4730.40~~ 508
~~of the Revised Code, a formulary listing the drugs and therapeutic~~ 509
~~devices by class and specific generic nomenclature that a~~ 510
~~physician may include in the physician-delegated prescriptive~~ 511
~~authority granted to a physician assistant who holds a certificate~~ 512
~~to prescribe under this chapter;~~ 513

~~(2)~~ Requirements regarding the pharmacology courses that a 514
physician assistant is required to complete to receive a 515
certificate to prescribe; 516

~~(3)~~(2) Standards and procedures for the issuance and renewal 517
of certificates to prescribe to physician assistants; 518

~~(4)~~(3) Standards and procedures for the appropriate conduct 519
of the provisional period that a physician assistant is required 520

to complete pursuant to section 4730.45 of the Revised Code and 521
for determining whether a physician assistant has successfully 522
completed the provisional period; 523

~~(5)~~(4) A specific prohibition against prescribing any drug or 524
device to perform or induce an abortion; 525

~~(6)~~(5) Standards and procedures to be followed by a physician 526
assistant in personally furnishing samples of drugs or complete or 527
partial supplies of drugs to patients under section 4730.43 of the 528
Revised Code; 529

~~(7)~~(6) Any other requirements the board considers necessary 530
to implement the provisions of this chapter regarding 531
physician-delegated prescriptive authority and the issuance of 532
certificates to prescribe. 533

~~(B)~~(C)(1) After ~~adopting the initial rules~~ considering 534
recommendations submitted by the physician assistant policy 535
committee pursuant to sections 4730.06 and 4730.38 of the Revised 536
Code, the board shall ~~conduct an annual~~ review either or both of 537
the ~~rules~~. Based following, as appropriate according to the 538
submitted recommendations: 539

(a) The formulary the board adopts under division (A)(1) of 540
this section; 541

(b) The rules the board adopts under division (A)(2) of this 542
section regarding physician-delegated prescriptive authority. 543

(2) Based on its review, the board shall make any necessary 544
modifications to the formulary or rules. 545

~~(C) All rules adopted under this section shall be adopted in~~ 546
~~accordance with Chapter 119. of the Revised Code. When adopting~~ 547
~~the initial rules, the board shall consider the recommendations of~~ 548
~~the physician assistant policy committee submitted pursuant to~~ 549
~~division (A) of section 4730.38 of the Revised Code. When making~~ 550

~~any modifications to the rules subsequent to its annual review of~~ 551
~~the rules, the board shall consider the committee's~~ 552
~~recommendations submitted pursuant to division (B) of section~~ 553
~~4730.38 of the Revised Code.~~ 554

Sec. 4730.40. (A) Subject to ~~divisions~~ division (B) and ~~(C)~~ 555
of this section, the physician assistant formulary established 556
adopted by the state medical board ~~in rules adopted~~ under section 557
4730.39 of the Revised Code ~~listing the drugs and therapeutic~~ 558
~~devices by class and specific nomenclature that a supervising~~ 559
~~physician may include in the physician-delegated prescriptive~~ 560
~~authority granted to a physician assistant who holds a certificate~~ 561
~~to prescribe issued under this chapter may include any or all of~~ 562
the following drugs: 563

(1) Schedule II, III, IV, and V controlled substances; 564

(2) Drugs that under state or federal law may be dispensed 565
only pursuant to a prescription by a licensed health professional 566
authorized to prescribe drugs, as defined in section 4729.01 of 567
the Revised Code; 568

(3) Any drug that is not a dangerous drug, as defined in 569
section 4729.01 of the Revised Code. 570

(B) The formulary ~~established in the board's rules~~ adopted by 571
the board shall not include, and shall specify that it does not 572
include, ~~the following:~~ 573

~~(1) Any schedule II controlled substance;~~ 574

~~(2) Any any drug or device used to perform or induce an~~ 575
abortion. 576

~~(C) When adopting rules establishing the initial formulary,~~ 577
~~the board shall include provisions ensuring that a physician~~ 578
~~assistant who holds a certificate to prescribe issued under this~~ 579
~~chapter may be granted physician-delegated prescriptive authority~~ 580

~~for all drugs and therapeutic devices that may be prescribed on 581
the effective date of the rules by a holder of a certificate to 582
prescribe issued by the board of nursing under Chapter 4723. of 583
the Revised Code, with the exception of schedule II controlled 584
substances. To the extent permitted by division (A) of this 585
section, the initial formulary may include additional drugs or 586
therapeutic devices. 587~~

Sec. 4730.41. (A) A certificate to prescribe issued under 588
this chapter authorizes a physician assistant to prescribe and 589
personally furnish drugs and therapeutic devices in the exercise 590
of physician-delegated prescriptive authority. 591

(B) In exercising physician-delegated prescriptive authority, 592
a physician assistant is subject to all of the following: 593

(1) The physician assistant shall exercise 594
physician-delegated prescriptive authority only to the extent that 595
the physician supervising the physician assistant has granted that 596
authority. 597

(2) The physician assistant shall comply with all conditions 598
placed on the physician-delegated prescriptive authority, as 599
specified by the supervising physician who is supervising the 600
physician assistant in the exercise of physician-delegated 601
prescriptive authority. 602

(3) If the physician assistant possesses physician-delegated 603
prescriptive authority for controlled substances, the physician 604
assistant shall register with the federal drug enforcement 605
administration. 606

(4) If the physician assistant possesses physician-delegated 607
prescriptive authority for schedule II controlled substances, the 608
physician assistant shall comply with section 4730.411 of the 609
Revised Code. 610

Sec. 4730.411. (A) Except as provided in division (B) or (C) 611
of this section, a physician assistant may prescribe to a patient 612
a schedule II controlled substance only if all of the following 613
are the case: 614

(1) The patient is in a terminal condition, as defined in 615
section 2133.01 of the Revised Code. 616

(2) The physician assistant's supervising physician initially 617
prescribed the substance for the patient. 618

(3) The prescription is for an amount that does not exceed 619
the amount necessary for the patient's use in a single, 620
twenty-four-hour period. 621

(B) The restrictions on prescriptive authority in division 622
(A) of this section do not apply if a physician assistant issues 623
the prescription to the patient from any of the following 624
locations: 625

(1) A hospital registered under section 3701.07 of the 626
Revised Code; 627

(2) An entity owned or controlled, in whole or in part, by a 628
hospital or by an entity that owns or controls, in whole or in 629
part, one or more hospitals; 630

(3) A health care facility operated by the department of 631
mental health or the department of developmental disabilities; 632

(4) A nursing home licensed under section 3721.02 of the 633
Revised Code or by a political subdivision certified under section 634
3721.09 of the Revised Code; 635

(5) A county home or district home operated under Chapter 636
5155. of the Revised Code that is certified under the medicare or 637
medicaid program; 638

(6) A hospice care program, as defined in section 3712.01 of 639

<u>the Revised Code;</u>	640
<u>(7) A community mental health agency, as defined in section 5122.01 of the Revised Code;</u>	641 642
<u>(8) An ambulatory surgical facility, as defined in section 3702.30 of the Revised Code;</u>	643 644
<u>(9) A freestanding birthing center, as defined in section 3702.51 of the Revised Code;</u>	645 646
<u>(10) A federally qualified health center, as defined in section 3701.047 of the Revised Code;</u>	647 648
<u>(11) A federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code;</u>	649 650
<u>(12) A health care office or facility operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code;</u>	651 652 653 654
<u>(13) A site where a medical practice is operated, but only if the practice is comprised of one or more physicians who also are owners of the practice; the practice is organized to provide direct patient care; and the physician assistant has entered into a supervisory agreement with at least one of the physician owners who practices primarily at that site.</u>	655 656 657 658 659 660
<u>(C) A physician assistant shall not issue to a patient a prescription for a schedule II controlled substance from a convenience care clinic even if the convenience care clinic is owned or operated by an entity specified in division (B) of this section.</u>	661 662 663 664 665
<u>(D) A pharmacist who acts in good faith reliance on a prescription issued by a physician assistant under division (B) of this section is not liable for or subject to any of the following for relying on the prescription: damages in any civil action,</u>	666 667 668 669

prosecution in any criminal proceeding, or professional 670
disciplinary action by the state board of pharmacy under Chapter 671
4729. of the Revised Code. 672

Sec. 4730.42. (A) In granting physician-delegated 673
prescriptive authority to a particular physician assistant who 674
holds a certificate to prescribe issued under this chapter, the 675
supervising physician is subject to all of the following: 676

(1) The supervising physician shall not grant 677
physician-delegated prescriptive authority for any drug or 678
therapeutic device that is not listed on the physician assistant 679
formulary ~~established in rules~~ adopted under section 4730.39 of 680
the Revised Code as a drug or therapeutic device that may be 681
included in the physician-delegated prescriptive authority granted 682
to a physician assistant. 683

(2) The supervising physician shall not grant 684
physician-delegated prescriptive authority for any drug or device 685
that may be used to perform or induce an abortion. 686

(3) The supervising physician shall not grant 687
physician-delegated prescriptive authority in a manner that 688
exceeds the supervising physician's prescriptive authority, 689
including the physician's authority to treat chronic pain with 690
controlled substances and products containing tramadol as 691
described in section 4731.052 of the Revised Code. 692

(4) The supervising physician shall supervise the physician 693
assistant in accordance with all of the following: 694

(a) The supervision requirements specified in section 4730.21 695
of the Revised Code and, in the case of supervision provided 696
during a provisional period of physician-delegated prescriptive 697
authority, the supervision requirements specified in section 698
4730.45 of the Revised Code; 699

(b) The physician supervisory plan approved for the 700
supervising physician or the policies of the health care facility 701
in which the physician and physician assistant are practicing; 702

(c) The supervision agreement approved under section 4730.19 703
of the Revised Code that applies to the supervising physician and 704
the physician assistant. 705

(B)(1) The supervising physician of a physician assistant may 706
place conditions on the physician-delegated prescriptive authority 707
granted to the physician assistant. If conditions are placed on 708
that authority, the supervising physician shall maintain a written 709
record of the conditions and make the record available to the 710
state medical board on request. 711

(2) The conditions that a supervising physician may place on 712
the physician-delegated prescriptive authority granted to a 713
physician assistant include the following: 714

(a) Identification by class and specific generic nomenclature 715
of drugs and therapeutic devices that the physician chooses not to 716
permit the physician assistant to prescribe; 717

(b) Limitations on the dosage units or refills that the 718
physician assistant is authorized to prescribe; 719

(c) Specification of circumstances under which the physician 720
assistant is required to refer patients to the supervising 721
physician or another physician when exercising physician-delegated 722
prescriptive authority; 723

(d) Responsibilities to be fulfilled by the physician in 724
supervising the physician assistant that are not otherwise 725
specified in the physician supervisory plan or otherwise required 726
by this chapter. 727

Sec. 4730.44. (A) A physician assistant seeking a certificate 728
to prescribe shall submit to the state medical board a written 729

application on a form prescribed and supplied by the board. The 730
application shall include all of the following information: 731

(1) The applicant's name, residential address, business 732
address, if any, and social security number; 733

(2) Evidence of holding a valid certificate to practice as a 734
physician assistant issued under this chapter; 735

(3) ~~Satisfactory proof that the applicant meets the 736
requirements specified in section 4730.46 of the Revised Code to 737
participate in a provisional period of physician-delegated 738
prescriptive authority or satisfactory proof of successful 739
completion of the provisional period, evidenced by a letter or 740
copy of a letter attesting to the successful completion written by 741
a supervising physician of the physician assistant at the time of 742
completion of eligibility to receive a certificate to prescribe by 743
meeting one of the requirements specified in division (B) of this 744
section;~~ 745

(4) Any other information the board requires. 746

(B) To be eligible to receive a certificate to prescribe, an 747
applicant shall meet one of the following requirements: 748

(1) In the case of an applicant seeking to participate in a 749
provisional period of physician-delegated prescriptive authority 750
under section 4730.45 of the Revised Code, the applicant must meet 751
the requirements to participate in the provisional period, as 752
specified in section 4730.46 of the Revised Code. 753

(2) In the case of an applicant seeking a certificate to 754
prescribe after participating in a provisional period of 755
physician-delegated prescriptive authority, the applicant must 756
have successfully completed the provisional period, evidenced by a 757
letter or copy of a letter attesting to the successful completion 758
written by a physician who supervised the applicant at the time of 759

completion. 760

(3) In the case of an applicant who received a certificate to practice by meeting the educational and military experience requirements specified in division (C)(3) of section 4730.11 of the Revised Code, the applicant must have been authorized to prescribe drugs and therapeutic devices while practicing as a physician assistant. 761
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(4) In the case of an applicant who is not seeking a certificate to prescribe by meeting the requirements of division (B)(1), (2), or (3) of this section and has practiced as a physician assistant in another state or was credentialed or employed as a physician assistant by the United States government, the applicant must meet both of the following requirements: 767
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(a) Hold a master's or higher degree obtained from a program accredited by the accreditation review commission on education for the physician assistant or a predecessor or successor organization recognized by the board; 773
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(b) Have held valid authority issued by the other state or the United States government to prescribe therapeutic devices and drugs, including at least some controlled substances, evidenced by an affidavit issued by an appropriate agency or office of the other state or the United States government attesting to that prescriptive authority. 777
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(C) At the time of making application for a certificate to prescribe, the applicant shall pay the board a fee of one hundred dollars, no part of which shall be returned. The fees shall be deposited in accordance with section 4731.24 of the Revised Code. 783
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~~(C)~~(D) The board shall review all applications received. If an application is complete and the board determines that the applicant meets the requirements for a certificate to prescribe, the board shall issue the certificate to the applicant. The 787
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initial certificate to prescribe issued to an applicant seeking to 791
participate in a provisional period of physician-delegated 792
prescriptive authority shall be issued as a provisional 793
certificate to prescribe. 794

Sec. 4730.46. (A) To be eligible to participate in the 795
provisional period of physician-delegated prescriptive authority 796
required by section 4730.45 of the Revised Code, both of the 797
following apply to a physician assistant: 798

(1) The physician assistant shall meet the educational 799
requirements specified in division (B)(1) or (2) of this section 800
~~or the educational and clinical experience requirements specified~~ 801
~~in division (B)(2) of this section.~~ 802

(2) The physician assistant shall successfully complete the 803
pharmacology instruction specified in division (C) of this 804
section. 805

~~(B)(1)~~ For purposes of division (A)(1) of this section, a 806
physician assistant shall meet either of the following educational 807
requirements ~~unless division (B)(2) of this section applies~~: 808

~~(a)(1)~~ The physician assistant shall hold a master's or 809
higher degree ~~that was~~ obtained from a program accredited by the 810
accreditation review commission on education for the physician 811
assistant or a predecessor or successor organization recognized by 812
the state medical board. 813

~~(b)(2)~~ The physician assistant shall hold a both of the 814
following degrees: 815

(a) A degree other than a master's or higher degree ~~that was~~ 816
obtained from a school or program accredited by the accreditation 817
review commission on education for the physician assistant or a 818
predecessor or successor organization recognized by the board ~~and~~ 819
~~shall hold a~~; 820

(b) A master's or higher degree in a course of study with clinical relevance to the practice of physician assistants that was obtained from a program accredited by a regional or specialized and professional accrediting agency recognized by the council for higher education accreditation.

~~(2) Until two years after the effective date of the initial rules adopted under section 4730.39 of the Revised Code, a physician assistant who does not hold a master's or higher degree as specified in division (B)(1) of this section is eligible to participate in a provisional period if both of the following apply:~~

~~(a) The physician assistant holds a degree other than a master's or higher degree that was obtained from a program accredited by the accreditation review commission on education for the physician assistant or a predecessor or successor organization recognized by the board.~~

~~(b) The physician assistant has obtained not less than ten years of clinical experience as a physician assistant in this state or another jurisdiction, three years of which were obtained in the five year period immediately preceding the date the evidence is submitted to the supervising physician.~~

(C) For purposes of division (A)(2) of this section, all of the following conditions shall be met:

(1) The pharmacology instruction shall be completed not longer than three years prior to applying for the certificate to prescribe.

(2) The instruction shall be obtained through a course of study consisting of planned classroom or continued education and clinical study that meets either of the following conditions:

(a) It is accredited by the accreditation review commission on education for the physician assistant or a predecessor or

successor organization recognized by the board. 852

(b) It is approved by the board in accordance with standards 853
established in rules adopted under section 4730.39 of the Revised 854
Code. 855

(3) The content of the instruction shall include all of the 856
following: 857

(a) A minimum of thirty contact hours of training in 858
pharmacology that includes pharmacokinetic principles and clinical 859
application and the use of drugs and therapeutic devices in the 860
prevention of illness and maintenance of health; 861

(b) A minimum of twenty contact hours of clinical training in 862
pharmacology; 863

(c) A minimum of fifteen contact hours including training in 864
the fiscal and ethical implications of prescribing drugs and 865
therapeutic devices and training in the state and federal laws 866
that apply to the authority to prescribe; 867

(d) Any additional training required pursuant to rules 868
adopted under section 4730.39 of the Revised Code. 869

Sec. 4755.48. (A) No person shall employ fraud or deception 870
in applying for or securing a license to practice physical therapy 871
or to be a physical therapist assistant. 872

(B) No person shall practice or in any way imply or claim to 873
the public by words, actions, or the use of letters as described 874
in division (C) of this section to be able to practice physical 875
therapy or to provide physical therapy services, including 876
practice as a physical therapist assistant, unless the person 877
holds a valid license under sections 4755.40 to 4755.56 of the 878
Revised Code or except for submission of claims as provided in 879
section 4755.56 of the Revised Code. 880

(C) No person shall use the words or letters, physical 881

therapist, physical therapy, physical therapy services, 882
physiotherapist, physiotherapy, physiotherapy services, licensed 883
physical therapist, P.T., Ph.T., P.T.T., R.P.T., L.P.T., M.P.T., 884
D.P.T., M.S.P.T., P.T.A., physical therapy assistant, physical 885
therapist assistant, physical therapy technician, licensed 886
physical therapist assistant, L.P.T.A., R.P.T.A., or any other 887
letters, words, abbreviations, or insignia, indicating or implying 888
that the person is a physical therapist or physical therapist 889
assistant without a valid license under sections 4755.40 to 890
4755.56 of the Revised Code. 891

(D) No person who practices physical therapy or assists in 892
the provision of physical therapy treatments under the supervision 893
of a physical therapist shall fail to display the person's current 894
license granted under sections 4755.40 to 4755.56 of the Revised 895
Code in a conspicuous location in the place where the person 896
spends the major part of the person's time so engaged. 897

(E) Nothing in sections 4755.40 to 4755.56 of the Revised 898
Code shall affect or interfere with the performance of the duties 899
of any physical therapist or physical therapist assistant in 900
active service in the army, navy, coast guard, marine corps, air 901
force, public health service, or marine hospital service of the 902
United States, while so serving. 903

(F) Nothing in sections 4755.40 to 4755.56 of the Revised 904
Code shall prevent or restrict the activities or services of a 905
person ~~pursing~~ pursuing a course of study leading to a degree in 906
physical therapy in an accredited or approved educational program 907
if the activities or services constitute a part of a supervised 908
course of study and the person is designated by a title that 909
clearly indicates the person's status as a student. 910

(G) ~~No~~ (1) Except as provided in division (G)(2) of this 911
section and subject to division (H) of this section, no person 912
shall practice physical therapy other than on the prescription of, 913

or the referral of a patient by, a person who is licensed in this 914
or another state to practice do at least one of the following: 915

(a) Practice medicine and surgery, chiropractic, dentistry, 916
osteopathic medicine and surgery, podiatric medicine and surgery, 917
~~or to practice;~~ 918

(b) Practice as a physician assistant; 919

(c) Practice nursing as a certified registered nurse 920
anesthetist, clinical nurse specialist, certified nurse-midwife, 921
or certified nurse practitioner, ~~within the scope of such~~ 922
~~practices, and whose license is in good standing, unless either of~~ 923
~~the following conditions is met:.~~ 924

~~(1)(2)~~ The prohibition in division (G)(1) of this section on 925
practicing physical therapy other than on the prescription of, or 926
the referral of a patient by, any of the persons described in that 927
division does not apply if either of the following applies to the 928
person: 929

(a) The person holds a master's or doctorate degree from a 930
professional physical therapy program that is accredited by a 931
national physical therapy accreditation agency recognized by the 932
United States department of education. 933

~~(2)(b)~~ (b) On or before December 31, 2004, the person has 934
completed at least two years of practical experience as a licensed 935
physical therapist. 936

(H) To be authorized to prescribe physical therapy or refer a 937
patient to a physical therapist for physical therapy, a person 938
described in division (G)(1) of this section must be in good 939
standing with the relevant licensing board in this state or the 940
state in which the person is licensed and must act only within the 941
person's scope of practice. 942

(I) In the prosecution of any person for violation of 943

division (B) or (C) of this section, it is not necessary to allege 944
or prove want of a valid license to practice physical therapy or 945
to practice as a physical therapist assistant, but such matters 946
shall be a matter of defense to be established by the accused. 947

Sec. 4755.481. (A) If a physical therapist evaluates and 948
treats a patient without the prescription of, or the referral of 949
the patient by, a person ~~who is licensed to practice medicine and~~ 950
~~surgery, chiropractic, dentistry, osteopathic medicine and~~ 951
~~surgery, podiatric medicine and surgery, or nursing as a certified~~ 952
~~registered nurse anesthetist, clinical nurse specialist, certified~~ 953
~~nurse midwife, or certified nurse practitioner~~ described in 954
division (G)(1) of section 4755.48 of the Revised Code, all of the 955
following apply: 956

(1) The physical therapist shall, upon consent of the 957
patient, inform the ~~patient's physician, chiropractor, dentist,~~ 958
~~podiatrist, certified registered nurse anesthetist, clinical nurse~~ 959
~~specialist, certified nurse midwife, or certified nurse~~ 960
~~practitioner~~ relevant person described in division (G)(1) of 961
section 4755.48 of the Revised Code of the evaluation not later 962
than five business days after the evaluation is made. 963

(2) If the physical therapist determines, based on reasonable 964
evidence, that no substantial progress has been made with respect 965
to that patient during the thirty-day period immediately following 966
the date of the patient's initial visit with the physical 967
therapist, the physical therapist shall consult with or refer the 968
patient to a ~~licensed physician, chiropractor, dentist,~~ 969
~~podiatrist, certified registered nurse anesthetist, clinical nurse~~ 970
~~specialist, certified nurse midwife, or certified nurse~~ 971
~~practitioner~~ person described in division (G)(1) of section 972
4755.48 of the Revised Code, unless either of the following 973
applies: 974

(a) The evaluation, treatment, or services are being provided for fitness, wellness, or prevention purposes.	975 976
(b) The patient previously was diagnosed with chronic, neuromuscular, or developmental conditions and the evaluation, treatment, or services are being provided for problems or symptoms associated with one or more of those previously diagnosed conditions.	977 978 979 980 981
(3) If the physical therapist determines that orthotic devices are necessary to treat the patient, the physical therapist shall be limited to the application of the following orthotic devices:	982 983 984 985
(a) Upper extremity adaptive equipment used to facilitate the activities of daily living;	986 987
(b) Finger splints;	988
(c) Wrist splints;	989
(d) Prefabricated elastic or fabric abdominal supports with or without metal or plastic reinforcing stays and other prefabricated soft goods requiring minimal fitting;	990 991 992
(e) Nontherapeutic accommodative inlays;	993
(f) Shoes that are not manufactured or modified for a particular individual;	994 995
(g) Prefabricated foot care products;	996
(h) Custom foot orthotics;	997
(i) Durable medical equipment.	998
(4) If, at any time, the physical therapist has reason to believe that the patient has symptoms or conditions that require treatment or services beyond the scope of practice of a physical therapist, the physical therapist shall refer the patient to a licensed health care practitioner acting within the practitioner's	999 1000 1001 1002 1003

scope of practice. 1004

(B) Nothing in sections 4755.40 to 4755.56 of the Revised 1005
Code shall be construed to require reimbursement under any health 1006
insuring corporation policy, contract, or agreement, any sickness 1007
and accident insurance policy, the medical assistance program as 1008
defined in section 5111.01 of the Revised Code, or the health 1009
partnership program or qualified health plans established pursuant 1010
to sections 4121.44 to 4121.442 of the Revised Code, for any 1011
physical therapy service rendered without the prescription of, or 1012
the referral of the patient by, a ~~licensed physician,~~ 1013
~~chiropractor, dentist, podiatrist, certified registered nurse~~ 1014
~~anesthetist, clinical nurse specialist, certified nurse midwife,~~ 1015
~~or certified nurse practitioner~~ person described in division 1016
(G)(1) of section 4755.48 of the Revised Code. 1017

(C) For purposes of this section, "business day" means any 1018
calendar day that is not a Saturday, Sunday, or legal holiday. 1019
"Legal holiday" has the same meaning as in section 1.14 of the 1020
Revised Code. 1021

Sec. 4765.01. As used in this chapter: 1022

(A) "First responder" means an individual who holds a 1023
current, valid certificate issued under section 4765.30 of the 1024
Revised Code to practice as a first responder. 1025

(B) "Emergency medical technician-basic" or "EMT-basic" means 1026
an individual who holds a current, valid certificate issued under 1027
section 4765.30 of the Revised Code to practice as an emergency 1028
medical technician-basic. 1029

(C) "Emergency medical technician-intermediate" or "EMT-I" 1030
means an individual who holds a current, valid certificate issued 1031
under section 4765.30 of the Revised Code to practice as an 1032
emergency medical technician-intermediate. 1033

(D) "Emergency medical technician-paramedic" or "paramedic" 1034
means an individual who holds a current, valid certificate issued 1035
under section 4765.30 of the Revised Code to practice as an 1036
emergency medical technician-paramedic. 1037

(E) "Ambulance" means any motor vehicle that is used, or is 1038
intended to be used, for the purpose of responding to emergency 1039
medical situations, transporting emergency patients, and 1040
administering emergency medical service to patients before, 1041
during, or after transportation. 1042

(F) "Cardiac monitoring" means a procedure used for the 1043
purpose of observing and documenting the rate and rhythm of a 1044
patient's heart by attaching electrical leads from an 1045
electrocardiograph monitor to certain points on the patient's body 1046
surface. 1047

(G) "Emergency medical service" means any of the services 1048
described in sections 4765.35, 4765.37, 4765.38, and 4765.39 of 1049
the Revised Code that are performed by first responders, emergency 1050
medical technicians-basic, emergency medical 1051
technicians-intermediate, and paramedics. "Emergency medical 1052
service" includes such services performed before or during any 1053
transport of a patient, including transports between hospitals and 1054
transports to and from helicopters. 1055

(H) "Emergency medical service organization" means a public 1056
or private organization using first responders, EMTs-basic, 1057
EMTs-I, or paramedics, or a combination of first responders, 1058
EMTs-basic, EMTs-I, and paramedics, to provide emergency medical 1059
services. 1060

(I) "Physician" means an individual who holds a current, 1061
valid certificate issued under Chapter 4731. of the Revised Code 1062
authorizing the practice of medicine and surgery or osteopathic 1063
medicine and surgery. 1064

(J) "Registered nurse" means an individual who holds a	1065
current, valid license issued under Chapter 4723. of the Revised	1066
Code authorizing the practice of nursing as a registered nurse.	1067
(K) "Volunteer" means a person who provides services either	1068
for no compensation or for compensation that does not exceed the	1069
actual expenses incurred in providing the services or in training	1070
to provide the services.	1071
(L) "Emergency medical service personnel" means first	1072
responders, emergency medical service technicians-basic, emergency	1073
medical service technicians-intermediate, emergency medical	1074
service technicians-paramedic, and persons who provide medical	1075
direction to such persons.	1076
(M) "Hospital" has the same meaning as in section 3727.01 of	1077
the Revised Code.	1078
(N) "Trauma" or "traumatic injury" means severe damage to or	1079
destruction of tissue that satisfies both of the following	1080
conditions:	1081
(1) It creates a significant risk of any of the following:	1082
(a) Loss of life;	1083
(b) Loss of a limb;	1084
(c) Significant, permanent disfigurement;	1085
(d) Significant, permanent disability.	1086
(2) It is caused by any of the following:	1087
(a) Blunt or penetrating injury;	1088
(b) Exposure to electromagnetic, chemical, or radioactive	1089
energy;	1090
(c) Drowning, suffocation, or strangulation;	1091
(d) A deficit or excess of heat.	1092

(O) "Trauma victim" or "trauma patient" means a person who 1093
has sustained a traumatic injury. 1094

(P) "Trauma care" means the assessment, diagnosis, 1095
transportation, treatment, or rehabilitation of a trauma victim by 1096
emergency medical service personnel or by a physician, nurse, 1097
physician assistant, respiratory therapist, physical therapist, 1098
chiropractor, occupational therapist, speech-language pathologist, 1099
audiologist, or psychologist licensed to practice as such in this 1100
state or another jurisdiction. 1101

(Q) "Trauma center" means all of the following: 1102

(1) Any hospital that is verified by the American college of 1103
surgeons as an adult or pediatric trauma center; 1104

(2) Any hospital that is operating as an adult or pediatric 1105
trauma center under provisional status pursuant to section 1106
3727.101 of the Revised Code; 1107

(3) Until December 31, 2004, any hospital in this state that 1108
is designated by the director of health as a level II pediatric 1109
trauma center under section 3727.081 of the Revised Code; 1110

(4) Any hospital in another state that is licensed or 1111
designated under the laws of that state as capable of providing 1112
specialized trauma care appropriate to the medical needs of the 1113
trauma patient. 1114

(R) "Pediatric" means involving a patient who is less than 1115
sixteen years of age. 1116

(S) "Adult" means involving a patient who is not a pediatric 1117
patient. 1118

(T) "Geriatric" means involving a patient who is at least 1119
seventy years old or exhibits significant anatomical or 1120
physiological characteristics associated with advanced aging. 1121

(U) "Air medical organization" means an organization that 1122

provides emergency medical services, or transports emergency 1123
victims, by means of fixed or rotary wing aircraft. 1124

(V) "Emergency care" and "emergency facility" have the same 1125
meanings as in section 3727.01 of the Revised Code. 1126

(W) "Stabilize," except as it is used in division (B) of 1127
section 4765.35 of the Revised Code with respect to the manual 1128
stabilization of fractures, has the same meaning as in section 1129
1753.28 of the Revised Code. 1130

(X) "Transfer" has the same meaning as in section 1753.28 of 1131
the Revised Code. 1132

(Y) "Firefighter" means any member of a fire department as 1133
defined in section 742.01 of the Revised Code. 1134

(Z) "Volunteer firefighter" has the same meaning as in 1135
section 146.01 of the Revised Code. 1136

(AA) "Part-time paid firefighter" means a person who provides 1137
firefighting services on less than a full-time basis, is routinely 1138
scheduled to be present on site at a fire station or other 1139
designated location for purposes of responding to a fire or other 1140
emergency, and receives more than nominal compensation for the 1141
provision of firefighting services. 1142

(BB) "Physician assistant" means an individual who holds a 1143
valid certificate to practice as a physician assistant issued 1144
under Chapter 4730. of the Revised Code. 1145

Sec. 4765.35. (A) A first responder shall perform the 1146
emergency medical services described in this section in accordance 1147
with this chapter and any rules adopted under it. 1148

(B) A first responder may provide limited emergency medical 1149
services to patients until the arrival of an emergency medical 1150
technician-basic, emergency medical technician-intermediate, or 1151
emergency medical technician-paramedic. In an emergency, a first 1152

responder may render emergency medical services such as opening 1153
and maintaining an airway, giving mouth to barrier ventilation, 1154
chest compressions, electrical interventions with automated 1155
defibrillators to support or correct the cardiac function and 1156
other methods determined by the board, controlling of hemorrhage, 1157
manual stabilization of fractures, bandaging, assisting in 1158
childbirth, and determining triage of trauma victims. 1159

(C) A first responder may perform any other emergency medical 1160
services approved pursuant to rules adopted under section 4765.11 1161
of the Revised Code. The board shall determine whether the nature 1162
of any such service requires that a first responder receive 1163
authorization prior to performing the service. 1164

(D)(1) Except as provided in division (D)(2) of this section, 1165
if the board determines under division (C) of this section that a 1166
service requires prior authorization, the service shall be 1167
performed only pursuant to the written or verbal authorization of 1168
a physician or of the cooperating physician advisory board, or 1169
pursuant to an authorization transmitted through a direct 1170
communication device by a physician, physician assistant 1171
designated by a physician, or registered nurse designated by a 1172
physician. 1173

(2) If communications fail during an emergency situation or 1174
the required response time prohibits communication, a first 1175
responder may perform services subject to this division, if, in 1176
the judgment of the first responder, the life of the patient is in 1177
immediate danger. Services performed under these circumstances 1178
shall be performed in accordance with the written protocols for 1179
triage of adult and pediatric trauma victims established in rules 1180
adopted under sections 4765.11 and 4765.40 of the Revised Code and 1181
any applicable protocols adopted by the emergency medical service 1182
organization with which the first responder is affiliated. 1183

Sec. 4765.36. In a hospital, an emergency medical technician-basic, emergency medical technician-intermediate, or emergency medical technician-paramedic may perform emergency medical services ~~only under the direction and supervision of a physician or registered nurse designated by a physician and only if the services are performed in accordance with both of the following conditions:~~ 1184-1190

(A) Only in the hospital's emergency department or while moving a patient between the emergency department and another part of the hospital; 1191-1193

(B) Only under the direction and supervision of one of the following: 1194-1195

(1) A physician; 1196

(2) A physician assistant designated by a physician; 1197

(3) A registered nurse designated by a physician. 1198

Sec. 4765.37. (A) An emergency medical technician-basic shall perform the emergency medical services described in this section in accordance with this chapter and any rules adopted under it by the state board of emergency medical services. 1199-1202

(B) An emergency medical technician-basic may operate, or be responsible for operation of, an ambulance and may provide emergency medical services to patients. In an emergency, an EMT-basic may determine the nature and extent of illness or injury and establish priority for required emergency medical services. An EMT-basic may render emergency medical services such as opening and maintaining an airway, giving positive pressure ventilation, cardiac resuscitation, electrical interventions with automated defibrillators to support or correct the cardiac function and other methods determined by the board, controlling of hemorrhage, treatment of shock, immobilization of fractures, bandaging, 1203-1213

assisting in childbirth, management of mentally disturbed 1214
patients, initial care of poison and burn patients, and 1215
determining triage of adult and pediatric trauma victims. Where 1216
patients must in an emergency be extricated from entrapment, an 1217
EMT-basic may assess the extent of injury and render all possible 1218
emergency medical services and protection to the entrapped 1219
patient; provide light rescue services if an ambulance has not 1220
been accompanied by a specialized unit; and after extrication, 1221
provide additional care in sorting of the injured in accordance 1222
with standard emergency procedures. 1223

(C) An EMT-basic may perform any other emergency medical 1224
services approved pursuant to rules adopted under section 4765.11 1225
of the Revised Code. The board shall determine whether the nature 1226
of any such service requires that an EMT-basic receive 1227
authorization prior to performing the service. 1228

(D)(1) Except as provided in division (D)(2) of this section, 1229
if the board determines under division (C) of this section that a 1230
service requires prior authorization, the service shall be 1231
performed only pursuant to the written or verbal authorization of 1232
a physician or of the cooperating physician advisory board, or 1233
pursuant to an authorization transmitted through a direct 1234
communication device by a physician, physician assistant 1235
designated by a physician, or registered nurse designated by a 1236
physician. 1237

(2) If communications fail during an emergency situation or 1238
the required response time prohibits communication, an EMT-basic 1239
may perform services subject to this division, if, in the judgment 1240
of the EMT-basic, the life of the patient is in immediate danger. 1241
Services performed under these circumstances shall be performed in 1242
accordance with the protocols for triage of adult and pediatric 1243
trauma victims established in rules adopted under sections 4765.11 1244
and 4765.40 of the Revised Code and any applicable protocols 1245

adopted by the emergency medical service organization with which 1246
the EMT-basic is affiliated. 1247

Sec. 4765.38. (A) An emergency medical 1248
technician-intermediate shall perform the emergency medical 1249
services described in this section in accordance with this chapter 1250
and any rules adopted under it. 1251

(B) An EMT-I may do any of the following: 1252

(1) Establish and maintain an intravenous lifeline that has 1253
been approved by a cooperating physician or physician advisory 1254
board; 1255

(2) Perform cardiac monitoring; 1256

(3) Perform electrical interventions to support or correct 1257
the cardiac function; 1258

(4) Administer epinephrine; 1259

(5) Determine triage of adult and pediatric trauma victims; 1260

(6) Perform any other emergency medical services approved 1261
pursuant to rules adopted under section 4765.11 of the Revised 1262
Code. 1263

(C)(1) Except as provided in division (C)(2) of this section, 1264
the services described in division (B) of this section shall be 1265
performed by an EMT-I only pursuant to the written or verbal 1266
authorization of a physician or of the cooperating physician 1267
advisory board, or pursuant to an authorization transmitted 1268
through a direct communication device by a physician, physician 1269
assistant designated by a physician, or registered nurse 1270
designated by a physician. 1271

(2) If communications fail during an emergency situation or 1272
the required response time prohibits communication, an EMT-I may 1273
perform any of the services described in division (B) of this 1274

section, if, in the judgment of the EMT-I, the life of the patient 1275
is in immediate danger. Services performed under these 1276
circumstances shall be performed in accordance with the protocols 1277
for triage of adult and pediatric trauma victims established in 1278
rules adopted under sections 4765.11 and 4765.40 of the Revised 1279
Code and any applicable protocols adopted by the emergency medical 1280
service organization with which the EMT-I is affiliated. 1281

(D) In addition to, and in the course of, providing emergency 1282
medical treatment, an emergency medical technician-intermediate 1283
may withdraw blood as provided under sections 1547.11, 4506.17, 1284
and 4511.19 of the Revised Code. An emergency medical 1285
technician-intermediate shall withdraw blood in accordance with 1286
this chapter and any rules adopted under it by the state board of 1287
emergency medical services. 1288

Sec. 4765.39. (A) An emergency medical technician-paramedic 1289
shall perform the emergency medical services described in this 1290
section in accordance with this chapter and any rules adopted 1291
under it. 1292

(B) A paramedic may do any of the following: 1293

(1) Perform cardiac monitoring; 1294

(2) Perform electrical interventions to support or correct 1295
the cardiac function; 1296

(3) Perform airway procedures; 1297

(4) Perform relief of pneumothorax; 1298

(5) Administer appropriate drugs and intravenous fluids; 1299

(6) Determine triage of adult and pediatric trauma victims; 1300

(7) Perform any other emergency medical services, including 1301
life support or intensive care techniques, approved pursuant to 1302
rules adopted under section 4765.11 of the Revised Code. 1303

(C)(1) Except as provided in division (C)(2) of this section, 1304
the services described in division (B) of this section shall be 1305
performed by a paramedic only pursuant to the written or verbal 1306
authorization of a physician or of the cooperating physician 1307
advisory board, or pursuant to an authorization transmitted 1308
through a direct communication device by a physician, physician 1309
assistant designated by a physician, or registered nurse 1310
designated by a physician. 1311

(2) If communications fail during an emergency situation or 1312
the required response time prohibits communication, a paramedic 1313
may perform any of the services described in division (B) of this 1314
section, if, in the paramedic's judgment, the life of the patient 1315
is in immediate danger. Services performed under these 1316
circumstances shall be performed in accordance with the protocols 1317
for triage of adult and pediatric trauma victims established in 1318
rules adopted under sections 4765.11 and 4765.40 of the Revised 1319
Code and any applicable protocols adopted by the emergency medical 1320
service organization with which the paramedic is affiliated. 1321

(D) In addition to, and in the course of, providing emergency 1322
medical treatment, an emergency medical technician-paramedic may 1323
withdraw blood as provided under sections 1547.11, 4506.17, and 1324
4511.19 of the Revised Code. An emergency medical 1325
technician-paramedic shall withdraw blood in accordance with this 1326
chapter and any rules adopted under it by the state board of 1327
emergency medical services. 1328

Sec. 4765.49. (A) A first responder, emergency medical 1329
technician-basic, emergency medical technician-intermediate, or 1330
emergency medical technician-paramedic is not liable in damages in 1331
a civil action for injury, death, or loss to person or property 1332
resulting from the individual's administration of emergency 1333
medical services, unless the services are administered in a manner 1334

that constitutes willful or wanton misconduct. A physician, 1335
physician assistant designated by a physician, or registered nurse 1336
designated by a physician, ~~who~~ any of whom is advising or 1337
assisting in the emergency medical services by means of any 1338
communication device or telemetering system, is not liable in 1339
damages in a civil action for injury, death, or loss to person or 1340
property resulting from the individual's advisory communication or 1341
assistance, unless the advisory communication or assistance is 1342
provided in a manner that constitutes willful or wanton 1343
misconduct. Medical directors and members of cooperating physician 1344
advisory boards of emergency medical service organizations are not 1345
liable in damages in a civil action for injury, death, or loss to 1346
person or property resulting from their acts or omissions in the 1347
performance of their duties, unless the act or omission 1348
constitutes willful or wanton misconduct. 1349

(B) A political subdivision, joint ambulance district, joint 1350
emergency medical services district, or other public agency, and 1351
any officer or employee of a public agency or of a private 1352
organization operating under contract or in joint agreement with 1353
one or more political subdivisions, that provides emergency 1354
medical services, or that enters into a joint agreement or a 1355
contract with the state, any political subdivision, joint 1356
ambulance district, or joint emergency medical services district 1357
for the provision of emergency medical services, is not liable in 1358
damages in a civil action for injury, death, or loss to person or 1359
property arising out of any actions taken by a first responder, 1360
EMT-basic, EMT-I, or paramedic working under the officer's or 1361
employee's jurisdiction, or for injury, death, or loss to person 1362
or property arising out of any actions of licensed medical 1363
personnel advising or assisting the first responder, EMT-basic, 1364
EMT-I, or paramedic, unless the services are provided in a manner 1365
that constitutes willful or wanton misconduct. 1366

(C) A student who is enrolled in an emergency medical services training program accredited under section 4765.17 of the Revised Code or an emergency medical services continuing education program approved under that section is not liable in damages in a civil action for injury, death, or loss to person or property resulting from either of the following:

(1) The student's administration of emergency medical services or patient care or treatment, if the services, care, or treatment is administered while the student is under the direct supervision and in the immediate presence of an EMT-basic, EMT-I, paramedic, registered nurse, physician assistant, or physician and while the student is receiving clinical training that is required by the program, unless the services, care, or treatment is provided in a manner that constitutes willful or wanton misconduct;

(2) The student's training as an ambulance driver, unless the driving is done in a manner that constitutes willful or wanton misconduct.

(D) An EMT-basic, EMT-I, paramedic, or other operator, who holds a valid commercial driver's license issued pursuant to Chapter 4506. of the Revised Code or driver's license issued pursuant to Chapter 4507. of the Revised Code and who is employed by an emergency medical service organization that is not owned or operated by a political subdivision as defined in section 2744.01 of the Revised Code, is not liable in damages in a civil action for injury, death, or loss to person or property that is caused by the operation of an ambulance by the EMT-basic, EMT-I, paramedic, or other operator while responding to or completing a call for emergency medical services, unless the operation constitutes willful or wanton misconduct or does not comply with the precautions of section 4511.03 of the Revised Code. An emergency medical service organization is not liable in damages in a civil

action for any injury, death, or loss to person or property that 1399
is caused by the operation of an ambulance by its employee or 1400
agent, if this division grants the employee or agent immunity from 1401
civil liability for the injury, death, or loss. 1402

(E) An employee or agent of an emergency medical service 1403
organization who receives requests for emergency medical services 1404
that are directed to the organization, dispatches first 1405
responders, EMTs-basic, EMTs-I, or paramedics in response to those 1406
requests, communicates those requests to those employees or agents 1407
of the organization who are authorized to dispatch first 1408
responders, EMTs-basic, EMTs-I, or paramedics, or performs any 1409
combination of these functions for the organization, is not liable 1410
in damages in a civil action for injury, death, or loss to person 1411
or property resulting from the individual's acts or omissions in 1412
the performance of those duties for the organization, unless an 1413
act or omission constitutes willful or wanton misconduct. 1414

(F) A person who is performing the functions of a first 1415
responder, EMT-basic, EMT-I, or paramedic under the authority of 1416
the laws of a state that borders this state and who provides 1417
emergency medical services to or transportation of a patient in 1418
this state is not liable in damages in a civil action for injury, 1419
death, or loss to person or property resulting from the person's 1420
administration of emergency medical services, unless the services 1421
are administered in a manner that constitutes willful or wanton 1422
misconduct. A physician, physician assistant designated by a 1423
physician, or registered nurse designated by a physician, ~~who~~ any 1424
of whom is licensed to practice in the adjoining state and who is 1425
advising or assisting in the emergency medical services by means 1426
of any communication device or telemetering system, is not liable 1427
in damages in a civil action for injury, death, or loss to person 1428
or property resulting from the person's advisory communication or 1429
assistance, unless the advisory communication or assistance is 1430

provided in a manner that constitutes willful or wanton 1431
misconduct. 1432

(G) A person certified under section 4765.23 of the Revised 1433
Code to teach in an emergency medical services training program or 1434
emergency medical services continuing education program, and a 1435
person who teaches at the Ohio fire academy established under 1436
section 3737.33 of the Revised Code or in a fire service training 1437
program described in division (A) of section 4765.55 of the 1438
Revised Code, is not liable in damages in a civil action for 1439
injury, death, or loss to person or property resulting from the 1440
person's acts or omissions in the performance of the person's 1441
duties, unless an act or omission constitutes willful or wanton 1442
misconduct. 1443

(H) In the accreditation of emergency medical services 1444
training programs or approval of emergency medical services 1445
continuing education programs, the state board of emergency 1446
medical services and any person or entity authorized by the board 1447
to evaluate applications for accreditation or approval are not 1448
liable in damages in a civil action for injury, death, or loss to 1449
person or property resulting from their acts or omissions in the 1450
performance of their duties, unless an act or omission constitutes 1451
willful or wanton misconduct. 1452

(I) A person authorized by an emergency medical service 1453
organization to review the performance of first responders, 1454
EMTs-basic, EMTs-I, and paramedics or to administer quality 1455
assurance programs is not liable in damages in a civil action for 1456
injury, death, or loss to person or property resulting from the 1457
person's acts or omissions in the performance of the person's 1458
duties, unless an act or omission constitutes willful or wanton 1459
misconduct. 1460

Sec. 4765.51. Nothing in this chapter prevents or restricts 1461

the practice, services, or activities of any registered nurse 1462
practicing within the scope of ~~his~~ the registered nurse's 1463
practice. 1464

Nothing in this chapter prevents or restricts the practice, 1465
services, or activities of any physician assistant practicing in 1466
accordance with a physician supervisory plan approved under 1467
section 4730.17 of the Revised Code or the policies of the health 1468
care facility in which the physician assistant is practicing. 1469

Section 2. That existing sections 2133.211, 3719.06, 4730.06, 1470
4730.09, 4730.10, 4730.11, 4730.38, 4730.39, 4730.40, 4730.41, 1471
4730.42, 4730.44, 4730.46, 4755.48, 4755.481, 4765.01, 4765.35, 1472
4765.36, 4765.37, 4765.38, 4765.39, 4765.49, and 4765.51 and 1473
section 4730.401 of the Revised Code are hereby repealed. 1474