

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

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Sub. H. B. No. 412

Representative Gonzales

**Cosponsors: Representatives Bishoff, Terhar, Young, Wachtmann,
Schuring, Brown, Anielski, Baker, Blessing, Carney, Green, Grossman,
Hackett, Huffman, Landis, Perales, Pillich, Rogers, Scherer**

Speaker Batchelder

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A B I L L

To amend sections 1.64, 2133.211, 2151.3515, 1
2305.113, 2925.61, 3701.92, 3727.06, 3729.05, 2
4503.44, 4723.01, 4723.06, 4723.07, 4723.18, 3
4723.181, 4723.48, 4723.482, 4723.50, 4729.01, 4
4730.01, 4730.02, 4730.03, 4730.04, 4730.06, 5
4730.08, 4730.091, 4730.10, 4730.101, 4730.11, 6
4730.12, 4730.13, 4730.14, 4730.19, 4730.21, 7
4730.22, 4730.25, 4730.251, 4730.27, 4730.28, 8
4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 9
4730.41, 4730.42, 4730.43, 4730.431, 4730.49, 10
4730.51, 4730.53, 4731.07, 4761.01, 4761.17, 11
4765.01, 4765.51, 5122.11, 5122.111, and 5123.47; 12
to amend, for the purpose of adopting new section 13
numbers as indicated in parentheses, section 14
4730.091 (4730.201) and 4730.092 (4730.202); to 15
enact new section 4730.20 and sections 4723.489, 16
4730.111, and 4730.203; and to repeal sections 17
4730.081, 4730.09, 4730.15, 4730.16, 4730.17, 18
4730.18, 4730.20, 4730.44, 4730.45, 4730.46, 19

4730.47, 4730.48, 4730.50, and 4730.52 of the 20
Revised Code to revise the law governing the 21
practice of physician assistants, the practice of 22
advanced practice registered nurses, the 23
proceedings for court-ordered treatment of a 24
mentally ill person, and the licensure of 25
recreational vehicle parks and recreation camps, 26
and to amend the versions of sections 4730.25 and 27
4730.53 of the Revised Code that are scheduled to 28
take effect April 1, 2015, to continue the 29
provisions of this act on and after that effective 30
date. 31

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

Section 1. That sections 1.64, 2133.211, 2151.3515, 2305.113, 32
2925.61, 3701.92, 3727.06, 3729.05, 4503.44, 4723.01, 4723.06, 33
4723.07, 4723.18, 4723.181, 4723.48, 4723.482, 4723.50, 4729.01, 34
4730.01, 4730.02, 4730.03, 4730.04, 4730.06, 4730.08, 4730.091, 35
4730.10, 4730.101, 4730.11, 4730.12, 4730.13, 4730.14, 4730.19, 36
4730.21, 4730.22, 4730.25, 4730.251, 4730.27, 4730.28, 4730.31, 37
4730.32, 4730.33, 4730.38, 4730.39, 4730.41, 4730.42, 4730.43, 38
4730.431, 4730.49, 4730.51, 4730.53, 4731.07, 4761.01, 4761.17, 39
4765.01, 4765.51, 5122.11, 5122.111, and 5123.47 be amended, 40
sections 4730.091 (4730.201) and 4730.092 (4730.202) be amended 41
for the purpose of adopting new section numbers as indicated in 42
parentheses, and new section 4730.20 and sections 4723.489, 43
4730.111, and 4730.203 of the Revised Code be enacted to read as 44
follows: 45

Sec. 1.64. As used in the Revised Code: 46

(A) "Certified nurse-midwife" means a registered nurse who 47
holds a valid certificate of authority issued under Chapter 4723. 48

of the Revised Code that authorizes the practice of nursing as a 49
certified nurse-midwife in accordance with section 4723.43 of the 50
Revised Code and rules adopted by the board of nursing. 51

(B) "Certified nurse practitioner" means a registered nurse 52
who holds a valid certificate of authority issued under Chapter 53
4723. of the Revised Code that authorizes the practice of nursing 54
as a certified nurse practitioner in accordance with section 55
4723.43 of the Revised Code and rules adopted by the board of 56
nursing. 57

(C) "Clinical nurse specialist" means a registered nurse who 58
holds a valid certificate of authority issued under Chapter 4723. 59
of the Revised Code that authorizes the practice of nursing as a 60
clinical nurse specialist in accordance with section 4723.43 of 61
the Revised Code and rules adopted by the board of nursing. 62

(D) "Physician assistant" means an individual who ~~holds a~~ 63
~~valid certificate to practice issued~~ is licensed under Chapter 64
4730. of the Revised Code ~~authorizing the individual~~ to provide 65
services as a physician assistant to patients under the 66
supervision, control, and direction of one or more physicians. 67

Sec. 2133.211. A person who holds a certificate of authority 68
~~to practice~~ as a certified nurse practitioner or clinical nurse 69
specialist issued under ~~section 4723.42~~ Chapter 4723. of the 70
Revised Code may take any action that may be taken by an attending 71
physician under sections 2133.21 to 2133.26 of the Revised Code 72
and has the immunity provided by section 2133.22 of the Revised 73
Code if the action is taken pursuant to a standard care 74
arrangement with a collaborating physician. 75

A person who holds a ~~certificate~~ license to practice as a 76
physician assistant issued under Chapter 4730. of the Revised Code 77
may take any action that may be taken by an attending physician 78
under sections 2133.21 to 2133.26 of the Revised Code and has the 79

immunity provided by section 2133.22 of the Revised Code if the 80
action is taken pursuant to a ~~physician supervisory plan approved~~ 81
~~pursuant to~~ supervision agreement entered into under section 82
~~4730.17~~ 4730.19 of the Revised Code ~~or, including, if applicable~~ 83
the policies of a health care facility in which the physician 84
assistant is practicing. 85

Sec. 2151.3515. As used in sections 2151.3515 to 2151.3530 of 86
the Revised Code: 87

(A) "Deserted child" means a child whose parent has 88
voluntarily delivered the child to an emergency medical service 89
worker, peace officer, or hospital employee without expressing an 90
intent to return for the child. 91

(B) "Emergency medical service organization," "emergency 92
medical technician-basic," "emergency medical 93
technician-intermediate," "first responder," and "paramedic" have 94
the same meanings as in section 4765.01 of the Revised Code. 95

(C) "Emergency medical service worker" means a first 96
responder, emergency medical technician-basic, emergency medical 97
technician-intermediate, or paramedic. 98

(D) "Hospital" has the same meaning as in section 3727.01 of 99
the Revised Code. 100

(E) "Hospital employee" means any of the following persons: 101

(1) A physician who has been granted privileges to practice 102
at the hospital; 103

(2) A nurse, physician assistant, or nursing assistant 104
employed by the hospital; 105

(3) An authorized person employed by the hospital who is 106
acting under the direction of a physician described in division 107
(E)(1) of this section. 108

(F) "Law enforcement agency" means an organization or entity made up of peace officers.	109 110
(G) "Nurse" means a person who is licensed under Chapter 4723. of the Revised Code to practice as a registered nurse or licensed practical nurse.	111 112 113
(H) "Nursing assistant" means a person designated by a hospital as a nurse aide or nursing assistant whose job is to aid nurses, physicians, and physician assistants in the performance of their duties.	114 115 116 117
(I) "Peace officer" means a sheriff, deputy sheriff, constable, police officer of a township or joint police district, marshal, deputy marshal, municipal police officer, or a state highway patrol trooper.	118 119 120 121
(J) " Physician" and "physician assistant" have the same meanings as in section 4730.01 <u>means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery.</u>	122 123 124 125 126
<u>(K) "Physician assistant" means an individual who holds a current, valid license to practice as a physician assistant issued under Chapter 4730. of the Revised Code.</u>	127 128 129
Sec. 2305.113. (A) Except as otherwise provided in this section, an action upon a medical, dental, optometric, or chiropractic claim shall be commenced within one year after the cause of action accrued.	130 131 132 133
(B)(1) If prior to the expiration of the one-year period specified in division (A) of this section, a claimant who allegedly possesses a medical, dental, optometric, or chiropractic claim gives to the person who is the subject of that claim written notice that the claimant is considering bringing an action upon	134 135 136 137 138

that claim, that action may be commenced against the person 139
notified at any time within one hundred eighty days after the 140
notice is so given. 141

(2) An insurance company shall not consider the existence or 142
nonexistence of a written notice described in division (B)(1) of 143
this section in setting the liability insurance premium rates that 144
the company may charge the company's insured person who is 145
notified by that written notice. 146

(C) Except as to persons within the age of minority or of 147
unsound mind as provided by section 2305.16 of the Revised Code, 148
and except as provided in division (D) of this section, both of 149
the following apply: 150

(1) No action upon a medical, dental, optometric, or 151
chiropractic claim shall be commenced more than four years after 152
the occurrence of the act or omission constituting the alleged 153
basis of the medical, dental, optometric, or chiropractic claim. 154

(2) If an action upon a medical, dental, optometric, or 155
chiropractic claim is not commenced within four years after the 156
occurrence of the act or omission constituting the alleged basis 157
of the medical, dental, optometric, or chiropractic claim, then, 158
any action upon that claim is barred. 159

(D)(1) If a person making a medical claim, dental claim, 160
optometric claim, or chiropractic claim, in the exercise of 161
reasonable care and diligence, could not have discovered the 162
injury resulting from the act or omission constituting the alleged 163
basis of the claim within three years after the occurrence of the 164
act or omission, but, in the exercise of reasonable care and 165
diligence, discovers the injury resulting from that act or 166
omission before the expiration of the four-year period specified 167
in division (C)(1) of this section, the person may commence an 168
action upon the claim not later than one year after the person 169

discovers the injury resulting from that act or omission. 170

(2) If the alleged basis of a medical claim, dental claim, 171
optometric claim, or chiropractic claim is the occurrence of an 172
act or omission that involves a foreign object that is left in the 173
body of the person making the claim, the person may commence an 174
action upon the claim not later than one year after the person 175
discovered the foreign object or not later than one year after the 176
person, with reasonable care and diligence, should have discovered 177
the foreign object. 178

(3) A person who commences an action upon a medical claim, 179
dental claim, optometric claim, or chiropractic claim under the 180
circumstances described in division (D)(1) or (2) of this section 181
has the affirmative burden of proving, by clear and convincing 182
evidence, that the person, with reasonable care and diligence, 183
could not have discovered the injury resulting from the act or 184
omission constituting the alleged basis of the claim within the 185
three-year period described in division (D)(1) of this section or 186
within the one-year period described in division (D)(2) of this 187
section, whichever is applicable. 188

(E) As used in this section: 189

(1) "Hospital" includes any person, corporation, association, 190
board, or authority that is responsible for the operation of any 191
hospital licensed or registered in the state, including, but not 192
limited to, those that are owned or operated by the state, 193
political subdivisions, any person, any corporation, or any 194
combination of the state, political subdivisions, persons, and 195
corporations. "Hospital" also includes any person, corporation, 196
association, board, entity, or authority that is responsible for 197
the operation of any clinic that employs a full-time staff of 198
physicians practicing in more than one recognized medical 199
specialty and rendering advice, diagnosis, care, and treatment to 200
individuals. "Hospital" does not include any hospital operated by 201

the government of the United States or any of its branches.	202
(2) "Physician" means a person who is licensed to practice	203
medicine and surgery or osteopathic medicine and surgery by the	204
state medical board or a person who otherwise is authorized to	205
practice medicine and surgery or osteopathic medicine and surgery	206
in this state.	207
(3) "Medical claim" means any claim that is asserted in any	208
civil action against a physician, podiatrist, hospital, home, or	209
residential facility, against any employee or agent of a	210
physician, podiatrist, hospital, home, or residential facility, or	211
against a licensed practical nurse, registered nurse, advanced	212
practice registered nurse, physical therapist, physician	213
assistant, emergency medical technician-basic, emergency medical	214
technician-intermediate, or emergency medical	215
technician-paramedic, and that arises out of the medical	216
diagnosis, care, or treatment of any person. "Medical claim"	217
includes the following:	218
(a) Derivative claims for relief that arise from the medical	219
diagnosis, care, or treatment of a person;	220
(b) Claims that arise out of the medical diagnosis, care, or	221
treatment of any person and to which either of the following	222
applies:	223
(i) The claim results from acts or omissions in providing	224
medical care.	225
(ii) The claim results from the hiring, training,	226
supervision, retention, or termination of caregivers providing	227
medical diagnosis, care, or treatment.	228
(c) Claims that arise out of the medical diagnosis, care, or	229
treatment of any person and that are brought under section 3721.17	230
of the Revised Code.	231

(4) "Podiatrist" means any person who is licensed to practice podiatric medicine and surgery by the state medical board.

(5) "Dentist" means any person who is licensed to practice dentistry by the state dental board.

(6) "Dental claim" means any claim that is asserted in any civil action against a dentist, or against any employee or agent of a dentist, and that arises out of a dental operation or the dental diagnosis, care, or treatment of any person. "Dental claim" includes derivative claims for relief that arise from a dental operation or the dental diagnosis, care, or treatment of a person.

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

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

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

(8) "Registered nurse" means any person who is licensed to

practice nursing as a registered nurse by the board of nursing.	263
(9) "Chiropractic claim" means any claim that is asserted in	264
any civil action against a chiropractor, or against any employee	265
or agent of a chiropractor, and that arises out of the	266
chiropractic diagnosis, care, or treatment of any person.	267
"Chiropractic claim" includes derivative claims for relief that	268
arise from the chiropractic diagnosis, care, or treatment of a	269
person.	270
(10) "Chiropractor" means any person who is licensed to	271
practice chiropractic by the state chiropractic board.	272
(11) "Optometric claim" means any claim that is asserted in	273
any civil action against an optometrist, or against any employee	274
or agent of an optometrist, and that arises out of the optometric	275
diagnosis, care, or treatment of any person. "Optometric claim"	276
includes derivative claims for relief that arise from the	277
optometric diagnosis, care, or treatment of a person.	278
(12) "Optometrist" means any person licensed to practice	279
optometry by the state board of optometry.	280
(13) "Physical therapist" means any person who is licensed to	281
practice physical therapy under Chapter 4755. of the Revised Code.	282
(14) "Home" has the same meaning as in section 3721.10 of the	283
Revised Code.	284
(15) "Residential facility" means a facility licensed under	285
section 5123.19 of the Revised Code.	286
(16) "Advanced practice registered nurse" means any certified	287
nurse practitioner, clinical nurse specialist, certified	288
registered nurse anesthetist, or certified nurse-midwife who holds	289
a certificate of authority issued by the board of nursing under	290
Chapter 4723. of the Revised Code.	291
(17) "Licensed practical nurse" means any person who is	292

licensed to practice nursing as a licensed practical nurse by the 293
board of nursing pursuant to Chapter 4723. of the Revised Code. 294

(18) "Physician assistant" means any person who ~~holds a valid~~ 295
~~certificate to practice issued pursuant to~~ is licensed as a 296
physician assistant under Chapter 4730. of the Revised Code. 297

(19) "Emergency medical technician-basic," "emergency medical 298
technician-intermediate," and "emergency medical 299
technician-paramedic" means any person who is certified under 300
Chapter 4765. of the Revised Code as an emergency medical 301
technician-basic, emergency medical technician-intermediate, or 302
emergency medical technician-paramedic, whichever is applicable. 303

Sec. 2925.61. (A) As used in this section: 304

(1) "Administer naloxone" means to give naloxone to a person 305
by either of the following routes: 306

(a) Using a device manufactured for the intranasal 307
administration of liquid drugs; 308

(b) Using an autoinjector in a manufactured dosage form. 309

(2) "Law enforcement agency" means a government entity that 310
employs peace officers to perform law enforcement duties. 311

(3) "Licensed health professional" means all of the 312
following: 313

(a) A physician who is authorized under Chapter 4731. of the 314
Revised Code to practice medicine and surgery, osteopathic 315
medicine and surgery, or podiatric medicine and surgery; 316

(b) A physician assistant who is licensed under Chapter 4730. 317
of the Revised Code, holds a ~~certificate to prescribe valid~~ 318
prescriber number issued ~~under Chapter 4730. of the Revised Code~~ 319
by the state medical board, and has been granted 320
physician-delegated prescriptive authority; 321

(c) A clinical nurse specialist, certified nurse-midwife, or 322
certified nurse practitioner who holds a certificate to prescribe 323
issued under section 4723.48 of the Revised Code. 324

(4) "Peace officer" has the same meaning as in section 325
2921.51 of the Revised Code. 326

(B) A family member, friend, or other individual who is in a 327
position to assist an individual who is apparently experiencing or 328
at risk of experiencing an opioid-related overdose, is not subject 329
to criminal prosecution for a violation of section 4731.41 of the 330
Revised Code or criminal prosecution under this chapter if the 331
individual, acting in good faith, does all of the following: 332

(1) Obtains naloxone from a licensed health professional or a 333
prescription for naloxone from a licensed health professional; 334

(2) Administers that naloxone to an individual who is 335
apparently experiencing an opioid-related overdose; 336

(3) Attempts to summon emergency services either immediately 337
before or immediately after administering the naloxone. 338

(C) Division (B) of this section does not apply to a peace 339
officer or to an emergency medical technician-basic, emergency 340
medical technician-intermediate, or emergency medical 341
technician-paramedic, as defined in section 4765.01 of the Revised 342
Code. 343

(D) A peace officer employed by a law enforcement agency is 344
not subject to administrative action, criminal prosecution for a 345
violation of section 4731.41 of the Revised Code, or criminal 346
prosecution under this chapter if the peace officer, acting in 347
good faith, obtains naloxone from the peace officer's law 348
enforcement agency and administers the naloxone to an individual 349
who is apparently experiencing an opioid-related overdose. 350

Sec. 3701.92. As used in sections 3701.921 to 3701.929 of the 351

Revised Code:	352
(A) "Advanced practice registered nurse" has the same meaning as in section 4723.01 of the Revised Code.	353 354
(B) "Patient centered medical home education advisory group" means the entity established under section 3701.924 of the Revised Code.	355 356 357
(C) "Patient centered medical home education program" means the program established under section 3701.921 of the Revised Code and any pilot projects operated pursuant to that section.	358 359 360
(D) "Patient centered medical home education pilot project" means the pilot project established under section 3701.923 of the Revised Code.	361 362 363
(E) "Physician assistant" has the same meaning as in section 4730.01 <u>means any person who is licensed as a physician assistant under Chapter 4730.</u> of the Revised Code.	364 365 366
Sec. 3727.06. (A) As used in this section:	367
(1) "Doctor" means an individual authorized to practice medicine and surgery or osteopathic medicine and surgery.	368 369
(2) "Podiatrist" means an individual authorized to practice podiatric medicine and surgery.	370 371
(B)(1) Only the following may admit a patient to a hospital:	372
(a) A doctor who is a member of the hospital's medical staff;	373
(b) A dentist who is a member of the hospital's medical staff;	374 375
(c) A podiatrist who is a member of the hospital's medical staff;	376 377
(d) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner if all of the following conditions	378 379

are met: 380

(i) The clinical nurse specialist, certified nurse-midwife, 381
or certified nurse practitioner has a standard care arrangement 382
entered into pursuant to section 4723.431 of the Revised Code with 383
a collaborating doctor or podiatrist who is a member of the 384
medical staff; 385

(ii) The patient will be under the medical supervision of the 386
collaborating doctor or podiatrist; 387

(iii) The hospital has granted the clinical nurse specialist, 388
certified nurse-midwife, or certified nurse practitioner admitting 389
privileges and appropriate credentials. 390

(e) A physician assistant if all of the following conditions 391
are met: 392

(i) The physician assistant is listed on a supervision 393
agreement ~~approved~~ entered into under section 4730.19 of the 394
Revised Code for a doctor or podiatrist who is a member of the 395
hospital's medical staff. 396

(ii) The patient will be under the medical supervision of the 397
supervising doctor or podiatrist. 398

(iii) The hospital has granted the physician assistant 399
admitting privileges and appropriate credentials. 400

(2) Prior to admitting a patient, a clinical nurse 401
specialist, certified nurse-midwife, certified nurse practitioner, 402
or physician assistant shall notify the collaborating or 403
supervising doctor or podiatrist of the planned admission. 404

(C) All hospital patients shall be under the medical 405
supervision of a doctor, except that services that may be rendered 406
by a licensed dentist pursuant to Chapter 4715. of the Revised 407
Code provided to patients admitted solely for the purpose of 408
receiving such services shall be under the supervision of the 409

admitting dentist and that services that may be rendered by a 410
podiatrist pursuant to section 4731.51 of the Revised Code 411
provided to patients admitted solely for the purpose of receiving 412
such services shall be under the supervision of the admitting 413
podiatrist. If treatment not within the scope of Chapter 4715. or 414
section 4731.51 of the Revised Code is required at the time of 415
admission by a dentist or podiatrist, or becomes necessary during 416
the course of hospital treatment by a dentist or podiatrist, such 417
treatment shall be under the supervision of a doctor who is a 418
member of the medical staff. It shall be the responsibility of the 419
admitting dentist or podiatrist to make arrangements with a doctor 420
who is a member of the medical staff to be responsible for the 421
patient's treatment outside the scope of Chapter 4715. or section 422
4731.51 of the Revised Code when necessary during the patient's 423
stay in the hospital. 424

Sec. 3729.05. (A)(1) ~~On~~ Except as otherwise provided in this 425
section, on or after the first day of April, but before the first 426
day of May of each year, every person who intends to operate a 427
recreational vehicle park, recreation camp, or combined park-camp 428
shall procure a license to operate the park or camp from the 429
licensor. If the applicable license fee prescribed under section 430
3729.07 of the Revised Code is not received by the licensor by the 431
close of business on the last day of April, the applicant for the 432
license shall pay a penalty equal to twenty-five per cent of the 433
applicable license fee. The penalty shall accompany the license 434
fee. If the last day of April is not a business day, the penalty 435
attaches upon the close of business on the next business day. 436

(2) Every person who intends to operate a temporary park-camp 437
shall obtain a license to operate the temporary park-camp from the 438
licensor at any time before the person begins operation of the 439
temporary park-camp during the calendar year. 440

(3) No recreational vehicle park, recreation camp, combined park-camp, or temporary park-camp shall be maintained or operated in this state without a license. However, no person who neither intends to receive nor receives anything of value arising from the use of, or the sale of goods or services in connection with the use of, a recreational vehicle park, recreation camp, combined park-camp, or temporary park-camp is required to procure a license under this division. If any health hazard exists at such an unlicensed park, camp, or park-camp, the health hazard shall be corrected in a manner consistent with the appropriate rule adopted under division (A) or (B) of section 3729.02 of the Revised Code.

(4) No person who has received a license under division (A)(1) of this section, upon the sale or disposition of the recreational vehicle park, recreation camp, or combined park-camp, may have the license transferred to the new operator. A person shall obtain a separate license to operate each recreational vehicle park, recreation camp, or combined park-camp. No license to operate a temporary park-camp shall be transferred. A person shall obtain a separate license for each temporary park-camp that the person intends to operate, and the license shall be valid for a period of not longer than seven consecutive days. A person who operates a temporary park-camp on a tract of land for more than twenty-one days or parts thereof in a calendar year shall obtain a license to operate a recreational vehicle park, recreation camp, or combined park-camp.

(B)(1) Before a license is initially issued under division (A)(1) of this section and annually thereafter, or more often if necessary, the licensor shall cause each recreational vehicle park, recreation camp, or combined park-camp to be inspected to determine compliance with this chapter and rules adopted under it. A record shall be made of each inspection on a form prescribed by the director of health.

(2) When a license is initially issued under division (A)(2) 473
of this section, and more often if necessary, the licensor shall 474
cause each temporary park-camp to be inspected to determine 475
compliance with this chapter and rules adopted under it during the 476
period that the temporary park-camp is in operation. A record 477
shall be made of each inspection on a form prescribed by the 478
director. 479

(C) Each person applying for an initial license to operate a 480
recreational vehicle park, recreation camp, combined park-camp, or 481
temporary park-camp shall provide acceptable proof to the 482
director, or to the licensor in the case of a temporary park-camp, 483
that adequate fire protection will be provided and that applicable 484
fire codes will be adhered to in the construction and operation of 485
the park, camp, or park-camp. 486

(D) Any person that operates a county or state fair or any 487
independent agricultural society organized pursuant to section 488
1711.02 of the Revised Code that operates a fair shall not be 489
required to obtain a license under this chapter if recreational 490
vehicles, portable camping units, or any combination of them are 491
parked at the site of the fair only during the time of preparation 492
for, operation of, and dismantling of the fair and if the 493
recreational vehicles, portable camping units, or any combination 494
of them belong to participants in the fair. 495

(E) The following entities that operate a fair and that hold 496
a license issued under this chapter are not required to comply 497
with the requirements normally imposed on a licensee under this 498
chapter and rules adopted under it during the time of preparation 499
for, operation of, and dismantling of the fair: 500

(1) A county agricultural society organized pursuant to 501
section 1711.01 of the Revised Code; 502

(2) An independent agricultural society organized pursuant to 503

section 1711.02 of the Revised Code; 504

(3) The Ohio expositions commission. 505

(F) A motorsports park is exempt from the license 506
requirements established in divisions (A)(1) and (2) of this 507
section if the motorsports park does both of the following: 508

(1) Holds at least one annual event sanctioned by the 509
national association for stock car auto racing or the national hot 510
rod association during a motor sports racing event; 511

(2) Provides parking for recreational vehicles, dependent 512
recreational vehicles, and portable camping units that belong to 513
participants in that event. 514

The exemption established in this division applies to 515
participant-only areas during the time of preparation for and 516
operation of the event. 517

(G) A person subject to this chapter or rules adopted under 518
it may apply to the director for a waiver of or variance from a 519
provision of this chapter or rules adopted under it. The director 520
may grant a waiver or variance if the person demonstrates, to the 521
satisfaction of the director, that the waiver or variance will not 522
result in any adverse effect on the public health and safety. The 523
director shall adopt rules in accordance with Chapter 119. of the 524
Revised Code establishing requirements and procedures governing 525
the application for and granting of a waiver or variance under 526
this division. 527

Sec. 4503.44. (A) As used in this section and in section 528
4511.69 of the Revised Code: 529

(1) "Person with a disability that limits or impairs the 530
ability to walk" means any person who, as determined by a health 531
care provider, meets any of the following criteria: 532

(a) Cannot walk two hundred feet without stopping to rest; 533

(b) Cannot walk without the use of, or assistance from, a 534
brace, cane, crutch, another person, prosthetic device, 535
wheelchair, or other assistive device; 536

(c) Is restricted by a lung disease to such an extent that 537
the person's forced (respiratory) expiratory volume for one 538
second, when measured by spirometry, is less than one liter, or 539
the arterial oxygen tension is less than sixty millimeters of 540
mercury on room air at rest; 541

(d) Uses portable oxygen; 542

(e) Has a cardiac condition to the extent that the person's 543
functional limitations are classified in severity as class III or 544
class IV according to standards set by the American heart 545
association; 546

(f) Is severely limited in the ability to walk due to an 547
arthritic, neurological, or orthopedic condition; 548

(g) Is blind, legally blind, or severely visually impaired. 549

(2) "Organization" means any private organization or 550
corporation, or any governmental board, agency, department, 551
division, or office, that, as part of its business or program, 552
transports persons with disabilities that limit or impair the 553
ability to walk on a regular basis in a motor vehicle that has not 554
been altered for the purpose of providing it with special 555
equipment for use by persons with disabilities. This definition 556
does not apply to division (I) of this section. 557

(3) "Health care provider" means a physician, physician 558
assistant, advanced practice registered nurse, optometrist, or 559
chiropractor as defined in this section except that an optometrist 560
shall only make determinations as to division (A)(1)(g) of this 561
section. 562

(4) "Physician" means a person licensed to practice medicine 563

or surgery or osteopathic medicine and surgery under Chapter 4731. 564
of the Revised Code. 565

(5) "Chiropractor" means a person licensed to practice 566
chiropractic under Chapter 4734. of the Revised Code. 567

(6) "Advanced practice registered nurse" means a certified 568
nurse practitioner, clinical nurse specialist, certified 569
registered nurse anesthetist, or certified nurse-midwife who holds 570
a certificate of authority issued by the board of nursing under 571
Chapter 4723. of the Revised Code. 572

(7) "Physician assistant" means a person who ~~holds a~~ 573
~~certificate to practice as a physician assistant issued is~~ 574
licensed as a physician assistant under Chapter 4730. of the 575
Revised Code. 576

(8) "Optometrist" means a person licensed to engage in the 577
practice of optometry under Chapter 4725. of the Revised Code. 578

(B)(1) An organization, or a person with a disability that 579
limits or impairs the ability to walk, may apply for the 580
registration of any motor vehicle the organization or person owns 581
or leases. When a motor vehicle has been altered for the purpose 582
of providing it with special equipment for a person with a 583
disability that limits or impairs the ability to walk, but is 584
owned or leased by someone other than such a person, the owner or 585
lessee may apply to the registrar or a deputy registrar for 586
registration under this section. The application for registration 587
of a motor vehicle owned or leased by a person with a disability 588
that limits or impairs the ability to walk shall be accompanied by 589
a signed statement from the applicant's health care provider 590
certifying that the applicant meets at least one of the criteria 591
contained in division (A)(1) of this section and that the 592
disability is expected to continue for more than six consecutive 593
months. The application for registration of a motor vehicle that 594

has been altered for the purpose of providing it with special 595
equipment for a person with a disability that limits or impairs 596
the ability to walk but is owned by someone other than such a 597
person shall be accompanied by such documentary evidence of 598
vehicle alterations as the registrar may require by rule. 599

(2) When an organization, a person with a disability that 600
limits or impairs the ability to walk, or a person who does not 601
have a disability that limits or impairs the ability to walk but 602
owns a motor vehicle that has been altered for the purpose of 603
providing it with special equipment for a person with a disability 604
that limits or impairs the ability to walk first submits an 605
application for registration of a motor vehicle under this section 606
and every fifth year thereafter, the organization or person shall 607
submit a signed statement from the applicant's health care 608
provider, a completed application, and any required documentary 609
evidence of vehicle alterations as provided in division (B)(1) of 610
this section, and also a power of attorney from the owner of the 611
motor vehicle if the applicant leases the vehicle. Upon submission 612
of these items, the registrar or deputy registrar shall issue to 613
the applicant appropriate vehicle registration and a set of 614
license plates and validation stickers, or validation stickers 615
alone when required by section 4503.191 of the Revised Code. In 616
addition to the letters and numbers ordinarily inscribed thereon, 617
the license plates shall be imprinted with the international 618
symbol of access. The license plates and validation stickers shall 619
be issued upon payment of the regular license fee as prescribed 620
under section 4503.04 of the Revised Code and any motor vehicle 621
tax levied under Chapter 4504. of the Revised Code, and the 622
payment of a service fee equal to the amount specified in division 623
(D) or (G) of section 4503.10 of the Revised Code. 624

(C)(1) A person with a disability that limits or impairs the 625
ability to walk may apply to the registrar of motor vehicles for a 626

removable windshield placard by completing and signing an 627
application provided by the registrar. The person shall include 628
with the application a prescription from the person's health care 629
provider prescribing such a placard for the person based upon a 630
determination that the person meets at least one of the criteria 631
contained in division (A)(1) of this section. The health care 632
provider shall state on the prescription the length of time the 633
health care provider expects the applicant to have the disability 634
that limits or impairs the person's ability to walk. 635

In addition to one placard or one or more sets of license 636
plates, a person with a disability that limits or impairs the 637
ability to walk is entitled to one additional placard, but only if 638
the person applies separately for the additional placard, states 639
the reasons why the additional placard is needed, and the 640
registrar, in the registrar's discretion determines that good and 641
justifiable cause exists to approve the request for the additional 642
placard. 643

(2) An organization may apply to the registrar of motor 644
vehicles for a removable windshield placard by completing and 645
signing an application provided by the registrar. The organization 646
shall comply with any procedures the registrar establishes by 647
rule. The organization shall include with the application 648
documentary evidence that the registrar requires by rule showing 649
that the organization regularly transports persons with 650
disabilities that limit or impair the ability to walk. 651

(3) Upon receipt of a completed and signed application for a 652
removable windshield placard, the accompanying documents required 653
under division (C)(1) or (2) of this section, and payment of a 654
service fee equal to the amount specified in division (D) or (G) 655
of section 4503.10 of the Revised Code, the registrar or deputy 656
registrar shall issue to the applicant a removable windshield 657
placard, which shall bear the date of expiration on both sides of 658

the placard and shall be valid until expired, revoked, or 659
surrendered. Every removable windshield placard expires as 660
described in division (C)(4) of this section, but in no case shall 661
a removable windshield placard be valid for a period of less than 662
sixty days. Removable windshield placards shall be renewable upon 663
application as provided in division (C)(1) or (2) of this section 664
and upon payment of a service fee equal to the amount specified in 665
division (D) or (G) of section 4503.10 of the Revised Code for the 666
renewal of a removable windshield placard. The registrar shall 667
provide the application form and shall determine the information 668
to be included thereon. The registrar also shall determine the 669
form and size of the removable windshield placard, the material of 670
which it is to be made, and any other information to be included 671
thereon, and shall adopt rules relating to the issuance, 672
expiration, revocation, surrender, and proper display of such 673
placards. Any placard issued after October 14, 1999, shall be 674
manufactured in a manner that allows the expiration date of the 675
placard to be indicated on it through the punching, drilling, 676
boring, or creation by any other means of holes in the placard. 677

(4) At the time a removable windshield placard is issued to a 678
person with a disability that limits or impairs the ability to 679
walk, the registrar or deputy registrar shall enter into the 680
records of the bureau of motor vehicles the last date on which the 681
person will have that disability, as indicated on the accompanying 682
prescription. Not less than thirty days prior to that date and all 683
removable windshield placard renewal dates, the bureau shall send 684
a renewal notice to that person at the person's last known address 685
as shown in the records of the bureau, informing the person that 686
the person's removable windshield placard will expire on the 687
indicated date not to exceed five years from the date of issuance, 688
and that the person is required to renew the placard by submitting 689
to the registrar or a deputy registrar another prescription, as 690
described in division (C)(1) or (2) of this section, and by 691

complying with the renewal provisions prescribed in division 692
(C)(3) of this section. If such a prescription is not received by 693
the registrar or a deputy registrar by that date, the placard 694
issued to that person expires and no longer is valid, and this 695
fact shall be recorded in the records of the bureau. 696

(5) At least once every year, on a date determined by the 697
registrar, the bureau shall examine the records of the office of 698
vital statistics, located within the department of health, that 699
pertain to deceased persons, and also the bureau's records of all 700
persons who have been issued removable windshield placards and 701
temporary removable windshield placards. If the records of the 702
office of vital statistics indicate that a person to whom a 703
removable windshield placard or temporary removable windshield 704
placard has been issued is deceased, the bureau shall cancel that 705
placard, and note the cancellation in its records. 706

The office of vital statistics shall make available to the 707
bureau all information necessary to enable the bureau to comply 708
with division (C)(5) of this section. 709

(6) Nothing in this section shall be construed to require a 710
person or organization to apply for a removable windshield placard 711
or special license plates if the special license plates issued to 712
the person or organization under prior law have not expired or 713
been surrendered or revoked. 714

(D)(1)(a) A person with a disability that limits or impairs 715
the ability to walk may apply to the registrar or a deputy 716
registrar for a temporary removable windshield placard. The 717
application for a temporary removable windshield placard shall be 718
accompanied by a prescription from the applicant's health care 719
provider prescribing such a placard for the applicant, provided 720
that the applicant meets at least one of the criteria contained in 721
division (A)(1) of this section and that the disability is 722
expected to continue for six consecutive months or less. The 723

health care provider shall state on the prescription the length of 724
time the health care provider expects the applicant to have the 725
disability that limits or impairs the applicant's ability to walk, 726
which cannot exceed six months from the date of the prescription. 727
Upon receipt of an application for a temporary removable 728
windshield placard, presentation of the prescription from the 729
applicant's health care provider, and payment of a service fee 730
equal to the amount specified in division (D) or (G) of section 731
4503.10 of the Revised Code, the registrar or deputy registrar 732
shall issue to the applicant a temporary removable windshield 733
placard. 734

(b) Any active-duty member of the armed forces of the United 735
States, including the reserve components of the armed forces and 736
the national guard, who has an illness or injury that limits or 737
impairs the ability to walk may apply to the registrar or a deputy 738
registrar for a temporary removable windshield placard. With the 739
application, the person shall present evidence of the person's 740
active-duty status and the illness or injury. Evidence of the 741
illness or injury may include a current department of defense 742
convalescent leave statement, any department of defense document 743
indicating that the person currently has an ill or injured 744
casualty status or has limited duties, or a prescription from any 745
health care provider prescribing the placard for the applicant. 746
Upon receipt of the application and the necessary evidence, the 747
registrar or deputy registrar shall issue the applicant the 748
temporary removable windshield placard without the payment of any 749
service fee. 750

(2) The temporary removable windshield placard shall be of 751
the same size and form as the removable windshield placard, shall 752
be printed in white on a red-colored background, and shall bear 753
the word "temporary" in letters of such size as the registrar 754
shall prescribe. A temporary removable windshield placard also 755

shall bear the date of expiration on the front and back of the 756
placard, and shall be valid until expired, surrendered, or 757
revoked, but in no case shall such a placard be valid for a period 758
of less than sixty days. The registrar shall provide the 759
application form and shall determine the information to be 760
included on it, provided that the registrar shall not require a 761
health care provider's prescription or certification for a person 762
applying under division (D)(1)(b) of this section. The registrar 763
also shall determine the material of which the temporary removable 764
windshield placard is to be made and any other information to be 765
included on the placard and shall adopt rules relating to the 766
issuance, expiration, surrender, revocation, and proper display of 767
those placards. Any temporary removable windshield placard issued 768
after October 14, 1999, shall be manufactured in a manner that 769
allows for the expiration date of the placard to be indicated on 770
it through the punching, drilling, boring, or creation by any 771
other means of holes in the placard. 772

(E) If an applicant for a removable windshield placard is a 773
veteran of the armed forces of the United States whose disability, 774
as defined in division (A)(1) of this section, is 775
service-connected, the registrar or deputy registrar, upon receipt 776
of the application, presentation of a signed statement from the 777
applicant's health care provider certifying the applicant's 778
disability, and presentation of such documentary evidence from the 779
department of veterans affairs that the disability of the 780
applicant meets at least one of the criteria identified in 781
division (A)(1) of this section and is service-connected as the 782
registrar may require by rule, but without the payment of any 783
service fee, shall issue the applicant a removable windshield 784
placard that is valid until expired, surrendered, or revoked. 785

(F) Upon a conviction of a violation of division (H) or (I) 786
of this section, the court shall report the conviction, and send 787

the placard, if available, to the registrar, who thereupon shall 788
revoke the privilege of using the placard and send notice in 789
writing to the placardholder at that holder's last known address 790
as shown in the records of the bureau, and the placardholder shall 791
return the placard if not previously surrendered to the court, to 792
the registrar within ten days following mailing of the notice. 793

Whenever a person to whom a removable windshield placard has 794
been issued moves to another state, the person shall surrender the 795
placard to the registrar; and whenever an organization to which a 796
placard has been issued changes its place of operation to another 797
state, the organization shall surrender the placard to the 798
registrar. 799

(G) Subject to division (F) of section 4511.69 of the Revised 800
Code, the operator of a motor vehicle displaying a removable 801
windshield placard, temporary removable windshield placard, or the 802
special license plates authorized by this section is entitled to 803
park the motor vehicle in any special parking location reserved 804
for persons with disabilities that limit or impair the ability to 805
walk, also known as handicapped parking spaces or disability 806
parking spaces. 807

(H) No person or organization that is not eligible for the 808
issuance of license plates or any placard under this section shall 809
willfully and falsely represent that the person or organization is 810
so eligible. 811

No person or organization shall display license plates issued 812
under this section unless the license plates have been issued for 813
the vehicle on which they are displayed and are valid. 814

(I) No person or organization to which a removable windshield 815
placard or temporary removable windshield placard is issued shall 816
do either of the following: 817

(1) Display or permit the display of the placard on any motor 818

vehicle when having reasonable cause to believe the motor vehicle 819
is being used in connection with an activity that does not include 820
providing transportation for persons with disabilities that limit 821
or impair the ability to walk; 822

(2) Refuse to return or surrender the placard, when required. 823

(J) If a removable windshield placard, temporary removable 824
windshield placard, or parking card is lost, destroyed, or 825
mutilated, the placardholder or cardholder may obtain a duplicate 826
by doing both of the following: 827

(1) Furnishing suitable proof of the loss, destruction, or 828
mutilation to the registrar; 829

(2) Paying a service fee equal to the amount specified in 830
division (D) or (G) of section 4503.10 of the Revised Code. 831

Any placardholder or cardholder who loses a placard or card 832
and, after obtaining a duplicate, finds the original, immediately 833
shall surrender the original placard or card to the registrar. 834

(K)(1) The registrar shall pay all fees received under this 835
section for the issuance of removable windshield placards or 836
temporary removable windshield placards or duplicate removable 837
windshield placards or cards into the state treasury to the credit 838
of the state bureau of motor vehicles fund created in section 839
4501.25 of the Revised Code. 840

(2) In addition to the fees collected under this section, the 841
registrar or deputy registrar shall ask each person applying for a 842
removable windshield placard or temporary removable windshield 843
placard or duplicate removable windshield placard or license plate 844
issued under this section, whether the person wishes to make a 845
two-dollar voluntary contribution to support rehabilitation 846
employment services. The registrar shall transmit the 847
contributions received under this division to the treasurer of 848
state for deposit into the rehabilitation employment fund, which 849

is hereby created in the state treasury. A deputy registrar shall 850
transmit the contributions received under this division to the 851
registrar in the time and manner prescribed by the registrar. The 852
contributions in the fund shall be used by the opportunities for 853
Ohioans with disabilities agency to purchase services related to 854
vocational evaluation, work adjustment, personal adjustment, job 855
placement, job coaching, and community-based assessment from 856
accredited community rehabilitation program facilities. 857

(L) For purposes of enforcing this section, every peace 858
officer is deemed to be an agent of the registrar. Any peace 859
officer or any authorized employee of the bureau of motor vehicles 860
who, in the performance of duties authorized by law, becomes aware 861
of a person whose placard or parking card has been revoked 862
pursuant to this section, may confiscate that placard or parking 863
card and return it to the registrar. The registrar shall prescribe 864
any forms used by law enforcement agencies in administering this 865
section. 866

No peace officer, law enforcement agency employing a peace 867
officer, or political subdivision or governmental agency employing 868
a peace officer, and no employee of the bureau is liable in a 869
civil action for damages or loss to persons arising out of the 870
performance of any duty required or authorized by this section. As 871
used in this division, "peace officer" has the same meaning as in 872
division (B) of section 2935.01 of the Revised Code. 873

(M) All applications for registration of motor vehicles, 874
removable windshield placards, and temporary removable windshield 875
placards issued under this section, all renewal notices for such 876
items, and all other publications issued by the bureau that relate 877
to this section shall set forth the criminal penalties that may be 878
imposed upon a person who violates any provision relating to 879
special license plates issued under this section, the parking of 880
vehicles displaying such license plates, and the issuance, 881

procurement, use, and display of removable windshield placards and 882
temporary removable windshield placards issued under this section. 883

(N) Whoever violates this section is guilty of a misdemeanor 884
of the fourth degree. 885

Sec. 4723.01. As used in this chapter: 886

(A) "Registered nurse" means an individual who holds a 887
current, valid license issued under this chapter that authorizes 888
the practice of nursing as a registered nurse. 889

(B) "Practice of nursing as a registered nurse" means 890
providing to individuals and groups nursing care requiring 891
specialized knowledge, judgment, and skill derived from the 892
principles of biological, physical, behavioral, social, and 893
nursing sciences. Such nursing care includes: 894

(1) Identifying patterns of human responses to actual or 895
potential health problems amenable to a nursing regimen; 896

(2) Executing a nursing regimen through the selection, 897
performance, management, and evaluation of nursing actions; 898

(3) Assessing health status for the purpose of providing 899
nursing care; 900

(4) Providing health counseling and health teaching; 901

(5) Administering medications, treatments, and executing 902
regimens authorized by an individual who is authorized to practice 903
in this state and is acting within the course of the individual's 904
professional practice; 905

(6) Teaching, administering, supervising, delegating, and 906
evaluating nursing practice. 907

(C) "Nursing regimen" may include preventative, restorative, 908
and health-promotion activities. 909

(D) "Assessing health status" means the collection of data 910

through nursing assessment techniques, which may include 911
interviews, observation, and physical evaluations for the purpose 912
of providing nursing care. 913

(E) "Licensed practical nurse" means an individual who holds 914
a current, valid license issued under this chapter that authorizes 915
the practice of nursing as a licensed practical nurse. 916

(F) "The practice of nursing as a licensed practical nurse" 917
means providing to individuals and groups nursing care requiring 918
the application of basic knowledge of the biological, physical, 919
behavioral, social, and nursing sciences at the direction of any 920
of the following who is authorized to practice in this state: a 921
~~licensed~~ physician, physician assistant, dentist, podiatrist, 922
optometrist, chiropractor, or registered nurse. Such nursing care 923
includes: 924

(1) Observation, patient teaching, and care in a diversity of 925
health care settings; 926

(2) Contributions to the planning, implementation, and 927
evaluation of nursing; 928

(3) Administration of medications and treatments authorized 929
by an individual who is authorized to practice in this state and 930
is acting within the course of the individual's professional 931
practice on the condition that the licensed practical nurse is 932
authorized under section 4723.17 of the Revised Code to administer 933
medications; 934

(4) Administration to an adult of intravenous therapy 935
authorized by an individual who is authorized to practice in this 936
state and is acting within the course of the individual's 937
professional practice, on the condition that the licensed 938
practical nurse is authorized under section 4723.18 or 4723.181 of 939
the Revised Code to perform intravenous therapy and performs 940
intravenous therapy only in accordance with those sections; 941

(5) Delegation of nursing tasks as directed by a registered nurse;	942 943
(6) Teaching nursing tasks to licensed practical nurses and individuals to whom the licensed practical nurse is authorized to delegate nursing tasks as directed by a registered nurse.	944 945 946
(G) "Certified registered nurse anesthetist" means a registered nurse who holds a valid certificate of authority issued under this chapter that authorizes the practice of nursing as a certified registered nurse anesthetist in accordance with section 4723.43 of the Revised Code and rules adopted by the board of nursing.	947 948 949 950 951 952
(H) "Clinical nurse specialist" means a registered nurse who holds a valid certificate of authority issued under this chapter that authorizes the practice of nursing as a clinical nurse specialist in accordance with section 4723.43 of the Revised Code and rules adopted by the board of nursing.	953 954 955 956 957
(I) "Certified nurse-midwife" means a registered nurse who holds a valid certificate of authority issued under this chapter that authorizes the practice of nursing as a certified nurse-midwife in accordance with section 4723.43 of the Revised Code and rules adopted by the board of nursing.	958 959 960 961 962
(J) "Certified nurse practitioner" means a registered nurse who holds a valid certificate of authority issued under this chapter that authorizes the practice of nursing as a certified nurse practitioner in accordance with section 4723.43 of the Revised Code and rules adopted by the board of nursing.	963 964 965 966 967
(K) "Physician" means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.	968 969 970
(L) "Collaboration" or "collaborating" means the following:	971

(1) In the case of a clinical nurse specialist, except as 972
provided in division (L)(3) of this section, or a certified nurse 973
practitioner, that one or more podiatrists acting within the scope 974
of practice of podiatry in accordance with section 4731.51 of the 975
Revised Code and with whom the nurse has entered into a standard 976
care arrangement or one or more physicians with whom the nurse has 977
entered into a standard care arrangement are continuously 978
available to communicate with the clinical nurse specialist or 979
certified nurse practitioner either in person or by radio, 980
telephone, or other form of telecommunication; 981

(2) In the case of a certified nurse-midwife, that one or 982
more physicians with whom the certified nurse-midwife has entered 983
into a standard care arrangement are continuously available to 984
communicate with the certified nurse-midwife either in person or 985
by radio, telephone, or other form of telecommunication; 986

(3) In the case of a clinical nurse specialist who practices 987
the nursing specialty of mental health or psychiatric mental 988
health without being authorized to prescribe drugs and therapeutic 989
devices, that one or more physicians are continuously available to 990
communicate with the nurse either in person or by radio, 991
telephone, or other form of telecommunication. 992

(M) "Supervision," as it pertains to a certified registered 993
nurse anesthetist, means that the certified registered nurse 994
anesthetist is under the direction of a podiatrist acting within 995
the podiatrist's scope of practice in accordance with section 996
4731.51 of the Revised Code, a dentist acting within the dentist's 997
scope of practice in accordance with Chapter 4715. of the Revised 998
Code, or a physician, and, when administering anesthesia, the 999
certified registered nurse anesthetist is in the immediate 1000
presence of the podiatrist, dentist, or physician. 1001

(N) "Standard care arrangement" means a written, formal guide 1002
for planning and evaluating a patient's health care that is 1003

developed by one or more collaborating physicians or podiatrists 1004
and a clinical nurse specialist, certified nurse-midwife, or 1005
certified nurse practitioner and meets the requirements of section 1006
4723.431 of the Revised Code. 1007

(O) "Advanced practice registered nurse" means a certified 1008
registered nurse anesthetist, clinical nurse specialist, certified 1009
nurse-midwife, or certified nurse practitioner. 1010

(P) "Dialysis care" means the care and procedures that a 1011
dialysis technician or dialysis technician intern is authorized to 1012
provide and perform, as specified in section 4723.72 of the 1013
Revised Code. 1014

(Q) "Dialysis technician" means an individual who holds a 1015
current, valid certificate to practice as a dialysis technician 1016
issued under section 4723.75 of the Revised Code. 1017

(R) "Dialysis technician intern" means an individual who 1018
holds a current, valid certificate to practice as a dialysis 1019
technician intern issued under section 4723.75 of the Revised 1020
Code. 1021

(S) "Certified community health worker" means an individual 1022
who holds a current, valid certificate as a community health 1023
worker issued under section 4723.85 of the Revised Code. 1024

(T) "Medication aide" means an individual who holds a 1025
current, valid certificate issued under this chapter that 1026
authorizes the individual to administer medication in accordance 1027
with section 4723.67 of the Revised Code. 1028

Sec. 4723.06. (A) The board of nursing shall: 1029

(1) Administer and enforce the provisions of this chapter, 1030
including the taking of disciplinary action for violations of 1031
section 4723.28 of the Revised Code, any other provisions of this 1032
chapter, or rules adopted under this chapter; 1033

(2) Develop criteria that an applicant must meet to be 1034
eligible to sit for the examination for licensure to practice as a 1035
registered nurse or as a licensed practical nurse; 1036

(3) Issue and renew nursing licenses, dialysis technician 1037
certificates, and community health worker certificates, as 1038
provided in this chapter; 1039

(4) Define the minimum standards for educational programs of 1040
the schools of registered nursing and schools of practical nursing 1041
in this state; 1042

(5) Survey, inspect, and grant full approval to prelicensure 1043
nursing education programs in this state that meet the standards 1044
established by rules adopted under section 4723.07 of the Revised 1045
Code. Prelicensure nursing education programs include, but are not 1046
limited to, diploma, associate degree, baccalaureate degree, 1047
master's degree, and doctor of nursing programs leading to initial 1048
licensure to practice nursing as a registered nurse and practical 1049
nurse programs leading to initial licensure to practice nursing as 1050
a licensed practical nurse. 1051

(6) Grant conditional approval, by a vote of a quorum of the 1052
board, to a new prelicensure nursing education program or a 1053
program that is being reestablished after having ceased to 1054
operate, if the program meets and maintains the minimum standards 1055
of the board established by rules adopted under section 4723.07 of 1056
the Revised Code. If the board does not grant conditional 1057
approval, it shall hold an adjudication under Chapter 119. of the 1058
Revised Code to consider conditional approval of the program. If 1059
the board grants conditional approval, at the first meeting 1060
following completion of the survey process required by division 1061
(A)(5) of this section, the board shall determine whether to grant 1062
full approval to the program. If the board does not grant full 1063
approval or if it appears that the program has failed to meet and 1064
maintain standards established by rules adopted under section 1065

4723.07 of the Revised Code, the board shall hold an adjudication 1066
under Chapter 119. of the Revised Code to consider the program. 1067
Based on results of the adjudication, the board may continue or 1068
withdraw conditional approval, or grant full approval. 1069

(7) Place on provisional approval, for a period of time 1070
specified by the board, a program that has ceased to meet and 1071
maintain the minimum standards of the board established by rules 1072
adopted under section 4723.07 of the Revised Code. Prior to or at 1073
the end of the period, the board shall reconsider whether the 1074
program meets the standards and shall grant full approval if it 1075
does. If it does not, the board may withdraw approval, pursuant to 1076
an adjudication under Chapter 119. of the Revised Code. 1077

(8) Approve continuing education programs and courses under 1078
standards established in rules adopted under sections 4723.07, 1079
4723.69, 4723.79, and 4723.88 of the Revised Code; 1080

(9) Establish a program for monitoring chemical dependency in 1081
accordance with section 4723.35 of the Revised Code; 1082

(10) Establish the practice intervention and improvement 1083
program in accordance with section 4723.282 of the Revised Code; 1084

(11) Issue and renew certificates of authority to practice 1085
nursing as a certified registered nurse anesthetist, clinical 1086
nurse specialist, certified nurse-midwife, or certified nurse 1087
practitioner; 1088

(12) Approve under section 4723.46 of the Revised Code 1089
national certifying organizations for examination and 1090
certification of certified registered nurse anesthetists, clinical 1091
nurse specialists, certified nurse-midwives, or certified nurse 1092
practitioners; 1093

(13) Issue and renew certificates to prescribe in accordance 1094
with sections 4723.48 and 4723.486 of the Revised Code; 1095

(14) Grant approval to the planned classroom and clinical	1096
<u>course of study in advanced pharmacology and related topics</u>	1097
required by section 4723.482 of the Revised Code to be eligible	1098
for a certificate to prescribe;	1099
(15) Make an annual edition of the formulary established in	1100
rules adopted under section 4723.50 of the Revised Code available	1101
to the public either in printed form or by electronic means and,	1102
as soon as possible after any revision of the formulary becomes	1103
effective, make the revision available to the public in printed	1104
form or by electronic means;	1105
(16) Provide guidance and make recommendations to the general	1106
assembly, the governor, state agencies, and the federal government	1107
with respect to the regulation of the practice of nursing and the	1108
enforcement of this chapter;	1109
(17) Make an annual report to the governor, which shall be	1110
open for public inspection;	1111
(18) Maintain and have open for public inspection the	1112
following records:	1113
(a) A record of all its meetings and proceedings;	1114
(b) A record of all applicants for, and holders of, licenses	1115
and certificates issued by the board under this chapter or in	1116
accordance with rules adopted under this chapter. The record shall	1117
be maintained in a format determined by the board.	1118
(c) A list of education and training programs approved by the	1119
board.	1120
(19) Deny approval to a person who submits or causes to be	1121
submitted false, misleading, or deceptive statements, information,	1122
or documentation to the board in the process of applying for	1123
approval of a new education or training program. If the board	1124
proposes to deny approval of a new education or training program,	1125

it shall do so pursuant to an adjudication conducted under Chapter 1126
119. of the Revised Code. 1127

(B) The board may fulfill the requirement of division (A)(8) 1128
of this section by authorizing persons who meet the standards 1129
established in rules adopted under section 4723.07 of the Revised 1130
Code to approve continuing education programs and courses. Persons 1131
so authorized shall approve continuing education programs and 1132
courses in accordance with standards established in rules adopted 1133
under section 4723.07 of the Revised Code. 1134

Persons seeking authorization to approve continuing education 1135
programs and courses shall apply to the board and pay the 1136
appropriate fee established under section 4723.08 of the Revised 1137
Code. Authorizations to approve continuing education programs and 1138
courses shall expire, and may be renewed according to the schedule 1139
established in rules adopted under section 4723.07 of the Revised 1140
Code. 1141

In addition to approving continuing education programs under 1142
division (A)(8) of this section, the board may sponsor continuing 1143
education activities that are directly related to the statutes and 1144
rules the board enforces. 1145

Sec. 4723.07. In accordance with Chapter 119. of the Revised 1146
Code, the board of nursing shall adopt and may amend and rescind 1147
rules that establish all of the following: 1148

(A) Provisions for the board's government and control of its 1149
actions and business affairs; 1150

(B) Minimum standards for nursing education programs that 1151
prepare graduates to be licensed under this chapter and procedures 1152
for granting, renewing, and withdrawing approval of those 1153
programs; 1154

(C) Criteria that applicants for licensure must meet to be 1155

eligible to take examinations for licensure;	1156
(D) Standards and procedures for renewal of the licenses and certificates issued by the board;	1157 1158
(E) Standards for approval of continuing nursing education programs and courses for registered nurses, licensed practical nurses, certified registered nurse anesthetists, clinical nurse specialists, certified nurse-midwives, and certified nurse practitioners. The standards may provide for approval of continuing nursing education programs and courses that have been approved by other state boards of nursing or by national accreditation systems for nursing, including, but not limited to, the American nurses' credentialing center and the national association for practical nurse education and service.	1159 1160 1161 1162 1163 1164 1165 1166 1167 1168
(F) Standards that persons must meet to be authorized by the board to approve continuing education programs and courses and a schedule by which that authorization expires and may be renewed;	1169 1170 1171
(G) Requirements, including continuing education requirements, for reactivating inactive licenses or certificates, and for reinstating licenses or certificates that have lapsed;	1172 1173 1174
(H) Conditions that may be imposed for reinstatement of a license or certificate following action taken under section 3123.47, 4723.28, 4723.281, 4723.652, or 4723.86 of the Revised Code resulting in a license or certificate suspension;	1175 1176 1177 1178
(I) Requirements for board approval of courses in medication administration by licensed practical nurses;	1179 1180
(J) Criteria for evaluating the qualifications of an applicant for a license to practice nursing as a registered nurse, a license to practice nursing as a licensed practical nurse, or a certificate of authority issued under division (B) of section 4723.41 of the Revised Code for the purpose of issuing the license or certificate by the board's endorsement of the applicant's	1181 1182 1183 1184 1185 1186

authority to practice issued by the licensing agency of another	1187
state;	1188
(K) Universal and standard precautions that shall be used by	1189
each licensee or certificate holder. The rules shall define and	1190
establish requirements for universal and standard precautions that	1191
include the following:	1192
(1) Appropriate use of hand washing;	1193
(2) Disinfection and sterilization of equipment;	1194
(3) Handling and disposal of needles and other sharp	1195
instruments;	1196
(4) Wearing and disposal of gloves and other protective	1197
garments and devices.	1198
(L) Standards and procedures for approving certificates of	1199
authority to practice nursing as a certified registered nurse	1200
anesthetist, clinical nurse specialist, certified nurse-midwife,	1201
or certified nurse practitioner, and for renewal of those	1202
certificates;	1203
(M) Quality assurance standards for certified registered	1204
nurse anesthetists, clinical nurse specialists, certified	1205
nurse-midwives, or certified nurse practitioners;	1206
(N) Additional criteria for the standard care arrangement	1207
required by section 4723.431 of the Revised Code entered into by a	1208
clinical nurse specialist, certified nurse-midwife, or certified	1209
nurse practitioner and the nurse's collaborating physician or	1210
podiatrist;	1211
(O) Continuing education standards for clinical nurse	1212
specialists who were issued a certificate of authority to practice	1213
as a clinical nurse specialist under division (C) of section	1214
4723.41 of the Revised Code as that division existed at any time	1215
before the effective date of this amendment <u>March 20, 2013</u> ;	1216

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

(O) Standards and procedures for delegation under division (C) of section 4723.48 of the Revised Code of the authority to administer drugs.

The board may adopt other rules necessary to carry out the provisions of this chapter. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

Sec. 4723.18. (A) The board of nursing shall authorize a licensed practical nurse to administer to an adult intravenous therapy if the nurse supplies evidence satisfactory to the board that all of the following are the case:

(1) The nurse holds a current, valid license issued under this chapter to practice nursing as a licensed practical nurse.

(2) The nurse has been authorized under section ~~4723.18~~ 4723.17 of the Revised Code to administer medications.

(3) The nurse successfully completed a course of study in the safe performance of intravenous therapy approved by the board pursuant to section 4723.19 of the Revised Code or by an agency in another jurisdiction that regulates the practice of nursing and has requirements for intravenous therapy course approval that are substantially similar to the requirements in division (B) of section 4723.19 of the Revised Code, as determined by the board.

(4) The nurse has successfully completed a minimum of forty hours of training that includes all of the following:

(a) The curriculum established by rules adopted by the board;

(b) Training in the anatomy and physiology of the cardiovascular system, signs and symptoms of local and systemic

complications in the administration of fluids and antibiotic	1247
additives, and guidelines for management of these complications;	1248
(c) Any other training or instruction the board considers	1249
appropriate;	1250
(d) A testing component that requires the nurse to perform a	1251
successful demonstration of the intravenous procedures, including	1252
all skills needed to perform them safely.	1253
(B) Except as provided in section 4723.181 of the Revised	1254
Code and subject to the restrictions in division (D) of this	1255
section, a licensed practical nurse may perform intravenous	1256
therapy on an adult patient only if authorized by the board	1257
pursuant to division (A) of this section and only at the direction	1258
of one of the following:	1259
(1) A licensed physician, <u>physician assistant</u> , dentist,	1260
optometrist, or podiatrist who <u>is authorized to practice in this</u>	1261
<u>state and</u> , except as provided in division (C)(2) of this section,	1262
is present and readily available at the facility where the	1263
intravenous therapy procedure is performed;	1264
(2) A registered nurse in accordance with division (C) of	1265
this section.	1266
(C)(1) Except as provided in division (C)(2) of this section	1267
and section 4723.181 of the Revised Code, when a licensed	1268
practical nurse authorized by the board to perform intravenous	1269
therapy performs an intravenous therapy procedure at the direction	1270
of a registered nurse, the registered nurse or another registered	1271
nurse shall be readily available at the site where the intravenous	1272
therapy is performed, and before the licensed practical nurse	1273
initiates the intravenous therapy, the registered nurse shall	1274
personally perform an on-site assessment of the adult patient who	1275
is to receive the intravenous therapy.	1276
(2) When a licensed practical nurse authorized by the board	1277

to perform intravenous therapy performs an intravenous therapy 1278
procedure in a home as defined in section 3721.10 of the Revised 1279
Code, or in an intermediate care facility for individuals with 1280
intellectual disabilities as defined in section 5124.01 of the 1281
Revised Code, at the direction of a registered nurse or ~~licensed~~ 1282
physician, physician assistant, dentist, optometrist, or 1283
podiatrist who is authorized to practice in this state, a 1284
registered nurse shall be on the premises of the home or facility 1285
or accessible by some form of telecommunication. 1286

(D) No licensed practical nurse shall perform any of the 1287
following intravenous therapy procedures: 1288

(1) Initiating or maintaining any of the following: 1289

(a) Blood or blood components; 1290

(b) Solutions for total parenteral nutrition; 1291

(c) Any cancer therapeutic medication including, but not 1292
limited to, cancer chemotherapy or an anti-neoplastic agent; 1293

(d) Solutions administered through any central venous line or 1294
arterial line or any other line that does not terminate in a 1295
peripheral vein, except that a licensed practical nurse authorized 1296
by the board to perform intravenous therapy may maintain the 1297
solutions specified in division (D)(6)(a) of this section that are 1298
being administered through a central venous line or peripherally 1299
inserted central catheter; 1300

(e) Any investigational or experimental medication. 1301

(2) Initiating intravenous therapy in any vein, except that a 1302
licensed practical nurse authorized by the board to perform 1303
intravenous therapy may initiate intravenous therapy in accordance 1304
with this section in a vein of the hand, forearm, or antecubital 1305
fossa; 1306

(3) Discontinuing a central venous, arterial, or any other 1307

line that does not terminate in a peripheral vein;	1308
(4) Initiating or discontinuing a peripherally inserted central catheter;	1309 1310
(5) Mixing, preparing, or reconstituting any medication for intravenous therapy, except that a licensed practical nurse authorized by the board to perform intravenous therapy may prepare or reconstitute an antibiotic additive;	1311 1312 1313 1314
(6) Administering medication via the intravenous route, including all of the following activities:	1315 1316
(a) Adding medication to an intravenous solution or to an existing infusion, except that a licensed practical nurse authorized by the board to perform intravenous therapy may do any of the following:	1317 1318 1319 1320
(i) Initiate an intravenous infusion containing one or more of the following elements: dextrose 5%, normal saline, lactated ringers, sodium chloride .45%, sodium chloride 0.2%, sterile water;	1321 1322 1323 1324
(ii) Hang subsequent containers of the intravenous solutions specified in division (D)(6)(a)(i) of this section that contain vitamins or electrolytes, if a registered nurse initiated the infusion of that same intravenous solution;	1325 1326 1327 1328
(iii) Initiate or maintain an intravenous infusion containing an antibiotic additive.	1329 1330
(b) Injecting medication via a direct intravenous route, except that a licensed practical nurse authorized by the board to perform intravenous therapy may inject heparin or normal saline to flush an intermittent infusion device or heparin lock including, but not limited to, bolus or push.	1331 1332 1333 1334 1335
(7) Changing tubing on any line including, but not limited to, an arterial line or a central venous line, except that a	1336 1337

licensed practical nurse authorized by the board to perform	1338
intravenous therapy may change tubing on an intravenous line that	1339
terminates in a peripheral vein;	1340
(8) Programming or setting any function of a patient	1341
controlled infusion pump.	1342
(E) Notwithstanding divisions (A) and (D) of this section, at	1343
the direction of a physician or a registered nurse, a licensed	1344
practical nurse authorized by the board to perform intravenous	1345
therapy may perform the following activities for the purpose of	1346
performing dialysis:	1347
(1) The routine administration and regulation of saline	1348
solution for the purpose of maintaining an established fluid plan;	1349
(2) The administration of a heparin dose intravenously;	1350
(3) The administration of a heparin dose peripherally via a	1351
fistula needle;	1352
(4) The loading and activation of a constant infusion pump;	1353
(5) The intermittent injection of a dose of medication that	1354
is administered via the hemodialysis blood circuit and through the	1355
patient's venous access.	1356
(F) No person shall employ or direct a licensed practical	1357
nurse to perform an intravenous therapy procedure without first	1358
verifying that the licensed practical nurse is authorized by the	1359
board to perform intravenous therapy.	1360
Sec. 4723.181. (A) A licensed practical nurse may perform on	1361
any person any of the intravenous therapy procedures specified in	1362
division (B) of this section without receiving authorization to	1363
perform intravenous therapy from the board of nursing under	1364
section 4723.18 of the Revised Code, if both of the following	1365
apply:	1366

(1) The licensed practical nurse acts at the direction of a registered nurse or a ~~licensed~~ physician, physician assistant, dentist, optometrist, or podiatrist who is authorized to practice in this state and the registered nurse, physician, physician assistant, dentist, optometrist, or podiatrist is on the premises where the procedure is to be performed or accessible by some form of telecommunication.

(2) The licensed practical nurse can demonstrate the knowledge, skills, and ability to perform the procedure safely.

(B) The intravenous therapy procedures that a licensed practical nurse may perform pursuant to division (A) of this section are limited to the following:

(1) Verification of the type of peripheral intravenous solution being administered;

(2) Examination of a peripheral infusion site and the extremity for possible infiltration;

(3) Regulation of a peripheral intravenous infusion according to the prescribed flow rate;

(4) Discontinuation of a peripheral intravenous device at the appropriate time;

(5) Performance of routine dressing changes at the insertion site of a peripheral venous or arterial infusion, peripherally inserted central catheter infusion, or central venous pressure subclavian infusion.

Sec. 4723.48. (A) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner seeking authority to prescribe drugs and therapeutic devices shall file with the board of nursing a written application for a certificate to prescribe. The board of nursing shall issue a certificate to prescribe to each applicant who meets the requirements specified

in section 4723.482 or 4723.485 of the Revised Code. 1397

Except as provided in division (B) of this section, the 1398
initial certificate to prescribe that the board issues to an 1399
applicant shall be issued as an externship certificate. Under an 1400
externship certificate, the nurse may obtain experience in 1401
prescribing drugs and therapeutic devices by participating in an 1402
externship that evaluates the nurse's competence, knowledge, and 1403
skill in pharmacokinetic principles and their clinical application 1404
to the specialty being practiced. During the externship, the nurse 1405
may prescribe drugs and therapeutic devices only when one or more 1406
physicians are providing supervision in accordance with rules 1407
adopted under section 4723.50 of the Revised Code. 1408

After completing the externship, the holder of an externship 1409
certificate may apply for a new certificate to prescribe. On 1410
receipt of the new certificate, the nurse may prescribe drugs and 1411
therapeutic devices in collaboration with one or more physicians 1412
or podiatrists. 1413

(B) In the case of an applicant who meets the requirements of 1414
division (C) of section 4723.482 of the Revised Code, the initial 1415
certificate to prescribe that the board issues to the applicant 1416
under this section shall not be an externship certificate. The 1417
applicant shall be issued a certificate to prescribe that permits 1418
the recipient to prescribe drugs and therapeutic devices in 1419
collaboration with one or more physicians or podiatrists. 1420

(C)(1) The holder of a certificate issued under this section 1421
may delegate to a person not otherwise authorized to administer 1422
drugs the authority to administer a drug, other than a controlled 1423
substance, listed in the formulary established under division 1424
(B)(1) of section 4723.50 of the Revised Code to a specified 1425
patient. The delegation shall be in accordance with division 1426
(C)(2) of this section and standards and procedures established in 1427

rules adopted under division (O) of section 4723.07 of the Revised Code. 1428
1429

(2) Prior to delegating authority, the certificate holder shall do both of the following: 1430
1431

(a) Assess the patient and determine that the drug is appropriate for the patient; 1432
1433

(b) Determine that the person to whom the authority will be delegated has met the conditions specified in division (D) of section 4723.489 of the Revised Code. 1434
1435
1436

Sec. 4723.482. (A) Except as provided in divisions (C) and 1437
(D) of this section, an applicant shall include with the 1438
application submitted under section 4723.48 of the Revised Code 1439
all of the following: 1440

(1) Evidence of holding a current, valid certificate of 1441
authority to practice as a clinical nurse specialist, certified 1442
nurse-midwife, or certified nurse practitioner that was issued by 1443
meeting the requirements of division (A) of section 4723.41 of the 1444
Revised Code; 1445

(2) Evidence of successfully completing the course of study 1446
in advanced pharmacology and related topics in accordance with the 1447
requirements specified in division (B) of this section; 1448

(3) The fee required by section 4723.08 of the Revised Code 1449
for a certificate to prescribe; 1450

(4) Any additional information the board of nursing requires 1451
pursuant to rules adopted under section 4723.50 of the Revised 1452
Code. 1453

(B) With respect to the course of study in advanced 1454
pharmacology and related topics that must be successfully 1455
completed to obtain a certificate to prescribe, all of the 1456
following requirements apply: 1457

(1) The course of study shall be completed not longer than 1458
three years before the application for the certificate to 1459
prescribe is filed. 1460

(2) ~~Except as provided in division (E) of this section, the~~ 1461
~~course of study shall consist of planned classroom and clinical~~ 1462
~~instruction.~~ The total length of the course of study shall be not 1463
less than forty-five contact hours. 1464

(3) The course of study shall meet the requirements to be 1465
approved by the board in accordance with standards established in 1466
rules adopted under section 4723.50 of the Revised Code. 1467

(4) The content of the course of study shall be specific to 1468
the applicant's nursing specialty. 1469

(5) The instruction provided in the course of study shall 1470
include all of the following: 1471

(a) A minimum of thirty-six contact hours of instruction in 1472
advanced pharmacology that includes pharmacokinetic principles and 1473
clinical application and the use of drugs and therapeutic devices 1474
in the prevention of illness and maintenance of health; 1475

(b) Instruction in the fiscal and ethical implications of 1476
prescribing drugs and therapeutic devices; 1477

(c) Instruction in the state and federal laws that apply to 1478
the authority to prescribe; 1479

(d) Instruction that is specific to schedule II controlled 1480
substances, including instruction in all of the following: 1481

(i) Indications for the use of schedule II controlled 1482
substances in drug therapies; 1483

(ii) The most recent guidelines for pain management 1484
therapies, as established by state and national organizations such 1485
as the Ohio pain initiative and the American pain society; 1486

(iii) Fiscal and ethical implications of prescribing schedule 1487

II controlled substances;	1488
(iv) State and federal laws that apply to the authority to prescribe schedule II controlled substances;	1489 1490
(v) Prevention of abuse and diversion of schedule II controlled substances, including identification of the risk of abuse and diversion, recognition of abuse and diversion, types of assistance available for prevention of abuse and diversion, and methods of establishing safeguards against abuse and diversion.	1491 1492 1493 1494 1495
(e) Any additional instruction required pursuant to rules adopted under section 4723.50 of the Revised Code.	1496 1497
(C) An applicant who practiced or is practicing as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner in another jurisdiction or as an employee of the United States government, and is not seeking authority to prescribe drugs and therapeutic devices by meeting the requirements of division (A) or (D) of this section, shall include with the application submitted under section 4723.48 of the Revised Code all of the following:	1498 1499 1500 1501 1502 1503 1504 1505
(1) Evidence of holding a current, valid certificate of authority issued under this chapter to practice as a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner;	1506 1507 1508 1509
(2) The fee required by section 4723.08 of the Revised Code for a certificate to prescribe;	1510 1511
(3) Either of the following:	1512
(a) Evidence of having held, for a continuous period of at least one year during the three years immediately preceding the date of application, valid authority issued by another jurisdiction to prescribe therapeutic devices and drugs, including at least some controlled substances;	1513 1514 1515 1516 1517

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

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

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

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

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

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

(3) Either of the following:

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

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

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

~~(E) In the case of an applicant who meets the requirements of division (C) or (D) of this section other than the requirements of division (C)(3) or (D)(3) of this section and is seeking authority to prescribe drugs and therapeutic devices by meeting the requirements of division (A) of this section, the applicant may complete the instruction that is specific to schedule II controlled substances, as required by division (B)(5)(d) of this section, through an internet based course of study in lieu of completing the instruction through a course of study consisting of planned classroom and clinical instruction.~~

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

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

(B) The drug is listed in the formulary established under division (B) of section 4723.50 of the Revised Code but is not a controlled substance and is not to be administered intravenously.

(C) The drug is to be administered at a location other than a hospital inpatient care unit, as defined in section 3727.50 of the

Revised Code; a hospital emergency department or a freestanding
emergency department; or an ambulatory surgical facility, as
defined in section 3702.30 of the Revised Code.

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

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

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

Sec. 4723.50. (A) In accordance with Chapter 119. of the
Revised Code, the board of nursing shall adopt rules as necessary
to implement the provisions of this chapter pertaining to the
authority of clinical nurse specialists, certified nurse-midwives,
and certified nurse practitioners to prescribe drugs and
therapeutic devices and the issuance and renewal of certificates
to prescribe.

The board shall adopt rules that are consistent with the
recommendations the board receives from the committee on
prescriptive governance pursuant to section 4723.492 of the
Revised Code. After reviewing a recommendation submitted by the
committee, the board may either adopt the recommendation as a rule
or ask the committee to reconsider and resubmit the
recommendation. The board shall not adopt any rule that does not
conform to a recommendation made by the committee.

(B) The board shall adopt rules under this section that do
all of the following:

(1) Establish a formulary listing the types of drugs and 1609
therapeutic devices that may be prescribed by a clinical nurse 1610
specialist, certified nurse-midwife, or certified nurse 1611
practitioner. The formulary may include controlled substances, as 1612
defined in section 3719.01 of the Revised Code. The formulary 1613
shall not permit the prescribing of any drug or device to perform 1614
or induce an abortion. 1615

(2) Establish safety standards to be followed by a clinical 1616
nurse specialist, certified nurse-midwife, or certified nurse 1617
practitioner when personally furnishing to patients complete or 1618
partial supplies of antibiotics, antifungals, scabicides, 1619
contraceptives, prenatal vitamins, antihypertensives, drugs and 1620
devices used in the treatment of diabetes, drugs and devices used 1621
in the treatment of asthma, and drugs used in the treatment of 1622
dyslipidemia; 1623

(3) Establish criteria for the components of the standard 1624
care arrangements described in section 4723.431 of the Revised 1625
Code that apply to the authority to prescribe, including the 1626
components that apply to the authority to prescribe schedule II 1627
controlled substances. The rules shall be consistent with that 1628
section and include all of the following: 1629

(a) Quality assurance standards; 1630

(b) Standards for periodic review by a collaborating 1631
physician or podiatrist of the records of patients treated by the 1632
clinical nurse specialist, certified nurse-midwife, or certified 1633
nurse practitioner; 1634

(c) Acceptable travel time between the location at which the 1635
clinical nurse specialist, certified nurse-midwife, or certified 1636
nurse practitioner is engaging in the prescribing components of 1637
the nurse's practice and the location of the nurse's collaborating 1638
physician or podiatrist; 1639

(d) Any other criteria recommended by the committee on 1640
prescriptive governance. 1641

(4) Establish standards and procedures for issuance and 1642
renewal of a certificate to prescribe, including specification of 1643
any additional information the board may require under division 1644
(A)(4), (C)(5), or (D)~~(5)~~(4) of section 4723.482 ~~or~~ division 1645
(B)(3) of section 4723.485, or division (B)(3) of section 4723.486 1646
of the Revised Code; 1647

(5) Establish standards for board approval of the course of 1648
study in advanced pharmacology and related topics required by 1649
section 4723.482 of the Revised Code; 1650

(6) Establish requirements for board approval of the two-hour 1651
course of instruction in the laws of this state as required under 1652
division (C)(4) of section 4723.482 of the Revised Code and 1653
division (B)(2) of section 4723.484 of the Revised Code; 1654

(7) Establish standards and procedures for the appropriate 1655
conduct of an externship as described in section 4723.484 of the 1656
Revised Code, including the following: 1657

(a) Standards and procedures to be used in evaluating an 1658
individual's participation in an externship; 1659

(b) Standards and procedures for the supervision that a 1660
physician must provide during an externship, including supervision 1661
provided by working with the participant and supervision provided 1662
by making timely reviews of the records of patients treated by the 1663
participant. The manner in which supervision must be provided may 1664
vary according to the location where the participant is practicing 1665
and with the participant's level of experience. 1666

Sec. 4729.01. As used in this chapter: 1667

(A) "Pharmacy," except when used in a context that refers to 1668
the practice of pharmacy, means any area, room, rooms, place of 1669

business, department, or portion of any of the foregoing where the practice of pharmacy is conducted.

(B) "Practice of pharmacy" means providing pharmacist care requiring specialized knowledge, judgment, and skill derived from the principles of biological, chemical, behavioral, social, pharmaceutical, and clinical sciences. As used in this division, "pharmacist care" includes the following:

(1) Interpreting prescriptions;

(2) Dispensing drugs and drug therapy related devices;

(3) Compounding drugs;

(4) Counseling individuals with regard to their drug therapy, recommending drug therapy related devices, and assisting in the selection of drugs and appliances for treatment of common diseases and injuries and providing instruction in the proper use of the drugs and appliances;

(5) Performing drug regimen reviews with individuals by discussing all of the drugs that the individual is taking and explaining the interactions of the drugs;

(6) Performing drug utilization reviews with licensed health professionals authorized to prescribe drugs when the pharmacist determines that an individual with a prescription has a drug regimen that warrants additional discussion with the prescriber;

(7) Advising an individual and the health care professionals treating an individual with regard to the individual's drug therapy;

(8) Acting pursuant to a consult agreement with a physician authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery, if an agreement has been established with the physician;

(9) Engaging in the administration of immunizations to the

extent authorized by section 4729.41 of the Revised Code. 1700

(C) "Compounding" means the preparation, mixing, assembling, 1701
packaging, and labeling of one or more drugs in any of the 1702
following circumstances: 1703

(1) Pursuant to a prescription issued by a licensed health 1704
professional authorized to prescribe drugs; 1705

(2) Pursuant to the modification of a prescription made in 1706
accordance with a consult agreement; 1707

(3) As an incident to research, teaching activities, or 1708
chemical analysis; 1709

(4) In anticipation of orders for drugs pursuant to 1710
prescriptions, based on routine, regularly observed dispensing 1711
patterns; 1712

(5) Pursuant to a request made by a licensed health 1713
professional authorized to prescribe drugs for a drug that is to 1714
be used by the professional for the purpose of direct 1715
administration to patients in the course of the professional's 1716
practice, if all of the following apply: 1717

(a) At the time the request is made, the drug is not 1718
commercially available regardless of the reason that the drug is 1719
not available, including the absence of a manufacturer for the 1720
drug or the lack of a readily available supply of the drug from a 1721
manufacturer. 1722

(b) A limited quantity of the drug is compounded and provided 1723
to the professional. 1724

(c) The drug is compounded and provided to the professional 1725
as an occasional exception to the normal practice of dispensing 1726
drugs pursuant to patient-specific prescriptions. 1727

(D) "Consult agreement" means an agreement to manage an 1728
individual's drug therapy that has been entered into by a 1729

pharmacist and a physician authorized under Chapter 4731. of the 1730
Revised Code to practice medicine and surgery or osteopathic 1731
medicine and surgery. 1732

(E) "Drug" means: 1733

(1) Any article recognized in the United States pharmacopoeia 1734
and national formulary, or any supplement to them, intended for 1735
use in the diagnosis, cure, mitigation, treatment, or prevention 1736
of disease in humans or animals; 1737

(2) Any other article intended for use in the diagnosis, 1738
cure, mitigation, treatment, or prevention of disease in humans or 1739
animals; 1740

(3) Any article, other than food, intended to affect the 1741
structure or any function of the body of humans or animals; 1742

(4) Any article intended for use as a component of any 1743
article specified in division (E)(1), (2), or (3) of this section; 1744
but does not include devices or their components, parts, or 1745
accessories. 1746

(F) "Dangerous drug" means any of the following: 1747

(1) Any drug to which either of the following applies: 1748

(a) Under the "Federal Food, Drug, and Cosmetic Act," 52 1749
Stat. 1040 (1938), 21 U.S.C.A. 301, as amended, the drug is 1750
required to bear a label containing the legend "Caution: Federal 1751
law prohibits dispensing without prescription" or "Caution: 1752
Federal law restricts this drug to use by or on the order of a 1753
licensed veterinarian" or any similar restrictive statement, or 1754
the drug may be dispensed only upon a prescription; 1755

(b) Under Chapter 3715. or 3719. of the Revised Code, the 1756
drug may be dispensed only upon a prescription. 1757

(2) Any drug that contains a schedule V controlled substance 1758
and that is exempt from Chapter 3719. of the Revised Code or to 1759

which that chapter does not apply; 1760

(3) Any drug intended for administration by injection into 1761
the human body other than through a natural orifice of the human 1762
body. 1763

(G) "Federal drug abuse control laws" has the same meaning as 1764
in section 3719.01 of the Revised Code. 1765

(H) "Prescription" means a written, electronic, or oral order 1766
for drugs or combinations or mixtures of drugs to be used by a 1767
particular individual or for treating a particular animal, issued 1768
by a licensed health professional authorized to prescribe drugs. 1769

(I) "Licensed health professional authorized to prescribe 1770
drugs" or "prescriber" means an individual who is authorized by 1771
law to prescribe drugs or dangerous drugs or drug therapy related 1772
devices in the course of the individual's professional practice, 1773
including only the following: 1774

(1) A dentist licensed under Chapter 4715. of the Revised 1775
Code; 1776

(2) A clinical nurse specialist, certified nurse-midwife, or 1777
certified nurse practitioner who holds a certificate to prescribe 1778
issued under section 4723.48 of the Revised Code; 1779

(3) An optometrist licensed under Chapter 4725. of the 1780
Revised Code to practice optometry under a therapeutic 1781
pharmaceutical agents certificate; 1782

(4) A physician authorized under Chapter 4731. of the Revised 1783
Code to practice medicine and surgery, osteopathic medicine and 1784
surgery, or podiatric medicine and surgery; 1785

(5) A physician assistant who holds a ~~certificate to~~ 1786
prescribe valid prescriber number issued ~~under Chapter 4730. of~~ 1787
the Revised Code by the state medical board and has been granted 1788
physician-delegated prescriptive authority; 1789

(6) A veterinarian licensed under Chapter 4741. of the Revised Code.	1790 1791
(J) "Sale" and "sell" include delivery, transfer, barter, exchange, or gift, or offer therefor, and each such transaction made by any person, whether as principal proprietor, agent, or employee.	1792 1793 1794 1795
(K) "Wholesale sale" and "sale at wholesale" mean any sale in which the purpose of the purchaser is to resell the article purchased or received by the purchaser.	1796 1797 1798
(L) "Retail sale" and "sale at retail" mean any sale other than a wholesale sale or sale at wholesale.	1799 1800
(M) "Retail seller" means any person that sells any dangerous drug to consumers without assuming control over and responsibility for its administration. Mere advice or instructions regarding administration do not constitute control or establish responsibility.	1801 1802 1803 1804 1805
(N) "Price information" means the price charged for a prescription for a particular drug product and, in an easily understandable manner, all of the following:	1806 1807 1808
(1) The proprietary name of the drug product;	1809
(2) The established (generic) name of the drug product;	1810
(3) The strength of the drug product if the product contains a single active ingredient or if the drug product contains more than one active ingredient and a relevant strength can be associated with the product without indicating each active ingredient. The established name and quantity of each active ingredient are required if such a relevant strength cannot be so associated with a drug product containing more than one ingredient.	1811 1812 1813 1814 1815 1816 1817 1818
(4) The dosage form;	1819

(5) The price charged for a specific quantity of the drug 1820
product. The stated price shall include all charges to the 1821
consumer, including, but not limited to, the cost of the drug 1822
product, professional fees, handling fees, if any, and a statement 1823
identifying professional services routinely furnished by the 1824
pharmacy. Any mailing fees and delivery fees may be stated 1825
separately without repetition. The information shall not be false 1826
or misleading. 1827

(O) "Wholesale distributor of dangerous drugs" means a person 1828
engaged in the sale of dangerous drugs at wholesale and includes 1829
any agent or employee of such a person authorized by the person to 1830
engage in the sale of dangerous drugs at wholesale. 1831

(P) "Manufacturer of dangerous drugs" means a person, other 1832
than a pharmacist, who manufactures dangerous drugs and who is 1833
engaged in the sale of those dangerous drugs within this state. 1834

(Q) "Terminal distributor of dangerous drugs" means a person 1835
who is engaged in the sale of dangerous drugs at retail, or any 1836
person, other than a wholesale distributor or a pharmacist, who 1837
has possession, custody, or control of dangerous drugs for any 1838
purpose other than for that person's own use and consumption, and 1839
includes pharmacies, hospitals, nursing homes, and laboratories 1840
and all other persons who procure dangerous drugs for sale or 1841
other distribution by or under the supervision of a pharmacist or 1842
licensed health professional authorized to prescribe drugs. 1843

(R) "Promote to the public" means disseminating a 1844
representation to the public in any manner or by any means, other 1845
than by labeling, for the purpose of inducing, or that is likely 1846
to induce, directly or indirectly, the purchase of a dangerous 1847
drug at retail. 1848

(S) "Person" includes any individual, partnership, 1849
association, limited liability company, or corporation, the state, 1850

any political subdivision of the state, and any district, 1851
department, or agency of the state or its political subdivisions. 1852

(T) "Finished dosage form" has the same meaning as in section 1853
3715.01 of the Revised Code. 1854

(U) "Generically equivalent drug" has the same meaning as in 1855
section 3715.01 of the Revised Code. 1856

(V) "Animal shelter" means a facility operated by a humane 1857
society or any society organized under Chapter 1717. of the 1858
Revised Code or a dog pound operated pursuant to Chapter 955. of 1859
the Revised Code. 1860

(W) "Food" has the same meaning as in section 3715.01 of the 1861
Revised Code. 1862

(X) "Pain management clinic" has the same meaning as in 1863
section 4731.054 of the Revised Code. 1864

Sec. 4730.01. As used in this chapter: 1865

~~(A) "Physician assistant" means a skilled person qualified by 1866
academic and clinical training to provide services to patients as 1867
a physician assistant under the supervision, control, and 1868
direction of one or more physicians who are responsible for the 1869
physician assistant's performance. 1870~~

~~(B)~~ "Physician" means an individual who is authorized under 1871
Chapter 4731. of the Revised Code to practice medicine and 1872
surgery, osteopathic medicine and surgery, or podiatric medicine 1873
and surgery. 1874

~~(C)~~(B) "Health care facility" means any of the following: 1875

(1) A hospital registered with the department of health under 1876
section 3701.07 of the Revised Code; 1877

(2) A health care facility licensed by the department of 1878
health under section 3702.30 of the Revised Code; 1879

(3) Any other facility designated by the state medical board 1880
in rules adopted pursuant to division (B)~~(2)~~ of section 4730.08 of 1881
the Revised Code. 1882

~~(D) "Special services" means the health care services that a 1883
physician assistant may be authorized to provide under the special 1884
services portion of a physician supervisory plan approved under 1885
section 4730.17 of the Revised Code (C) "Service" means a medical 1886
activity that requires training in the diagnosis, treatment, or 1887
prevention of disease. 1888~~

Sec. 4730.02. (A) No person shall hold that person out as 1889
being able to function as a physician assistant, or use any words 1890
or letters indicating or implying that the person is a physician 1891
assistant, without a current, valid ~~certificate~~ license to 1892
practice as a physician assistant issued pursuant to this chapter. 1893

(B) No person shall practice as a physician assistant without 1894
the supervision, control, and direction of a physician. 1895

~~(C) No person shall act as the supervising physician of a 1896
physician assistant without having received the state medical 1897
board's approval of a supervision agreement entered into with the 1898
physician assistant. 1899~~

~~(D)~~ No person shall practice as a physician assistant without 1900
having entered into a supervision agreement ~~that has been approved~~ 1901
~~by the state medical board~~ with a supervising physician under 1902
section 4730.19 of the Revised Code. 1903

~~(E)~~(D) No person acting as the supervising physician of a 1904
physician assistant shall authorize the physician assistant to 1905
perform services if either of the following is the case: 1906

(1) The services are not within the physician's normal course 1907
of practice and expertise; 1908

(2) The services are inconsistent with the ~~physician~~ 1909

~~supervisory plan approved by the state medical board for the~~ 1910
~~supervising physician or supervision agreement under which the~~ 1911
~~physician assistant is being supervised, including, if applicable,~~ 1912
the policies of the health care facility in which the physician 1913
and physician assistant are practicing. 1914

~~(F) No person shall practice as a physician assistant in a~~ 1915
~~manner that is inconsistent with the physician supervisory plan~~ 1916
~~approved for the physician who is responsible for supervising the~~ 1917
~~physician assistant or the policies of the health care facility in~~ 1918
~~which the physician assistant is practicing.~~ 1919

~~(G)~~(E) No person practicing as a physician assistant shall 1920
prescribe any drug or device to perform or induce an abortion, or 1921
otherwise perform or induce an abortion. 1922

~~(H)~~(F) No person shall advertise to provide services as a 1923
physician assistant, except for the purpose of seeking employment. 1924

~~(I)~~(G) No person practicing as a physician assistant shall 1925
fail to wear at all times when on duty a placard, plate, or other 1926
device identifying that person as a "physician assistant." 1927

Sec. 4730.03. Nothing in this chapter shall: 1928

(A) Be construed to affect or interfere with the performance 1929
of duties of any medical personnel who are either of the 1930
following: 1931

(1) In active service in the army, navy, coast guard, marine 1932
corps, air force, public health service, or marine hospital 1933
service of the United States while so serving; 1934

(2) Employed by the veterans administration of the United 1935
States while so employed; 1936

(B) Prevent any person from performing any of the services a 1937
physician assistant may be authorized to perform, if the person's 1938
professional scope of practice established under any other chapter 1939

of the Revised Code authorizes the person to perform the services; 1940

(C) Prohibit a physician from delegating responsibilities to 1941
any nurse or other qualified person who does not hold a 1942
~~certificate~~ license to practice as a physician assistant, provided 1943
that the individual does not hold the individual out to be a 1944
physician assistant; 1945

(D) Be construed as authorizing a physician assistant 1946
independently to order or direct the execution of procedures or 1947
techniques by a registered nurse or licensed practical nurse in 1948
the care and treatment of a person in any setting, except to the 1949
extent that the physician assistant is authorized to do so by ~~the~~ 1950
~~physician supervisory plan approved under section 4730.17 of the~~ 1951
~~Revised Code for the~~ a physician who is responsible for 1952
supervising the physician assistant ~~or~~ and, if applicable, the 1953
policies of the health care facility in which the physician 1954
assistant is practicing; 1955

(E) Authorize a physician assistant to engage in the practice 1956
of optometry, except to the extent that the physician assistant is 1957
authorized by a supervising physician acting in accordance with 1958
this chapter to perform routine visual screening, provide medical 1959
care prior to or following eye surgery, or assist in the care of 1960
diseases of the eye; 1961

(F) Be construed as authorizing a physician assistant to 1962
prescribe any drug or device to perform or induce an abortion, or 1963
as otherwise authorizing a physician assistant to perform or 1964
induce an abortion. 1965

Sec. 4730.04. (A) As used in this section: 1966

(1) "Disaster" means any imminent threat or actual occurrence 1967
of widespread or severe damage to or loss of property, personal 1968
hardship or injury, or loss of life that results from any natural 1969

phenomenon or act of a human.	1970
(2) "Emergency" means an occurrence or event that poses an imminent threat to the health or life of a human.	1971 1972
(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:	1973 1974 1975 1976
(1) An individual who holds a certificate <u>license</u> to practice as a physician assistant issued under this chapter;	1977 1978
(2) An individual licensed or authorized to practice as a physician assistant in another state;	1979 1980
(3) An individual credentialed or employed as a physician assistant by an agency, office, or other instrumentality of the federal government.	1981 1982 1983
(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:	1984 1985 1986 1987
(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 <u>supervision agreement entered into under section 4730.19 of the Revised Code</u> is not required to meet the supervision requirements established under this chapter.	1988 1989 1990 1991 1992 1993
(2) The physician designated as the medical director of the disaster or emergency may supervise the medical care provided by the physician assistant.	1994 1995 1996
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:	1997 1998 1999

(1) Requirements for issuance of certificates <u>issuing a</u> <u>license</u> to practice as a physician assistant, including the educational requirements that must be met to receive a certificate <u>license</u> to practice;	2000 2001 2002 2003
(2) Existing and proposed rules pertaining to the practice of physician assistants, the supervisory relationship between physician assistants and supervising physicians, and the administration and enforcement of this chapter;	2004 2005 2006 2007
(3) In accordance with section 4730.38 of the Revised Code, physician-delegated prescriptive authority for physician assistants and proposed changes to the physician assistant formulary the board adopts pursuant to division (A)(1) of section 4730.39 of the Revised Code;	2008 2009 2010 2011 2012
(4) Application procedures and forms for certificates a <u>license</u> to practice as a physician assistant, physician supervisory plans, and supervision agreements;	2013 2014 2015
(5) Fees required by this chapter for issuance and renewal of certificates a <u>license</u> to practice as a physician assistant;	2016 2017
(6) Criteria to be included in applications submitted to the board for approval of physician supervisory plans, including criteria to be included in applications for approval to delegate to physician assistants the performance of special services;	2018 2019 2020 2021
(7) Criteria to be included in supervision agreements submitted to the board for approval and renewal of the board's approval;	2022 2023 2024
(8) Any issue the board asks the committee to consider.	2025
(B) In addition to the matters that are required to be reviewed under division (A) of this section, the committee may review, and may submit to the board recommendations concerning, either or both of the following:	2026 2027 2028 2029

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

~~(2) The development and approval of one or more model
physician supervisory plans and one or more models for a special
services portion of the one or more model physician supervisory
plans. The committee may submit recommendations for model plans
that reflect various medical specialties.~~

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

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

(2) If the board submits to the committee a request for a
recommendation regarding a matter that is subject to the
committee's review under division (A) or (B) of this section, and
the committee does not provide a recommendation before the
sixty-first day after the request is submitted, the board may take

action regarding the matter without a recommendation. 2062

Sec. 4730.08. (A) A ~~certificate~~ license to practice as a 2063
physician assistant issued under this chapter authorizes the 2064
holder to practice as a physician assistant, ~~subject to all of the~~ 2065
~~following as follows:~~ 2066

(1) The physician assistant shall practice only under the 2067
supervision, control, and direction of a physician with whom the 2068
physician assistant has entered into a supervision agreement 2069
~~approved by the state medical board~~ under section 4730.17 4730.19 2070
of the Revised Code. 2071

(2) ~~When the physician assistant practices outside a health~~ 2072
~~care facility, the~~ The physician assistant shall practice in 2073
accordance with the ~~physician supervisory plan approved under~~ 2074
~~section 4730.17 of the Revised Code for~~ supervision agreement 2075
entered into with the physician who is responsible for supervising 2076
the physician assistant. 2077

~~(3) When the physician assistant practices within a health~~ 2078
~~care facility, the physician assistant shall practice in~~ 2079
~~accordance with, including, if applicable, the policies of the~~ 2080
health care facility in which the physician assistant is 2081
practicing. 2082

(B) ~~For purposes of division (A) of this section and all~~ 2083
~~other provisions of this chapter pertaining to the practice of a~~ 2084
~~physician assistant under the policies of a health care facility,~~ 2085
~~both of the following apply:~~ 2086

~~(1) A physician who is supervising a physician assistant~~ 2087
~~within a health care facility may impose limitations on the~~ 2088
~~physician assistant's practice that are in addition to any~~ 2089
~~limitations applicable under the policies of the facility.~~ 2090

~~(2) The state medical board may, subject to division (D) of~~ 2091

section 4730.06 of the Revised Code, adopt rules designating 2092
facilities to be included as health care facilities that are in 2093
addition to the facilities specified in divisions ~~(C)~~(B)(1) and 2094
(2) of section 4730.01 of the Revised Code. ~~The~~ Any rules adopted 2095
shall be adopted in accordance with Chapter 119. of the Revised 2096
Code. 2097

Sec. 4730.10. (A) An individual seeking a ~~certificate~~ license 2098
to practice as a physician assistant shall file with the state 2099
medical board a written application on a form prescribed and 2100
supplied by the board. The application shall include all of the 2101
following: 2102

(1) The applicant's name, residential address, business 2103
address, if any, and social security number; 2104

(2) Satisfactory proof that the applicant meets the age and 2105
moral character requirements specified in divisions (A)(1) and (2) 2106
of section 4730.11 of the Revised Code; 2107

(3) Satisfactory proof that the applicant meets either the 2108
educational requirements specified in division (B)(1) or (2) of 2109
section 4730.11 of the Revised Code or the educational or other 2110
applicable requirements specified in division (C)(1), (2), or (3) 2111
of that section; 2112

(4) Any other information the board requires. 2113

(B) At the time of making application for a ~~certificate~~ 2114
license to practice, the applicant shall pay the board a fee of 2115
~~two~~ five hundred dollars, no part of which shall be returned. The 2116
fees shall be deposited in accordance with section 4731.24 of the 2117
Revised Code. 2118

Sec. 4730.101. In addition to any other eligibility 2119
requirement set forth in this chapter, each applicant for a 2120
~~certificate~~ license to practice as a physician assistant shall 2121

comply with sections 4776.01 to 4776.04 of the Revised Code. The 2122
state medical board shall not grant to an applicant a ~~certificate~~ 2123
license to practice as a physician assistant unless the board, in 2124
its discretion, decides that the results of the criminal records 2125
check do not make the applicant ineligible for a ~~certificate~~ 2126
license issued pursuant to section 4730.12 of the Revised Code. 2127

Sec. 4730.11. (A) To be eligible to receive a ~~certificate~~ 2128
license to practice as a physician assistant, all of the following 2129
apply to an applicant: 2130

(1) The applicant shall be at least eighteen years of age. 2131

(2) The applicant shall be of good moral character. 2132

(3) The applicant shall hold current certification by the 2133
national commission on certification of physician assistants or a 2134
successor organization that is recognized by the state medical 2135
board. 2136

(4) The applicant shall meet either of the following 2137
requirements: 2138

(a) The educational requirements specified in division (B)(1) 2139
or (2) of this section; 2140

(b) The educational or other applicable requirements 2141
specified in division (C)(1), (2), or (3) of this section. 2142

(B) Effective January 1, 2008, for purposes of division 2143
(A)(4)(a) of this section, an applicant shall meet either of the 2144
following educational requirements: 2145

(1) The applicant shall hold a master's or higher degree 2146
obtained from a program accredited by the accreditation review 2147
commission on education for the physician assistant or a 2148
predecessor or successor organization recognized by the board. 2149

(2) The applicant shall hold both of the following degrees: 2150

(a) A degree other than a master's or higher degree obtained 2151
from a program accredited by the accreditation review commission 2152
on education for the physician assistant or a predecessor or 2153
successor organization recognized by the board; 2154

(b) A master's or higher degree in a course of study with 2155
clinical relevance to the practice of physician assistants and 2156
obtained from a program accredited by a regional or specialized 2157
and professional accrediting agency recognized by the council for 2158
higher education accreditation. 2159

(C) For purposes of division (A)(4)(b) of this section, an 2160
applicant shall present evidence satisfactory to the board of 2161
meeting one of the following requirements in lieu of meeting the 2162
educational requirements specified in division (B)(1) or (2) of 2163
this section: 2164

(1) The applicant shall hold a current, valid license or 2165
other form of authority to practice as a physician assistant 2166
issued by another jurisdiction ~~prior to January 1, 2008~~ and have 2167
been in active practice in any jurisdiction throughout the 2168
three-year period immediately preceding the date of application. 2169

(2) The applicant shall hold a degree obtained as a result of 2170
being enrolled on January 1, 2008, in a program in this state that 2171
was accredited by the accreditation review commission on education 2172
for the physician assistant but did not grant a master's or higher 2173
degree to individuals enrolled in the program on that date, and 2174
completing the program on or before December 31, 2009. 2175

(3) The applicant shall ~~meet both of the following~~ 2176
~~educational and military experience requirements:~~ 2177

~~(a) Hold~~ hold a degree obtained from a program accredited by 2178
the accreditation review commission on education for the physician 2179
assistant; and meet either of the following experience 2180
requirements: 2181

~~(b)~~(a) Have experience practicing as a physician assistant 2182
for at least three consecutive years while on active duty, with 2183
evidence of service under honorable conditions, in any of the 2184
armed forces of the United States or the national guard of any 2185
state, including any experience attained while practicing as a 2186
physician assistant at a health care facility or clinic operated 2187
by the United States department of veterans affairs. 2188

(b) Have experience practicing as a physician assistant for 2189
at least three consecutive years while on active duty in the 2190
United States public health service commissioned corps. 2191

(D) Unless the applicant had prescriptive authority while 2192
practicing as a physician assistant in another jurisdiction, in 2193
the military, or in the public health service, the license issued 2194
to an applicant who does not hold a master's or higher degree 2195
described in division (B) of this section does not authorize the 2196
holder to exercise physician-delegated prescriptive authority and 2197
the state medical board shall not issue a prescriber number. 2198

(E)(1) This section does not require an individual to obtain 2199
a master's or higher degree as a condition of retaining or 2200
renewing a ~~certificate~~ license to practice as a physician 2201
assistant if the individual received the ~~certificate~~ license 2202
without holding a master's or higher degree as provided in either 2203
of the following: 2204

~~(1)~~(a) Before the educational requirements specified in 2205
division (B)(1) or (2) of this section became effective January 1, 2206
2008; 2207

~~(2)~~(b) By meeting the educational or other applicable 2208
requirements specified in division (C)(1), (2), or (3) of this 2209
section. 2210

(2) A license described in division (E)(1) of this section 2211
authorizes the license holder to exercise physician-delegated 2212

prescriptive authority if, on the effective date of this 2213
amendment, the license holder held a valid certificate to 2214
prescribe issued under former section 4730.44 of the Revised Code, 2215
as it existed immediately prior to the effective date of this 2216
amendment. 2217

(3) On application of an individual who received a license 2218
without having first obtained a master's or higher degree and is 2219
not authorized under division (E)(2) of this section to exercise 2220
physician-delegated prescriptive authority, the board shall grant 2221
the individual the authority to exercise physician-delegated 2222
prescriptive authority if the individual provides evidence 2223
satisfactory to the board of having obtained a master's or higher 2224
degree from either of the following: 2225

(a) A program accredited by the accreditation review 2226
commission on education for the physician assistant or a 2227
predecessor or successor organization recognized by the board; 2228

(b) A program accredited by a regional or specialized and 2229
professional accrediting agency recognized by the council for 2230
higher education accreditation, if the degree is in a course of 2231
study with clinical relevance to the practice of physician 2232
assistants. 2233

Sec. 4730.111. A physician assistant whose certification by 2234
the national commission on certification of physician assistants 2235
or a successor organization recognized by the state medical board 2236
is suspended or revoked shall give notice of that occurrence to 2237
the board not later than fourteen days after the physician 2238
assistant receives notice of the change in certification status. A 2239
physician assistant who fails to renew the certification shall 2240
notify the board not later than fourteen days after the 2241
certification expires. 2242

Sec. 4730.12. (A) The state medical board shall review ~~all~~ 2243
~~applications~~ each application received under section 4730.10 of 2244
the Revised Code for ~~certificates~~ a license to practice as a 2245
physician assistant. Not later than sixty days after receiving a 2246
complete application, the board shall determine whether an 2247
applicant meets the requirements to receive a ~~certificate~~ license 2248
to practice, as specified in section 4730.11 of the Revised Code. 2249
An affirmative vote of not fewer than six members of the board is 2250
required to determine that an applicant meets the requirements to 2251
receive a ~~certificate~~ license to practice as a physician 2252
assistant. 2253

(B) If the board determines that an applicant meets the 2254
requirements to receive the ~~certificate~~ license, the secretary of 2255
the board shall register the applicant as a physician assistant 2256
and issue to the applicant a ~~certificate~~ license to practice as a 2257
physician assistant. 2258

(C)(1) During the first five hundred hours of the first one 2259
thousand hours of a physician assistant's exercise of 2260
physician-delegated prescriptive authority, the physician 2261
assistant shall exercise that authority only under the on-site 2262
supervision of a supervising physician. 2263

(2) A physician assistant shall be excused from the 2264
requirement established in division (C)(1) of this section if 2265
prior to application the physician assistant held a prescriber 2266
number, or the equivalent, from another jurisdiction and practiced 2267
with prescriptive authority in that jurisdiction for not less than 2268
one thousand hours. 2269

(3) A record of a physician assistant's completion of the 2270
hours required by division (C)(1) of this section or issuance of a 2271
prescriber number or equivalent by another jurisdiction shall be 2272
kept on file by a supervising physician of the physician 2273

assistant. The record shall be made available for inspection by 2274
the board. 2275

Sec. 4730.13. Upon application by the holder of a ~~certificate~~ 2276
license to practice as a physician assistant, the state medical 2277
board shall issue a duplicate ~~certificate~~ license to replace one 2278
that is missing or damaged, to reflect a name change, or for any 2279
other reasonable cause. The fee for a duplicate ~~certificate~~ 2280
license shall be thirty-five dollars. All fees collected under 2281
this section shall be deposited in accordance with section 4731.24 2282
of the Revised Code. 2283

Sec. 4730.14. (A) A ~~certificate~~ license to practice as a 2284
physician assistant shall expire biennially and may be renewed in 2285
accordance with this section. A person seeking to renew a 2286
~~certificate~~ license to practice as a physician assistant shall, on 2287
or before the thirty-first day of January of each even-numbered 2288
year, apply for renewal of the certificate. The state medical 2289
board shall send renewal notices at least one month prior to the 2290
expiration date. 2291

Applications shall be submitted to the board on forms the 2292
board shall prescribe and furnish. Each application shall be 2293
accompanied by a biennial renewal fee of ~~one~~ two hundred dollars. 2294
The board shall deposit the fees in accordance with section 2295
4731.24 of the Revised Code. 2296

The applicant shall report any criminal offense that 2297
constitutes grounds for refusing to issue a ~~certificate~~ license to 2298
practice under section 4730.25 of the Revised Code to which the 2299
applicant has pleaded guilty, of which the applicant has been 2300
found guilty, or for which the applicant has been found eligible 2301
for intervention in lieu of conviction, since last signing an 2302
application for a ~~certificate~~ license to practice as a physician 2303

assistant. 2304

(B) To be eligible for renewal of a license, ~~a physician~~ 2305
~~assistant shall certify to the board both~~ an applicant is subject 2306
to all of the following: 2307

(1) ~~That the physician assistant~~ The applicant shall certify 2308
to the board that the applicant has maintained certification by 2309
the national commission on certification of physician assistants 2310
or a successor organization that is recognized by the board by 2311
meeting the standards to hold current certification from the 2312
commission or its successor, including completion of continuing 2313
medical education requirements and passing periodic 2314
recertification examinations~~+~~. 2315

(2) Except as provided in division (F) of this section and 2316
section 5903.12 of the Revised Code, the applicant shall certify 2317
to the board that the ~~physician assistant~~ applicant has completed 2318
during the current ~~certification~~ licensure period not less than 2319
one hundred hours of continuing medical education acceptable to 2320
the board. 2321

(3) The applicant shall comply with the renewal eligibility 2322
requirements established under section 4730.49 of the Revised Code 2323
that pertain to the applicant. 2324

(C) The board shall adopt rules in accordance with Chapter 2325
119. of the Revised Code specifying the types of continuing 2326
medical education that must be completed to fulfill the board's 2327
requirements under division (B)(2) of this section. Except when 2328
additional continuing medical education is required to renew a 2329
certificate to prescribe, as specified in section 4730.49 of the 2330
Revised Code, the board shall not adopt rules that require a 2331
physician assistant to complete in any ~~certification~~ licensure 2332
period more than one hundred hours of continuing medical education 2333
acceptable to the board. In fulfilling the board's requirements, a 2334

physician assistant may use continuing medical education courses 2335
or programs completed to maintain certification by the national 2336
commission on certification of physician assistants or a successor 2337
organization that is recognized by the board if the standards for 2338
acceptable courses and programs of the commission or its successor 2339
are at least equivalent to the standards established by the board. 2340

(D) If an applicant submits a complete renewal application 2341
and qualifies for renewal pursuant to division (B) of this 2342
section, the board shall issue to the applicant a renewed 2343
~~certificate~~ license to practice as a physician assistant. 2344

(E) The board may require a random sample of physician 2345
assistants to submit materials documenting certification by the 2346
national commission on certification of physician assistants or a 2347
successor organization that is recognized by the board and 2348
completion of the required number of hours of continuing medical 2349
education. 2350

(F) The board shall provide for pro rata reductions by month 2351
of the number of hours of continuing education that must be 2352
completed for individuals who are in their first ~~certification~~ 2353
licensure period, who have been disabled due to illness or 2354
accident, or who have been absent from the country. The board 2355
shall adopt rules, in accordance with Chapter 119. of the Revised 2356
Code, as necessary to implement this division. 2357

(G)(1) A ~~certificate~~ license to practice that is not renewed 2358
on or before its expiration date is automatically suspended on its 2359
expiration date. Continued practice after suspension of the 2360
certificate shall be considered as practicing in violation of 2361
division (A) of section 4730.02 of the Revised Code. 2362

(2) If a ~~certificate~~ license has been suspended pursuant to 2363
division (G)(1) of this section for two years or less, it may be 2364
reinstated. The board shall reinstate a ~~certificate~~ license 2365

suspended for failure to renew upon an applicant's submission of a 2366
renewal application, the biennial renewal fee, and any applicable 2367
monetary penalty. 2368

If a ~~certificate~~ license has been suspended pursuant to 2369
division (G)(1) of this ~~division~~ section for more than two years, 2370
it may be restored. In accordance with section 4730.28 of the 2371
Revised Code, the board may restore a ~~certificate~~ license 2372
suspended for failure to renew upon an applicant's submission of a 2373
restoration application, the biennial renewal fee, and any 2374
applicable monetary penalty and compliance with sections 4776.01 2375
to 4776.04 of the Revised Code. The board shall not restore to an 2376
applicant a ~~certificate~~ license to practice as a physician 2377
assistant unless the board, in its discretion, decides that the 2378
results of the criminal records check do not make the applicant 2379
ineligible for a ~~certificate~~ license issued pursuant to section 2380
4730.12 of the Revised Code. 2381

The penalty for reinstatement shall be fifty dollars and the 2382
penalty for restoration shall be one hundred dollars. The board 2383
shall deposit penalties in accordance with section 4731.24 of the 2384
Revised Code. 2385

(H) If an individual certifies that the individual has 2386
completed the number of hours and type of continuing medical 2387
education required for renewal or reinstatement of a ~~certificate~~ 2388
license to practice as a physician assistant, and the board finds 2389
through a random sample conducted under division (E) of this 2390
section or through any other means that the individual did not 2391
complete the requisite continuing medical education, the board may 2392
impose a civil penalty of not more than five thousand dollars. The 2393
board's finding shall be made pursuant to an adjudication under 2394
Chapter 119. of the Revised Code and by an affirmative vote of not 2395
fewer than six members. 2396

A civil penalty imposed under this division may be in 2397

addition to or in lieu of any other action the board may take 2398
under section 4730.25 of the Revised Code. The board shall deposit 2399
civil penalties in accordance with section 4731.24 of the Revised 2400
Code. 2401

Sec. 4730.19. (A) ~~For a supervision agreement to be approved 2402
by the board, all of the following apply:~~ 2403

~~(1) Before initiating supervision of one or more physician 2404
assistants licensed under this chapter, a physician shall enter 2405
into a supervision agreement with each physician assistant who 2406
will be supervised. A supervision agreement may apply to one or 2407
more physician assistants, but, except as provided in division 2408
(B)(2)(e) of this section, may apply to not more than one 2409
physician. The supervision agreement shall specify that the 2410
physician agrees to supervise the physician assistant and the 2411
physician assistant agrees to practice ~~in accordance with the 2412
conditions specified in the physician supervisory plan approved 2413
for that physician or the policies of the health care facility in 2414
which the supervising physician and physician assistant are 2415
practicing~~ under that physician's supervision. 2416~~

~~(2) The agreement shall clearly state that the supervising 2417
physician is legally responsible and assumes legal liability for 2418
the services provided by the physician assistant. The agreement 2419
shall be signed by the physician and the physician assistant. 2420~~

~~(3) The physician assistant shall hold a current certificate 2421
to practice as a physician assistant. 2422~~

~~(4) If a physician supervisory plan applies to the physician 2423
assistant's practice, the physician shall hold an approved 2424
physician supervisory plan. 2425~~

~~(5) If the physician intends to grant physician delegated 2426
prescriptive authority to a physician assistant, the physician 2427~~

~~assistant shall hold a certificate to prescribe issued under this chapter.~~ 2428
2429

~~(6) If the physician holds approval of more than one physician supervisory plan, the agreement shall specify the plan under which the physician assistant will practice.~~ 2430
2431
2432

~~(B) The board shall review each application received. If the board finds that the requirements specified in division (A) of this section have been met and the applicant has paid the fee specified in section 4730.18 of the Revised Code, the board shall approve the supervision agreement and notify the supervising physician of the board's approval. If physician delegated prescriptive authority will be granted to more than one physician assistant under the supervision agreement, the board shall specify in the notice that its approval is specific to each physician assistant. The board shall provide notice of its approval of a supervision agreement not later than thirty days after the board receives a complete application for approval. A supervision agreement shall include either or both of the following:~~ 2433
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~~(1) If a physician assistant will practice within a health care facility, the agreement shall include terms that require the physician assistant to practice in accordance with the policies of the health care facility.~~ 2446
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~~(2) If a physician assistant will practice outside a health care facility, the agreement shall include terms that specify all of the following:~~ 2450
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2452

~~(a) The responsibilities to be fulfilled by the physician in supervising the physician assistant;~~ 2453
2454

~~(b) The responsibilities to be fulfilled by the physician assistant when performing services under the physician's supervision;~~ 2455
2456
2457

~~(c) Any limitations on the responsibilities to be fulfilled~~ 2458

by the physician assistant; 2459

(d) The circumstances under which the physician assistant is 2460
required to refer a patient to the supervising physician; 2461

(e) If the supervising physician chooses to designate 2462
physicians to act as alternate supervising physicians, the names, 2463
business addresses, and business telephone numbers of the 2464
physicians who have agreed to act in that capacity. 2465

~~(C) After a supervision agreement is approved, a physician~~ 2466
~~may apply to the board for approval to initiate supervision of a~~ 2467
~~physician assistant who is not listed on the agreement. There is~~ 2468
~~no fee for applying for the addition of a physician assistant to a~~ 2469
~~supervision agreement.~~ 2470

~~To receive the board's approval of the addition to the~~ 2471
~~supervision agreement, the physician assistant shall hold a~~ 2472
~~current certificate to practice as a physician assistant. If the~~ 2473
~~physician intends to grant physician delegated prescriptive~~ 2474
~~authority to the physician assistant, the physician assistant~~ 2475
~~shall hold a current certificate to prescribe. If these~~ 2476
~~requirements are met, the board shall notify the physician of its~~ 2477
~~approval of the addition to the supervision agreement. The board~~ 2478
~~shall provide notice of its approval not later than thirty days~~ 2479
~~after the board receives a complete application for approval (1)~~ 2480
The supervising physician shall submit a copy of each supervision 2481
agreement to the board. The board may review the supervision 2482
agreement at any time for compliance with this section and for 2483
verification of licensure of the supervising physician and the 2484
physician assistant. All of the following apply to the submission 2485
and review process: 2486

(a) If the board reviews a supervision agreement, the board 2487
shall notify the supervising physician of any way that the 2488
agreement fails to comply with this section. 2489

(b) A supervision agreement becomes effective at the end of 2490
the fifth business day after the day the board receives the 2491
agreement unless the board notifies the supervising physician that 2492
the agreement fails to comply with this section. 2493

A supervision agreement expires two years after the day it 2494
takes effect. The agreement may be renewed by submitting a copy of 2495
it to the board. 2496

(c) If a physician receives a notice under division (C)(1)(a) 2497
of this section, the physician may revise the supervision 2498
agreement and resubmit the agreement to the board. The board may 2499
review the agreement as provided in division (C)(1) of this 2500
section. 2501

(d) Until July 1, 2015, each initial or renewed agreement 2502
submitted under division (C)(1) of this section shall be 2503
accompanied by a fee of twenty-five dollars. No fee is required 2504
for submitting a revised agreement under division (C)(1)(c) of 2505
this section or for submitting an amendment under division (C)(2) 2506
of this section. Fees shall be deposited in accordance with 2507
section 4731.24 of the Revised Code. 2508

(2) Before expiration, a supervision agreement may be amended 2509
by including one or more additional physician assistants. An 2510
amendment to a supervision agreement shall be submitted to the 2511
board for review in the manner provided for review of an initial 2512
agreement under division (C)(1) of this section. The amendment 2513
does not alter the agreement's expiration date. 2514

(D) A supervision agreement shall be kept in the records 2515
maintained by the supervising physician who entered into the 2516
agreement. 2517

(E) The board may impose a civil penalty of not more than one 2518
thousand dollars if it finds through a review conducted under this 2519
section or through any other means either of the following: 2520

<u>(1) A physician assistant has practiced pursuant to a</u>	2521
<u>supervision agreement that fails to comply with this section;</u>	2522
<u>(2) That a physician has acted as the supervising physician</u>	2523
<u>of a physician assistant pursuant to a supervision agreement that</u>	2524
<u>fails to comply with this section.</u>	2525
<u>The board's finding shall be made pursuant to an adjudication</u>	2526
<u>conducted under Chapter 119. of the Revised Code. A civil penalty</u>	2527
<u>imposed under this division may be in addition to or in lieu of</u>	2528
<u>any other action the board may take under section 4730.25 of the</u>	2529
<u>Revised Code.</u>	2530
<u>Sec. 4730.20. (A) A physician assistant licensed under this</u>	2531
<u>chapter may perform any of the following services authorized by</u>	2532
<u>the supervising physician that are part of the supervising</u>	2533
<u>physician's normal course of practice and expertise:</u>	2534
<u>(1) Ordering diagnostic, therapeutic, and other medical</u>	2535
<u>services;</u>	2536
<u>(2) Prescribing physical therapy or referring a patient to a</u>	2537
<u>physical therapist for physical therapy;</u>	2538
<u>(3) Ordering occupational therapy or referring a patient to</u>	2539
<u>an occupational therapist for occupational therapy;</u>	2540
<u>(4) Taking any action that may be taken by an attending</u>	2541
<u>physician under sections 2133.21 to 2133.26 of the Revised Code,</u>	2542
<u>as specified in section 2133.211 of the Revised Code;</u>	2543
<u>(5) Determining and pronouncing death in accordance with</u>	2544
<u>section 4730.202 of the Revised Code;</u>	2545
<u>(6) Assisting in surgery;</u>	2546
<u>(7) If the physician assistant holds a valid prescriber</u>	2547
<u>number issued by the state medical board and has been granted</u>	2548
<u>physician-delegated prescriptive authority, ordering, prescribing,</u>	2549

personally furnishing, and administering drugs and medical 2550
devices; 2551

(8) Any other services that are part of the supervising 2552
physician's normal course of practice and expertise. 2553

(B) The services a physician assistant may provide under the 2554
policies of a health care facility are limited to the services the 2555
facility authorizes the physician assistant to provide for the 2556
facility. A facility shall not authorize a physician assistant to 2557
perform a service that is prohibited under this chapter. A 2558
physician who is supervising a physician assistant within a health 2559
care facility may impose limitations on the physician assistant's 2560
practice that are in addition to any limitations applicable under 2561
the policies of the facility. 2562

Sec. ~~4730.091~~ 4730.201. (A) As used in this section, "local 2563
anesthesia" means the injection of a drug or combination of drugs 2564
to stop or prevent a painful sensation in a circumscribed area of 2565
the body where a painful procedure is to be performed. "Local 2566
anesthesia" includes only local infiltration anesthesia, digital 2567
blocks, and pudendal blocks. 2568

(B) A physician assistant may administer, monitor, or 2569
maintain local anesthesia as a component of a procedure the 2570
physician assistant is performing or as a separate service when 2571
the procedure requiring local anesthesia is to be performed by the 2572
physician assistant's supervising physician or another person. A 2573
physician assistant shall not administer, monitor, or maintain any 2574
other form of anesthesia, including regional anesthesia or any 2575
systemic sedation, ~~regardless of whether the physician assistant~~ 2576
~~is practicing under a physician supervisory plan or the policies~~ 2577
~~of a health care facility.~~ 2578

Sec. ~~4730.092~~ 4730.202. (A) A physician assistant may 2579

determine and pronounce an individual's death, but only if the 2580
individual's respiratory and circulatory functions are not being 2581
artificially sustained and, at the time the determination and 2582
pronouncement of death is made, either or both of the following 2583
apply: 2584

(1) The individual was receiving care in one of the 2585
following: 2586

(a) A nursing home licensed under section 3721.02 of the 2587
Revised Code or by a political subdivision under section 3721.09 2588
of the Revised Code; 2589

(b) A residential care facility or home for the aging 2590
licensed under Chapter 3721. of the Revised Code; 2591

(c) A county home or district home operated pursuant to 2592
Chapter 5155. of the Revised Code; 2593

(d) A residential facility licensed under section 5123.19 of 2594
the Revised Code. 2595

(2) The physician assistant is providing or supervising the 2596
individual's care through a hospice care program licensed under 2597
Chapter 3712. of the Revised Code or any other entity that 2598
provides palliative care. 2599

(B) If a physician assistant determines and pronounces an 2600
individual's death, the physician assistant shall comply with both 2601
of the following: 2602

(1) The physician assistant shall not complete any portion of 2603
the individual's death certificate. 2604

(2) The physician assistant shall notify the individual's 2605
attending physician of the determination and pronouncement of 2606
death in order for the physician to fulfill the physician's duties 2607
under section 3705.16 of the Revised Code. The physician assistant 2608
shall provide the notification within a period of time that is 2609

reasonable but not later than twenty-four hours following the 2610
determination and pronouncement of the individual's death. 2611

Sec. 4730.203. (A) Acting pursuant to a supervision 2612
agreement, a physician assistant may delegate performance of a 2613
task to implement a patient's plan of care or, if the conditions 2614
in division (C) of this section are met, may delegate 2615
administration of a drug. Delegation may be to a person who has 2616
successfully completed a training and competency evaluation 2617
program approved by the director of health under section 3721.31 2618
of the Revised Code or, subject to division (D) of section 4730.03 2619
of the Revised Code, any other person. The physician assistant 2620
must be physically present at the location where the task is 2621
performed or the drug administered. 2622

(B) Prior to delegating a task or administration of a drug, a 2623
physician assistant shall determine that the task or drug is 2624
appropriate for the patient and the person to whom the delegation 2625
is to be made may safely perform the task or administer the drug. 2626

(C) A physician assistant may delegate administration of a 2627
drug only if all of the following conditions are met: 2628

(1) The physician assistant has physician-delegated 2629
prescriptive authority. 2630

(2) The drug is included in the formulary established under 2631
division (A) of section 4730.39 of the Revised Code. 2632

(3) The drug is not a controlled substance. 2633

(4) The drug will not be administered intravenously. 2634

(5) The drug will not be administered in a hospital inpatient 2635
care unit, as defined in section 3727.50 of the Revised Code; a 2636
hospital emergency department; a freestanding emergency 2637
department; or an ambulatory surgical facility licensed under 2638
section 3702.30 of the Revised Code. 2639

(D) A person not otherwise authorized to administer a drug or perform a specific task may do so in accordance with a physician assistant's delegation under this section. 2640
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2642

Sec. 4730.21. (A) The supervising physician of a physician assistant exercises supervision, control, and direction of the physician assistant. ~~In A physician assistant may practice in any setting within which the supervising physician has supervision, control, and direction of the physician assistant.~~ 2643
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In supervising a physician assistant, all of the following apply: 2648
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(1) ~~Except when the on-site supervision requirements specified in section 4730.45 of the Revised Code are applicable, the~~ The supervising physician shall be continuously available for direct communication with the physician assistant by either of the following means: 2650
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(a) Being physically present at the location where the physician assistant is practicing; 2655
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(b) Being readily available to the physician assistant through some means of telecommunication and being in a location that ~~under normal conditions is not more than sixty minutes travel time away~~ a distance from the location where the physician assistant is practicing that reasonably allows the physician to assure proper care of patients. 2657
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(2) The supervising physician shall personally and actively review the physician assistant's professional activities. 2663
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~~(3) The supervising physician shall regularly review the condition of the patients treated by the physician assistant.~~ 2665
2666

~~(4)~~ The supervising physician shall ensure that the quality assurance system established pursuant to division (F) of this section is implemented and maintained. 2667
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~~(5)~~(4) The supervising physician shall regularly perform any 2670
other reviews of the physician assistant that the supervising 2671
physician considers necessary. 2672

(B) A physician may enter into supervision agreements with 2673
any number of physician assistants, but the physician may not 2674
supervise more than ~~two~~ three physician assistants at any one 2675
time. A physician assistant may enter into supervision agreements 2676
with any number of supervising physicians, ~~but when practicing~~ 2677
~~under the supervision of a particular physician, the physician~~ 2678
~~assistant's scope of practice is subject to the limitations of the~~ 2679
~~physician supervisory plan that has been approved under section~~ 2680
~~4730.17 of the Revised Code for that physician or the policies of~~ 2681
~~the health care facility in which the physician and physician~~ 2682
~~assistant are practicing.~~ 2683

(C) ~~A supervising physician may authorize a physician~~ 2684
~~assistant to perform a service only if the service is authorized~~ 2685
~~under the physician supervisory plan approved for that physician~~ 2686
~~or the policies of the health care facility in which the physician~~ 2687
~~and physician assistant are practicing.~~ A supervising physician 2688
may authorize a physician assistant to perform a service only if 2689
the physician is satisfied that the physician assistant is capable 2690
of competently performing the service. A supervising physician 2691
shall not authorize a physician assistant to perform any service 2692
that is beyond the physician's or the physician assistant's normal 2693
course of practice and expertise. 2694

(D)~~(1)~~ ~~A supervising physician may authorize a physician~~ 2695
~~assistant to practice in any setting within which the supervising~~ 2696
~~physician routinely practices.~~ 2697

~~(2)~~ In the case of a health care facility with an emergency 2698
department, if the supervising physician routinely practices in 2699
the facility's emergency department, the supervising physician 2700
shall provide on-site supervision of the physician assistant when 2701

the physician assistant practices in the emergency department. If 2702
the supervising physician does not routinely practice in the 2703
facility's emergency department, the supervising physician may, on 2704
occasion, send the physician assistant to the facility's emergency 2705
department to assess and manage a patient. In supervising the 2706
physician assistant's assessment and management of the patient, 2707
the supervising physician shall determine the appropriate level of 2708
supervision in compliance with the requirements of divisions (A) 2709
to (C) of this section, except that the supervising physician must 2710
be available to go to the emergency department to personally 2711
evaluate the patient and, at the request of an emergency 2712
department physician, the supervising physician shall go to the 2713
emergency department to personally evaluate the patient. 2714

(E) Each time a physician assistant writes a medical order, 2715
including prescriptions written in the exercise of 2716
physician-delegated prescriptive authority, the physician 2717
assistant shall sign the form on which the order is written and 2718
record on the form the time and date that the order is written. 2719
~~When writing a medical order, the physician assistant shall~~ 2720
~~clearly identify the physician under whose supervision the~~ 2721
~~physician assistant is authorized to write the order.~~ 2722

(F)(1) The supervising physician of a physician assistant 2723
shall establish a quality assurance system to be used in 2724
supervising the physician assistant. All or part of the system may 2725
be applied to other physician assistants who are supervised by the 2726
supervising physician. The system shall be developed in 2727
consultation with each physician assistant to be supervised by the 2728
physician. 2729

(2) In establishing the quality assurance system, the 2730
supervising physician shall describe a process to be used for all 2731
of the following: 2732

(a) Routine review by the physician of selected patient 2733

record entries made by the physician assistant and selected	2734
medical orders issued by the physician assistant;	2735
(b) Discussion of complex cases;	2736
(c) Discussion of new medical developments relevant to the practice of the physician and physician assistant;	2737 2738
(d) Performance of any quality assurance activities required in rules adopted by state medical board pursuant to any recommendations made by the physician assistant policy committee under section 4730.06 of the Revised Code;	2739 2740 2741 2742
(e) Performance of any other quality assurance activities that the supervising physician considers to be appropriate.	2743 2744
(3) The supervising physician and physician assistant shall keep records of their quality assurance activities. On request, the records shall be made available to the board and any health care professional working with the supervising physician and physician assistant.	2745 2746 2747 2748 2749
Sec. 4730.22. (A) A <u>When performing authorized services, a physician assistant acts as the agent of the</u> physician assistant's supervising physician. <u>The supervising physician is legally responsible and</u> assumes legal liability for the services provided by the physician assistant.	2750 2751 2752 2753 2754
The physician is not <u>responsible or</u> liable for any services provided by the physician assistant after their supervision agreement <u>expires or</u> is terminated.	2755 2756 2757
(B) When a health care facility permits physician assistants to practice within that facility or any other health care facility under its control, the health care facility shall make reasonable efforts to explain to each individual who may work with a particular physician assistant the scope of that physician assistant's practice within the facility. The appropriate	2758 2759 2760 2761 2762 2763

credentialing body within the health care facility shall provide, 2764
on request of an individual practicing in the facility with a 2765
physician assistant, a copy of the facility's policies on the 2766
practice of physician assistants within the facility and a copy of 2767
each ~~physician supervisory plan and~~ supervision agreement 2768
applicable to the physician assistant. 2769

An individual who follows the orders of a physician assistant 2770
practicing in a health care facility is not subject to 2771
disciplinary action by any administrative agency that governs that 2772
individual's conduct and is not liable in damages in a civil 2773
action for injury, death, or loss to person or property resulting 2774
from the individual's acts or omissions in the performance of any 2775
procedure, treatment, or other health care service if the 2776
individual reasonably believed that the physician assistant was 2777
acting within the proper scope of practice or was relaying medical 2778
orders from a supervising physician, unless the act or omission 2779
constitutes willful or wanton misconduct. 2780

Sec. 4730.25. (A) The state medical board, by an affirmative 2781
vote of not fewer than six members, may revoke or may refuse to 2782
grant a ~~certificate~~ license to practice as a physician assistant 2783
~~or a certificate to prescribe~~ to a person found by the board to 2784
have committed fraud, misrepresentation, or deception in applying 2785
for or securing the ~~certificate~~ license. 2786

(B) The board, by an affirmative vote of not fewer than six 2787
members, shall, to the extent permitted by law, limit, revoke, or 2788
suspend an individual's ~~certificate~~ license to practice as a 2789
physician assistant or ~~certificate to prescribe~~ prescriber number, 2790
refuse to issue a ~~certificate~~ license to an applicant, refuse to 2791
reinstate a ~~certificate~~ license, or reprimand or place on 2792
probation the holder of a ~~certificate~~ license for any of the 2793
following reasons: 2794

(1) Failure to practice in accordance with the conditions	2795
under which the supervising physician's supervision agreement with	2796
the physician assistant was approved, including the requirement	2797
that when practicing under a particular supervising physician, the	2798
physician assistant must practice only according to the physician	2799
supervisory plan the board approved for that physician or,	2800
<u>including, if applicable,</u> the policies of the health care facility	2801
in which the supervising physician and physician assistant are	2802
practicing;	2803
(2) Failure to comply with the requirements of this chapter,	2804
Chapter 4731. of the Revised Code, or any rules adopted by the	2805
board;	2806
(3) Violating or attempting to violate, directly or	2807
indirectly, or assisting in or abetting the violation of, or	2808
conspiring to violate, any provision of this chapter, Chapter	2809
4731. of the Revised Code, or the rules adopted by the board;	2810
(4) Inability to practice according to acceptable and	2811
prevailing standards of care by reason of mental illness or	2812
physical illness, including physical deterioration that adversely	2813
affects cognitive, motor, or perceptive skills;	2814
(5) Impairment of ability to practice according to acceptable	2815
and prevailing standards of care because of habitual or excessive	2816
use or abuse of drugs, alcohol, or other substances that impair	2817
ability to practice;	2818
(6) Administering drugs for purposes other than those	2819
authorized under this chapter;	2820
(7) Willfully betraying a professional confidence;	2821
(8) Making a false, fraudulent, deceptive, or misleading	2822
statement in soliciting or advertising for employment as a	2823
physician assistant; in connection with any solicitation or	2824
advertisement for patients; in relation to the practice of	2825

medicine as it pertains to physician assistants; or in securing or 2826
attempting to secure a ~~certificate~~ license to practice as a 2827
physician assistant, ~~a certificate to prescribe, or approval of a~~ 2828
~~supervision agreement.~~ 2829

As used in this division, "false, fraudulent, deceptive, or 2830
misleading statement" means a statement that includes a 2831
misrepresentation of fact, is likely to mislead or deceive because 2832
of a failure to disclose material facts, is intended or is likely 2833
to create false or unjustified expectations of favorable results, 2834
or includes representations or implications that in reasonable 2835
probability will cause an ordinarily prudent person to 2836
misunderstand or be deceived. 2837

(9) Representing, with the purpose of obtaining compensation 2838
or other advantage personally or for any other person, that an 2839
incurable disease or injury, or other incurable condition, can be 2840
permanently cured; 2841

(10) The obtaining of, or attempting to obtain, money or 2842
anything of value by fraudulent misrepresentations in the course 2843
of practice; 2844

(11) A plea of guilty to, a judicial finding of guilt of, or 2845
a judicial finding of eligibility for intervention in lieu of 2846
conviction for, a felony; 2847

(12) Commission of an act that constitutes a felony in this 2848
state, regardless of the jurisdiction in which the act was 2849
committed; 2850

(13) A plea of guilty to, a judicial finding of guilt of, or 2851
a judicial finding of eligibility for intervention in lieu of 2852
conviction for, a misdemeanor committed in the course of practice; 2853

(14) A plea of guilty to, a judicial finding of guilt of, or 2854
a judicial finding of eligibility for intervention in lieu of 2855
conviction for, a misdemeanor involving moral turpitude; 2856

(15) Commission of an act in the course of practice that constitutes a misdemeanor in this state, regardless of the jurisdiction in which the act was committed;	2857 2858 2859
(16) Commission of an act involving moral turpitude that constitutes a misdemeanor in this state, regardless of the jurisdiction in which the act was committed;	2860 2861 2862
(17) A plea of guilty to, a judicial finding of guilt of, or a judicial finding of eligibility for intervention in lieu of conviction for violating any state or federal law regulating the possession, distribution, or use of any drug, including trafficking in drugs;	2863 2864 2865 2866 2867
(18) Any of the following actions taken by the state agency responsible for regulating the practice of physician assistants in another state, for any reason other than the nonpayment of fees: the limitation, revocation, or suspension of an individual's license to practice; acceptance of an individual's license surrender; denial of a license; refusal to renew or reinstate a license; imposition of probation; or issuance of an order of censure or other reprimand;	2868 2869 2870 2871 2872 2873 2874 2875
(19) A departure from, or failure to conform to, minimal standards of care of similar physician assistants under the same or similar circumstances, regardless of whether actual injury to a patient is established;	2876 2877 2878 2879
(20) Violation of the conditions placed by the board on a certificate <u>license</u> to practice as a physician assistant, a certificate to prescribe, a physician supervisory plan, or supervision agreement;	2880 2881 2882 2883
(21) Failure to use universal blood and body fluid precautions established by rules adopted under section 4731.051 of the Revised Code;	2884 2885 2886
(22) Failure to cooperate in an investigation conducted by	2887

the board under section 4730.26 of the Revised Code, including 2888
failure to comply with a subpoena or order issued by the board or 2889
failure to answer truthfully a question presented by the board at 2890
a deposition or in written interrogatories, except that failure to 2891
cooperate with an investigation shall not constitute grounds for 2892
discipline under this section if a court of competent jurisdiction 2893
has issued an order that either quashes a subpoena or permits the 2894
individual to withhold the testimony or evidence in issue; 2895

(23) Assisting suicide, as defined in section 3795.01 of the 2896
Revised Code; 2897

(24) Prescribing any drug or device to perform or induce an 2898
abortion, or otherwise performing or inducing an abortion; 2899

(25) Failure to comply with the requirements in section 2900
3719.061 of the Revised Code before issuing ~~to~~ for a minor a 2901
prescription for a controlled substance containing an opioid; 2902

(26) Having certification by the national commission on 2903
certification of physician assistants or a successor organization 2904
expire, lapse, or be suspended or revoked. 2905

(C) Disciplinary actions taken by the board under divisions 2906
(A) and (B) of this section shall be taken pursuant to an 2907
adjudication under Chapter 119. of the Revised Code, except that 2908
in lieu of an adjudication, the board may enter into a consent 2909
agreement with a physician assistant or applicant to resolve an 2910
allegation of a violation of this chapter or any rule adopted 2911
under it. A consent agreement, when ratified by an affirmative 2912
vote of not fewer than six members of the board, shall constitute 2913
the findings and order of the board with respect to the matter 2914
addressed in the agreement. If the board refuses to ratify a 2915
consent agreement, the admissions and findings contained in the 2916
consent agreement shall be of no force or effect. 2917

(D) For purposes of divisions (B)(12), (15), and (16) of this 2918

section, the commission of the act may be established by a finding 2919
by the board, pursuant to an adjudication under Chapter 119. of 2920
the Revised Code, that the applicant or ~~certificate~~ license holder 2921
committed the act in question. The board shall have no 2922
jurisdiction under these divisions in cases where the trial court 2923
renders a final judgment in the ~~certificate~~ license holder's favor 2924
and that judgment is based upon an adjudication on the merits. The 2925
board shall have jurisdiction under these divisions in cases where 2926
the trial court issues an order of dismissal upon technical or 2927
procedural grounds. 2928

(E) The sealing of conviction records by any court shall have 2929
no effect upon a prior board order entered under the provisions of 2930
this section or upon the board's jurisdiction to take action under 2931
the provisions of this section if, based upon a plea of guilty, a 2932
judicial finding of guilt, or a judicial finding of eligibility 2933
for intervention in lieu of conviction, the board issued a notice 2934
of opportunity for a hearing prior to the court's order to seal 2935
the records. The board shall not be required to seal, destroy, 2936
redact, or otherwise modify its records to reflect the court's 2937
sealing of conviction records. 2938

(F) For purposes of this division, any individual who holds a 2939
~~certificate~~ license issued under this chapter, or applies for a 2940
~~certificate~~ license issued under this chapter, shall be deemed to 2941
have given consent to submit to a mental or physical examination 2942
when directed to do so in writing by the board and to have waived 2943
all objections to the admissibility of testimony or examination 2944
reports that constitute a privileged communication. 2945

(1) In enforcing division (B)(4) of this section, the board, 2946
upon a showing of a possible violation, may compel any individual 2947
who holds a ~~certificate~~ license issued under this chapter or who 2948
has applied for a ~~certificate~~ license pursuant to this chapter to 2949
submit to a mental examination, physical examination, including an 2950

HIV test, or both a mental and physical examination. The expense 2951
of the examination is the responsibility of the individual 2952
compelled to be examined. Failure to submit to a mental or 2953
physical examination or consent to an HIV test ordered by the 2954
board constitutes an admission of the allegations against the 2955
individual unless the failure is due to circumstances beyond the 2956
individual's control, and a default and final order may be entered 2957
without the taking of testimony or presentation of evidence. If 2958
the board finds a physician assistant unable to practice because 2959
of the reasons set forth in division (B)(4) of this section, the 2960
board shall require the physician assistant to submit to care, 2961
counseling, or treatment by physicians approved or designated by 2962
the board, as a condition for an initial, continued, reinstated, 2963
or renewed ~~certificate~~ license. An individual affected under this 2964
division shall be afforded an opportunity to demonstrate to the 2965
board the ability to resume practicing in compliance with 2966
acceptable and prevailing standards of care. 2967

(2) For purposes of division (B)(5) of this section, if the 2968
board has reason to believe that any individual who holds a 2969
~~certificate~~ license issued under this chapter or any applicant for 2970
a ~~certificate~~ license suffers such impairment, the board may 2971
compel the individual to submit to a mental or physical 2972
examination, or both. The expense of the examination is the 2973
responsibility of the individual compelled to be examined. Any 2974
mental or physical examination required under this division shall 2975
be undertaken by a treatment provider or physician qualified to 2976
conduct such examination and chosen by the board. 2977

Failure to submit to a mental or physical examination ordered 2978
by the board constitutes an admission of the allegations against 2979
the individual unless the failure is due to circumstances beyond 2980
the individual's control, and a default and final order may be 2981
entered without the taking of testimony or presentation of 2982

evidence. If the board determines that the individual's ability to practice is impaired, the board shall suspend the individual's ~~certificate~~ license or deny the individual's application and shall require the individual, as a condition for initial, continued, reinstated, or renewed ~~certification~~ licensure to practice or prescribe, to submit to treatment.

Before being eligible to apply for reinstatement of a ~~certificate~~ license suspended under this division, the physician assistant shall demonstrate to the board the ability to resume practice or prescribing in compliance with acceptable and prevailing standards of care. The demonstration shall include the following:

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

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

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

The board may reinstate a ~~certificate~~ license suspended under this division after such demonstration and after the individual has entered into a written consent agreement.

When the impaired physician assistant resumes practice or prescribing, the board shall require continued monitoring of the physician assistant. The monitoring shall include compliance with the written consent agreement entered into before reinstatement or with conditions imposed by board order after a hearing, and, upon

termination of the consent agreement, submission to the board for 3014
at least two years of annual written progress reports made under 3015
penalty of falsification stating whether the physician assistant 3016
has maintained sobriety. 3017

(G) If the secretary and supervising member determine that 3018
there is clear and convincing evidence that a physician assistant 3019
has violated division (B) of this section and that the 3020
individual's continued practice or prescribing presents a danger 3021
of immediate and serious harm to the public, they may recommend 3022
that the board suspend the individual's ~~certificate~~ license to 3023
practice or authority to prescribe without a prior hearing. 3024
Written allegations shall be prepared for consideration by the 3025
board. 3026

The board, upon review of those allegations and by an 3027
affirmative vote of not fewer than six of its members, excluding 3028
the secretary and supervising member, may suspend a ~~certificate~~ 3029
license without a prior hearing. A telephone conference call may 3030
be utilized for reviewing the allegations and taking the vote on 3031
the summary suspension. 3032

The board shall issue a written order of suspension by 3033
certified mail or in person in accordance with section 119.07 of 3034
the Revised Code. The order shall not be subject to suspension by 3035
the court during pendency of any appeal filed under section 119.12 3036
of the Revised Code. If the physician assistant requests an 3037
adjudicatory hearing by the board, the date set for the hearing 3038
shall be within fifteen days, but not earlier than seven days, 3039
after the physician assistant requests the hearing, unless 3040
otherwise agreed to by both the board and the ~~certificate~~ license 3041
holder. 3042

A summary suspension imposed under this division shall remain 3043
in effect, unless reversed on appeal, until a final adjudicative 3044
order issued by the board pursuant to this section and Chapter 3045

119. of the Revised Code becomes effective. The board shall issue 3046
its final adjudicative order within sixty days after completion of 3047
its hearing. Failure to issue the order within sixty days shall 3048
result in dissolution of the summary suspension order, but shall 3049
not invalidate any subsequent, final adjudicative order. 3050

(H) If the board takes action under division (B)(11), (13), 3051
or (14) of this section, and the judicial finding of guilt, guilty 3052
plea, or judicial finding of eligibility for intervention in lieu 3053
of conviction is overturned on appeal, upon exhaustion of the 3054
criminal appeal, a petition for reconsideration of the order may 3055
be filed with the board along with appropriate court documents. 3056
Upon receipt of a petition and supporting court documents, the 3057
board shall reinstate the ~~certificate~~ license to practice ~~or~~ 3058
~~prescribe~~. The board may then hold an adjudication under Chapter 3059
119. of the Revised Code to determine whether the individual 3060
committed the act in question. Notice of opportunity for hearing 3061
shall be given in accordance with Chapter 119. of the Revised 3062
Code. If the board finds, pursuant to an adjudication held under 3063
this division, that the individual committed the act, or if no 3064
hearing is requested, it may order any of the sanctions identified 3065
under division (B) of this section. 3066

(I) The ~~certificate~~ license to practice issued to a physician 3067
assistant and the physician assistant's practice in this state are 3068
automatically suspended as of the date the physician assistant 3069
pleads guilty to, is found by a judge or jury to be guilty of, or 3070
is subject to a judicial finding of eligibility for intervention 3071
in lieu of conviction in this state or treatment or intervention 3072
in lieu of conviction in another state for any of the following 3073
criminal offenses in this state or a substantially equivalent 3074
criminal offense in another jurisdiction: aggravated murder, 3075
murder, voluntary manslaughter, felonious assault, kidnapping, 3076
rape, sexual battery, gross sexual imposition, aggravated arson, 3077

aggravated robbery, or aggravated burglary. Continued practice 3078
after the suspension shall be considered practicing without a 3079
~~certificate~~ license. 3080

The board shall notify the individual subject to the 3081
suspension by certified mail or in person in accordance with 3082
section 119.07 of the Revised Code. If an individual whose 3083
~~certificate~~ license is suspended under this division fails to make 3084
a timely request for an adjudication under Chapter 119. of the 3085
Revised Code, the board shall enter a final order permanently 3086
revoking the individual's ~~certificate~~ license to practice. 3087

(J) In any instance in which the board is required by Chapter 3088
119. of the Revised Code to give notice of opportunity for hearing 3089
and the individual subject to the notice does not timely request a 3090
hearing in accordance with section 119.07 of the Revised Code, the 3091
board is not required to hold a hearing, but may adopt, by an 3092
affirmative vote of not fewer than six of its members, a final 3093
order that contains the board's findings. In that final order, the 3094
board may order any of the sanctions identified under division (A) 3095
or (B) of this section. 3096

(K) Any action taken by the board under division (B) of this 3097
section resulting in a suspension shall be accompanied by a 3098
written statement of the conditions under which the physician 3099
assistant's ~~certificate~~ license may be reinstated. The board shall 3100
adopt rules in accordance with Chapter 119. of the Revised Code 3101
governing conditions to be imposed for reinstatement. 3102
Reinstatement of a ~~certificate~~ license suspended pursuant to 3103
division (B) of this section requires an affirmative vote of not 3104
fewer than six members of the board. 3105

(L) When the board refuses to grant to an applicant a 3106
~~certificate~~ license to practice as a physician assistant ~~or a~~ 3107
~~certificate to prescribe~~, revokes an individual's ~~certificate~~ 3108
license, refuses to issue a ~~certificate~~ license, or refuses to 3109

reinstate an individual's ~~certificate~~ license, the board may 3110
specify that its action is permanent. An individual subject to a 3111
permanent action taken by the board is forever thereafter 3112
ineligible to hold the ~~certificate~~ license and the board shall not 3113
accept an application for reinstatement of the ~~certificate~~ license 3114
or for issuance of a new ~~certificate~~ license. 3115

(M) Notwithstanding any other provision of the Revised Code, 3116
all of the following apply: 3117

(1) The surrender of a ~~certificate~~ license issued under this 3118
chapter is not effective unless or until accepted by the board. 3119
Reinstatement of a ~~certificate~~ license surrendered to the board 3120
requires an affirmative vote of not fewer than six members of the 3121
board. 3122

(2) An application made under this chapter for a ~~certificate,~~ 3123
~~approval of a physician supervisory plan, or approval of a~~ 3124
~~supervision agreement~~ license may not be withdrawn without 3125
approval of the board. 3126

(3) Failure by an individual to renew a ~~certificate~~ license 3127
in accordance with section 4730.14 ~~or section 4730.48~~ of the 3128
Revised Code shall not remove or limit the board's jurisdiction to 3129
take disciplinary action under this section against the 3130
individual. 3131

Sec. 4730.251. On receipt of a notice pursuant to section 3132
3123.43 of the Revised Code, the state medical board shall comply 3133
with sections 3123.41 to 3123.50 of the Revised Code and any 3134
applicable rules adopted under section 3123.63 of the Revised Code 3135
with respect to a ~~certificate~~ license to practice as a physician 3136
assistant issued pursuant to this chapter. 3137

Sec. 4730.27. If the state medical board has reason to 3138
believe that any person who has been granted a ~~certificate~~ license 3139

under this chapter to practice as a physician assistant is 3140
mentally ill or mentally incompetent, it may file in the probate 3141
court of the county in which such person has a legal residence an 3142
affidavit in the form prescribed in section 5122.11 of the Revised 3143
Code and signed by the board secretary or a member of the 3144
secretary's staff, whereupon the same proceedings shall be had as 3145
provided in Chapter 5122. of the Revised Code. The attorney 3146
general may represent the board in any proceeding commenced under 3147
this section. 3148

If a physician assistant is adjudged by a probate court to be 3149
mentally ill or mentally incompetent, the individual's ~~certificate~~ 3150
license shall be automatically suspended until the individual has 3151
filed with the board a certified copy of an adjudication by a 3152
probate court of being restored to competency or has submitted to 3153
the board proof, satisfactory to the board, of having been 3154
discharged as being restored to competency in the manner and form 3155
provided in section 5122.38 of the Revised Code. The judge of the 3156
court shall immediately notify the board of an adjudication of 3157
incompetence and note any suspension of a ~~certificate~~ license in 3158
the margin of the court's record of the ~~certificate~~ license. 3159

Sec. 4730.28. (A) An individual whose ~~certificate~~ license to 3160
practice as a physician assistant issued under this chapter has 3161
been suspended or is in an inactive state for any cause for more 3162
than two years may apply to the state medical board to have the 3163
~~certificate~~ license restored. 3164

(B)(1) The board shall not restore a ~~certificate~~ license 3165
under this section unless the applicant complies with sections 3166
4776.01 to 4776.04 of the Revised Code. The board shall determine 3167
the applicant's present fitness to resume practice. The board 3168
shall consider the moral background and the activities of the 3169
applicant during the period of suspension or inactivity. 3170

(2) When restoring a certificate <u>license</u> , the board may	3171
impose terms and conditions, including the following:	3172
(a) Requiring the applicant to obtain additional training and	3173
pass an examination upon completion of the training;	3174
(b) Restricting or limiting the extent, scope, or type of	3175
practice as a physician assistant that the individual may resume.	3176
Sec. 4730.31. (A) As used in this section, "prosecutor" has	3177
the same meaning as in section 2935.01 of the Revised Code.	3178
(B) Whenever any person holding a valid certificate <u>license</u>	3179
<u>to practice as a physician assistant</u> issued pursuant to this	3180
chapter pleads guilty to, is subject to a judicial finding of	3181
guilt of, or is subject to a judicial finding of eligibility for	3182
intervention in lieu of conviction for a violation of Chapter	3183
2907., 2925., or 3719. of the Revised Code or of any substantively	3184
comparable ordinance of a municipal corporation in connection with	3185
practicing as a physician assistant, the prosecutor in the case	3186
shall, on forms prescribed and provided by the state medical	3187
board, promptly notify the board of the conviction. Within thirty	3188
days of receipt of such information, the board shall initiate	3189
action in accordance with Chapter 119. of the Revised Code to	3190
determine whether to suspend or revoke the certificate <u>license</u>	3191
under section 4730.25 of the Revised Code.	3192
(C) The prosecutor in any case against any person holding a	3193
valid certificate <u>license</u> issued pursuant to this chapter shall,	3194
on forms prescribed and provided by the state medical board,	3195
notify the board of any of the following:	3196
(1) A plea of guilty to, a judicial finding of guilt of, or	3197
judicial finding of eligibility for intervention in lieu of	3198
conviction for a felony, or a case where the trial court issues an	3199
order of dismissal upon technical or procedural grounds of a	3200

felony charge; 3201

(2) A plea of guilty to, a judicial finding of guilt of, or 3202
judicial finding or eligibility for intervention in lieu of 3203
conviction for a misdemeanor committed in the course of practice, 3204
or a case where the trial court issues an order of dismissal upon 3205
technical or procedural grounds of a charge of a misdemeanor, if 3206
the alleged act was committed in the course of practice; 3207

(3) A plea of guilty to, a judicial finding of guilt of, or 3208
judicial finding of eligibility for intervention in lieu of 3209
conviction for a misdemeanor involving moral turpitude, or a case 3210
where the trial court issues an order of dismissal upon technical 3211
or procedural grounds of a charge of a misdemeanor involving moral 3212
turpitude. 3213

The report shall include the name and address of the 3214
~~certificate~~ license holder, the nature of the offense for which 3215
the action was taken, and the certified court documents recording 3216
the action. 3217

Sec. 4730.32. (A) Within sixty days after the imposition of 3218
any formal disciplinary action taken by a health care facility 3219
against any individual holding a valid ~~certificate~~ license to 3220
practice as a physician assistant issued under this chapter, the 3221
chief administrator or executive officer of the facility shall 3222
report to the state medical board the name of the individual, the 3223
action taken by the facility, and a summary of the underlying 3224
facts leading to the action taken. Upon request, the board shall 3225
be provided certified copies of the patient records that were the 3226
basis for the facility's action. Prior to release to the board, 3227
the summary shall be approved by the peer review committee that 3228
reviewed the case or by the governing board of the facility. 3229

The filing of a report with the board or decision not to file 3230
a report, investigation by the board, or any disciplinary action 3231

taken by the board, does not preclude a health care facility from 3232
taking disciplinary action against a physician assistant. 3233

In the absence of fraud or bad faith, no individual or entity 3234
that provides patient records to the board shall be liable in 3235
damages to any person as a result of providing the records. 3236

(B) A physician assistant, professional association or 3237
society of physician assistants, physician, or professional 3238
association or society of physicians that believes a violation of 3239
any provision of this chapter, Chapter 4731. of the Revised Code, 3240
or rule of the board has occurred shall report to the board the 3241
information upon which the belief is based. This division does not 3242
require any treatment provider approved by the board under section 3243
4731.25 of the Revised Code or any employee, agent, or 3244
representative of such a provider to make reports with respect to 3245
a physician assistant participating in treatment or aftercare for 3246
substance abuse as long as the physician assistant maintains 3247
participation in accordance with the requirements of section 3248
4731.25 of the Revised Code and the treatment provider or 3249
employee, agent, or representative of the provider has no reason 3250
to believe that the physician assistant has violated any provision 3251
of this chapter or rule adopted under it, other than being 3252
impaired by alcohol, drugs, or other substances. This division 3253
does not require reporting by any member of an impaired 3254
practitioner committee established by a health care facility or by 3255
any representative or agent of a committee or program sponsored by 3256
a professional association or society of physician assistants to 3257
provide peer assistance to physician assistants with substance 3258
abuse problems with respect to a physician assistant who has been 3259
referred for examination to a treatment program approved by the 3260
board under section 4731.25 of the Revised Code if the physician 3261
assistant cooperates with the referral for examination and with 3262
any determination that the physician assistant should enter 3263

treatment and as long as the committee member, representative, or 3264
agent has no reason to believe that the physician assistant has 3265
ceased to participate in the treatment program in accordance with 3266
section 4731.25 of the Revised Code or has violated any provision 3267
of this chapter or rule adopted under it, other than being 3268
impaired by alcohol, drugs, or other substances. 3269

(C) Any professional association or society composed 3270
primarily of physician assistants that suspends or revokes an 3271
individual's membership for violations of professional ethics, or 3272
for reasons of professional incompetence or professional 3273
malpractice, within sixty days after a final decision, shall 3274
report to the board, on forms prescribed and provided by the 3275
board, the name of the individual, the action taken by the 3276
professional organization, and a summary of the underlying facts 3277
leading to the action taken. 3278

The filing or nonfiling of a report with the board, 3279
investigation by the board, or any disciplinary action taken by 3280
the board, shall not preclude a professional organization from 3281
taking disciplinary action against a physician assistant. 3282

(D) Any insurer providing professional liability insurance to 3283
any person holding a valid ~~certificate~~ license to practice as a 3284
physician assistant issued under this chapter or any other entity 3285
that seeks to indemnify the professional liability of a physician 3286
assistant shall notify the board within thirty days after the 3287
final disposition of any written claim for damages where such 3288
disposition results in a payment exceeding twenty-five thousand 3289
dollars. The notice shall contain the following information: 3290

(1) The name and address of the person submitting the 3291
notification; 3292

(2) The name and address of the insured who is the subject of 3293
the claim; 3294

(3) The name of the person filing the written claim;	3295
(4) The date of final disposition;	3296
(5) If applicable, the identity of the court in which the final disposition of the claim took place.	3297 3298
(E) The board may investigate possible violations of this chapter or the rules adopted under it that are brought to its attention as a result of the reporting requirements of this section, except that the board shall conduct an investigation if a possible violation involves repeated malpractice. As used in this division, "repeated malpractice" means three or more claims for malpractice within the previous five-year period, each resulting in a judgment or settlement in excess of twenty-five thousand dollars in favor of the claimant, and each involving negligent conduct by the physician assistant.	3299 3300 3301 3302 3303 3304 3305 3306 3307 3308
(F) All summaries, reports, and records received and maintained by the board pursuant to this section shall be held in confidence and shall not be subject to discovery or introduction in evidence in any federal or state civil action involving a physician assistant, supervising physician, or health care facility arising out of matters that are the subject of the reporting required by this section. The board may use the information obtained only as the basis for an investigation, as evidence in a disciplinary hearing against a physician assistant or supervising physician, or in any subsequent trial or appeal of a board action or order.	3309 3310 3311 3312 3313 3314 3315 3316 3317 3318 3319
The board may disclose the summaries and reports it receives under this section only to health care facility committees within or outside this state that are involved in credentialing or recredentialing a physician assistant or supervising physician or reviewing their privilege to practice within a particular facility. The board shall indicate whether or not the information	3320 3321 3322 3323 3324 3325

has been verified. Information transmitted by the board shall be 3326
subject to the same confidentiality provisions as when maintained 3327
by the board. 3328

(G) Except for reports filed by an individual pursuant to 3329
division (B) of this section, the board shall send a copy of any 3330
reports or summaries it receives pursuant to this section to the 3331
physician assistant. The physician assistant shall have the right 3332
to file a statement with the board concerning the correctness or 3333
relevance of the information. The statement shall at all times 3334
accompany that part of the record in contention. 3335

(H) An individual or entity that reports to the board or 3336
refers an impaired physician assistant to a treatment provider 3337
approved by the board under section 4731.25 of the Revised Code 3338
shall not be subject to suit for civil damages as a result of the 3339
report, referral, or provision of the information. 3340

(I) In the absence of fraud or bad faith, a professional 3341
association or society of physician assistants that sponsors a 3342
committee or program to provide peer assistance to a physician 3343
assistant with substance abuse problems, a representative or agent 3344
of such a committee or program, and a member of the state medical 3345
board shall not be held liable in damages to any person by reason 3346
of actions taken to refer a physician assistant to a treatment 3347
provider approved under section 4731.25 of the Revised Code for 3348
examination or treatment. 3349

Sec. 4730.33. The secretary of the state medical board shall 3350
enforce the laws relating to the practice of physician assistants. 3351
If the secretary has knowledge or notice of a violation of this 3352
chapter or the rules adopted under it, the secretary shall 3353
investigate the matter, and, upon probable cause appearing, file a 3354
complaint and prosecute the offender. When requested by the 3355
secretary, the prosecuting attorney of the proper county shall 3356

take charge of and conduct such prosecution. 3357

In the prosecution of any person for violation of division 3358
(A) of section 4730.02 of the Revised Code it shall not be 3359
necessary to allege or prove want of a valid ~~certificate~~ license 3360
to practice as a physician assistant, but such matters shall be a 3361
matter of defense to be established by the accused. 3362

Sec. 4730.38. (A) Except as provided in division (B) of this 3363
section, the physician assistant policy committee of the state 3364
medical board shall, at such times the committee determines to be 3365
necessary, submit to the board recommendations regarding 3366
physician-delegated prescriptive authority for physician 3367
assistants. The committee's recommendations shall address both of 3368
the following: 3369

(1) Policy and procedures regarding physician-delegated 3370
prescriptive authority, ~~including the issuance of certificates to~~ 3371
~~prescribe under this chapter;~~ 3372

(2) Any issue the committee considers necessary to assist the 3373
board in fulfilling its duty to adopt rules governing 3374
physician-delegated prescriptive authority, ~~including the issuance~~ 3375
~~of certificates to prescribe.~~ 3376

(B) Not less than every six months beginning on the first day 3377
of June following ~~the effective date of this amendment~~ March 22, 3378
2013, the committee shall review the physician assistant formulary 3379
the board adopts pursuant to division (A)(1) of section 4730.39 of 3380
the Revised Code and, to the extent it determines to be necessary, 3381
submit recommendations proposing changes to the formulary. 3382

(C) Recommendations submitted under this section are subject 3383
to the procedures and time frames specified in division (C) of 3384
section 4730.06 of the Revised Code. 3385

Sec. 4730.39. (A) The state medical board shall do ~~both~~ all 3386

of the following: 3387

(1) Adopt a formulary listing the drugs and therapeutic 3388
devices by class and specific generic nomenclature that a 3389
physician may include in the physician-delegated prescriptive 3390
authority granted to a physician assistant who holds a ~~certificate~~ 3391
~~to prescribe under this chapter~~ valid prescriber number issued by 3392
the state medical board; 3393

(2) Adopt rules governing physician-delegated prescriptive 3394
authority for physician assistants, ~~including the issuance of~~ 3395
~~certificates to prescribe under this chapter;~~ 3396

(3) Establish standards and procedures for delegation under 3397
division (A) of section 4730.203 of the Revised Code of the 3398
authority to administer drugs. 3399

(B) The board's rules governing physician-delegated 3400
prescriptive authority adopted pursuant to division (A)(2) of this 3401
section shall be adopted in accordance with Chapter 119. of the 3402
Revised Code and shall establish all of the following: 3403

(1) Requirements regarding the pharmacology courses that a 3404
physician assistant is required to complete ~~to receive a~~ 3405
~~certificate to prescribe;~~ 3406

(2) ~~Standards and procedures for the issuance and renewal of~~ 3407
~~certificates to prescribe to physician assistants;~~ 3408

~~(3) Standards and procedures for the appropriate conduct of~~ 3409
~~the provisional period that a physician assistant is required to~~ 3410
~~complete pursuant to section 4730.45 of the Revised Code and for~~ 3411
~~determining whether a physician assistant has successfully~~ 3412
~~completed the provisional period;~~ 3413

~~(4)~~ A specific prohibition against prescribing any drug or 3414
device to perform or induce an abortion; 3415

~~(5)~~(3) Standards and procedures to be followed by a physician 3416

assistant in personally furnishing samples of drugs or complete or 3417
partial supplies of drugs to patients under section 4730.43 of the 3418
Revised Code; 3419

~~(6)(4)~~ Any other requirements the board considers necessary 3420
to implement the provisions of this chapter regarding 3421
physician-delegated prescriptive authority ~~and the issuance of~~ 3422
~~certificates to prescribe.~~ 3423

(C)(1) After considering recommendations submitted by the 3424
physician assistant policy committee pursuant to sections 4730.06 3425
and 4730.38 of the Revised Code, the board shall review either or 3426
both of the following, as appropriate according to the submitted 3427
recommendations: 3428

(a) The formulary the board adopts under division (A)(1) of 3429
this section; 3430

(b) The rules the board adopts under division (A)(2) of this 3431
section regarding physician-delegated prescriptive authority. 3432

(2) Based on its review, the board shall make any necessary 3433
modifications to the formulary or rules. 3434

Sec. 4730.41. (A) ~~A certificate to prescribe issued under~~ 3435
~~this chapter authorizes a~~ physician assistant who holds a valid 3436
prescriber number issued by the state medical board is authorized 3437
to prescribe and personally furnish drugs and therapeutic devices 3438
in the exercise of physician-delegated prescriptive authority. 3439

(B) In exercising physician-delegated prescriptive authority, 3440
a physician assistant is subject to all of the following: 3441

(1) The physician assistant shall exercise 3442
physician-delegated prescriptive authority only to the extent that 3443
the physician supervising the physician assistant has granted that 3444
authority. 3445

(2) The physician assistant shall comply with all conditions 3446

placed on the physician-delegated prescriptive authority, as 3447
specified by the supervising physician who is supervising the 3448
physician assistant in the exercise of physician-delegated 3449
prescriptive authority. 3450

(3) If the physician assistant possesses physician-delegated 3451
prescriptive authority for controlled substances, the physician 3452
assistant shall register with the federal drug enforcement 3453
administration. 3454

(4) If the physician assistant possesses physician-delegated 3455
prescriptive authority for schedule II controlled substances, the 3456
physician assistant shall comply with section 4730.411 of the 3457
Revised Code. 3458

(5) If the physician assistant possesses physician-delegated 3459
prescriptive authority to prescribe for a minor, as defined in 3460
section 3719.061 of the Revised Code, a compound that is a 3461
controlled substance containing an opioid, the physician assistant 3462
shall comply with section 3719.061 of the Revised Code. 3463

Sec. 4730.42. (A) In granting physician-delegated 3464
prescriptive authority to a particular physician assistant who 3465
holds a ~~certificate to prescribe~~ valid prescriber number issued 3466
~~under this chapter by the state medical board~~, the supervising 3467
physician is subject to all of the following: 3468

(1) The supervising physician shall not grant 3469
physician-delegated prescriptive authority for any drug or 3470
therapeutic device that is not listed on the physician assistant 3471
formulary adopted under section 4730.39 of the Revised Code as a 3472
drug or therapeutic device that may be included in the 3473
physician-delegated prescriptive authority granted to a physician 3474
assistant. 3475

(2) The supervising physician shall not grant 3476

physician-delegated prescriptive authority for any drug or device 3477
that may be used to perform or induce an abortion. 3478

(3) The supervising physician shall not grant 3479
physician-delegated prescriptive authority in a manner that 3480
exceeds the supervising physician's prescriptive authority, 3481
including the physician's authority to treat chronic pain with 3482
controlled substances and products containing tramadol as 3483
described in section 4731.052 of the Revised Code. 3484

(4) The supervising physician shall supervise the physician 3485
assistant in accordance with ~~all~~ both of the following: 3486

(a) The supervision requirements specified in section 4730.21 3487
of the Revised Code and, ~~in the case of supervision provided~~ 3488
~~during a provisional period of physician-delegated prescriptive~~ 3489
~~authority, the supervision requirements specified in section~~ 3490
~~4730.45 of the Revised Code;~~ 3491

(b) The ~~physician supervisory plan approved for the~~ 3492
~~supervising physician or~~ supervision agreement entered into with 3493
the physician assistant under section 4730.19 of the Revised Code, 3494
including, if applicable, the policies of the health care facility 3495
in which the physician and physician assistant are practicing+ 3496

~~(c) The supervision agreement approved under section 4730.19~~ 3497
~~of the Revised Code that applies to the supervising physician and~~ 3498
~~the physician assistant.~~ 3499

(B)(1) The supervising physician of a physician assistant may 3500
place conditions on the physician-delegated prescriptive authority 3501
granted to the physician assistant. If conditions are placed on 3502
that authority, the supervising physician shall maintain a written 3503
record of the conditions and make the record available to the 3504
state medical board on request. 3505

(2) The conditions that a supervising physician may place on 3506
the physician-delegated prescriptive authority granted to a 3507

physician assistant include the following: 3508

(a) Identification by class and specific generic nomenclature 3509
of drugs and therapeutic devices that the physician chooses not to 3510
permit the physician assistant to prescribe; 3511

(b) Limitations on the dosage units or refills that the 3512
physician assistant is authorized to prescribe; 3513

(c) Specification of circumstances under which the physician 3514
assistant is required to refer patients to the supervising 3515
physician or another physician when exercising physician-delegated 3516
prescriptive authority; 3517

(d) Responsibilities to be fulfilled by the physician in 3518
supervising the physician assistant that are not otherwise 3519
specified in the ~~physician supervisory plan~~ supervision agreement 3520
or otherwise required by this chapter. 3521

Sec. 4730.43. (A) A physician assistant who holds a 3522
~~certificate to prescribe~~ valid prescriber number issued ~~under this~~ 3523
~~chapter by the state medical board~~ and has been granted 3524
physician-delegated prescriptive authority ~~by a supervising~~ 3525
~~physician~~ may personally furnish to a patient samples of drugs and 3526
therapeutic devices that are included in the physician assistant's 3527
physician-delegated prescriptive authority, subject to all of the 3528
following: 3529

(1) The amount of the sample furnished shall not exceed a 3530
seventy-two-hour supply, except when the minimum available 3531
quantity of the sample is packaged in an amount that is greater 3532
than a seventy-two-hour supply, in which case the physician 3533
assistant may furnish the sample in the package amount. 3534

(2) No charge may be imposed for the sample or for furnishing 3535
it. 3536

(3) Samples of controlled substances may not be personally 3537

furnished. 3538

(B) A physician assistant who holds a ~~certificate to~~ 3539
~~prescribe valid prescriber number~~ issued ~~under this chapter~~ by the 3540
board and has been granted physician-delegated prescriptive 3541
authority ~~by a supervising physician~~ may personally furnish to a 3542
patient a complete or partial supply of the drugs and therapeutic 3543
devices that are included in the physician assistant's 3544
physician-delegated prescriptive authority, subject to all of the 3545
following: 3546

(1) The physician assistant shall personally furnish only 3547
antibiotics, antifungals, scabicides, contraceptives, prenatal 3548
vitamins, antihypertensives, drugs and devices used in the 3549
treatment of diabetes, drugs and devices used in the treatment of 3550
asthma, and drugs used in the treatment of dyslipidemia. 3551

(2) The physician assistant shall not furnish the drugs and 3552
devices in locations other than a health department operated by 3553
the board of health of a city or general health district or the 3554
authority having the duties of a board of health under section 3555
3709.05 of the Revised Code, a federally funded comprehensive 3556
primary care clinic, or a nonprofit health care clinic or program. 3557

(3) The physician assistant shall comply with all standards 3558
and procedures for personally furnishing supplies of drugs and 3559
devices, as established in rules adopted under section 4730.39 of 3560
the Revised Code. 3561

Sec. 4730.431. (A) Notwithstanding any provision of this 3562
chapter or rule adopted by the state medical board, a physician 3563
assistant who holds a ~~certificate to prescribe~~ valid prescriber 3564
number issued ~~under this chapter~~ by the board may personally 3565
furnish a supply of naloxone, or issue a prescription for 3566
naloxone, without having examined the individual to whom it may be 3567
administered if all of the following conditions are met: 3568

(1) The naloxone supply is furnished to, or the prescription 3569
is issued to and in the name of, a family member, friend, or other 3570
individual in a position to assist an individual who there is 3571
reason to believe is at risk of experiencing an opioid-related 3572
overdose. 3573

(2) The physician assistant instructs the individual 3574
receiving the naloxone supply or prescription to summon emergency 3575
services either immediately before or immediately after 3576
administering naloxone to an individual apparently experiencing an 3577
opioid-related overdose. 3578

(3) The naloxone is personally furnished or prescribed in 3579
such a manner that it may be administered by only either of the 3580
following routes: 3581

(a) Using a device manufactured for the intranasal 3582
administration of liquid drugs; 3583

(b) Using an autoinjector in a manufactured dosage form. 3584

(B) A physician assistant who under division (A) of this 3585
section in good faith furnishes a supply of naloxone or issues a 3586
prescription for naloxone is not liable for or subject to any of 3587
the following for any action or omission of the individual to whom 3588
the naloxone is furnished or the prescription is issued: damages 3589
in any civil action, prosecution in any criminal proceeding, or 3590
professional disciplinary action. 3591

Sec. 4730.49. (A) To be eligible for renewal of a ~~certificate~~ 3592
~~to prescribe~~ license to practice as a physician assistant, an 3593
applicant who has been granted physician-delegated prescriptive 3594
authority is subject to both of the following: 3595

(1) The applicant shall complete every two years at least 3596
twelve hours of continuing education in pharmacology from an 3597
accredited institution recognized by the state medical board. 3598

Except as provided in division (B) of this section and in section 5903.12 of the Revised Code, the continuing education shall be completed not later than the thirty-first day of January of each even-numbered year.

(2)(a) Except as provided in division (A)(2)(b) of this section, in the case of an applicant who prescribes opioid analgesics or benzodiazepines, the applicant shall certify to the board whether the applicant has been granted access to the drug database established and maintained by the state board of pharmacy pursuant to section 4729.75 of the Revised Code.

(b) The requirement in division (A)(2)(a) of this section does not apply if either of the following is the case:

(i) The state board of pharmacy notifies the state medical board pursuant to section 4729.861 of the Revised Code that the applicant has been restricted from obtaining further information from the drug database.

(ii) The state board of pharmacy no longer maintains the drug database.

(c) If an applicant certifies to the state medical board that the applicant has been granted access to the drug database and the board finds through an audit or other means that the applicant has not been granted access, the board may take action under section 4730.25 of the Revised Code.

(B) The state medical board shall provide for pro rata reductions by month of the number of hours of continuing education in pharmacology that is required to be completed for physician assistants who are in their first ~~certification~~ licensure period after completing the ~~provisional~~ period of supervision required under section ~~4730.45~~ 4730.12 of the Revised Code, who have been disabled due to illness or accident, or who have been absent from the country. The board shall adopt rules, in accordance with

Chapter 119. of the Revised Code, as necessary to implement this 3630
division. 3631

(C) The continuing education required by this section is in 3632
addition to the continuing education required under section 3633
4730.14 of the Revised Code. 3634

Sec. 4730.51. In the information the board maintains on ~~the~~ 3635
its internet web site, the state medical board shall include the 3636
following: 3637

(A) The name of each physician assistant who holds a 3638
~~certificate to prescribe~~ license under this chapter; 3639

(B) For each physician assistant who holds a ~~certificate to~~ 3640
~~prescribe~~ valid prescriber number issued by the state medical 3641
board, the name of each supervising physician who has authority to 3642
grant physician-delegated prescriptive authority to the physician 3643
assistant. 3644

Sec. 4730.53. (A) As used in this section, "drug database" 3645
means the database established and maintained by the state board 3646
of pharmacy pursuant to section 4729.75 of the Revised Code. 3647

(B) The state medical board shall adopt rules in accordance 3648
with Chapter 119. of the Revised Code that establish standards and 3649
procedures to be followed by a physician assistant ~~who holds a~~ 3650
~~certificate to prescribe issued~~ licensed under this chapter who 3651
has been granted physician-delegated prescriptive authority 3652
regarding the review of patient information available through the 3653
drug database under division (A)(5) of section 4729.80 of the 3654
Revised Code. 3655

(C) This section and the rules adopted under it do not apply 3656
if the state board of pharmacy no longer maintains the drug 3657
database. 3658

Sec. 4731.07. (A) The state medical board shall keep a record 3659
of its proceedings. The minutes of a meeting of the board shall, 3660
on approval by the board, constitute an official record of its 3661
proceedings. 3662

(B) The board shall keep a register of applicants for 3663
certificates of registration and certificates to practice issued 3664
under this chapter and Chapters ~~4730.~~, 4760., 4762., and 4774. of 3665
the Revised Code and licenses issued under ~~Chapter~~ Chapters 4730. 3666
and 4778. of the Revised Code. The register shall show the name of 3667
the applicant and whether the applicant was granted or refused a 3668
certificate or license. With respect to applicants to practice 3669
medicine and surgery or osteopathic medicine and surgery, the 3670
register shall show the name of the institution that granted the 3671
applicant the degree of doctor of medicine or osteopathic 3672
medicine. The books and records of the board shall be prima-facie 3673
evidence of matters therein contained. 3674

Sec. 4761.01. As used in this chapter: 3675

(A) "Respiratory care" means rendering or offering to render 3676
to individuals, groups, organizations, or the public any service 3677
involving the evaluation of cardiopulmonary function, the 3678
treatment of cardiopulmonary impairment, the assessment of 3679
treatment effectiveness, and the care of patients with 3680
deficiencies and abnormalities associated with the cardiopulmonary 3681
system. The practice of respiratory care includes: 3682

(1) Obtaining, analyzing, testing, measuring, and monitoring 3683
blood and gas samples in the determination of cardiopulmonary 3684
parameters and related physiologic data, including flows, 3685
pressures, and volumes, and the use of equipment employed for this 3686
purpose; 3687

(2) Administering, monitoring, recording the results of, and 3688

instructing in the use of medical gases, aerosols, and 3689
bronchopulmonary hygiene techniques, including drainage, 3690
aspiration, and sampling, and applying, maintaining, and 3691
instructing in the use of artificial airways, ventilators, and 3692
other life support equipment employed in the treatment of 3693
cardiopulmonary impairment and provided in collaboration with 3694
other licensed health care professionals responsible for providing 3695
care; 3696

(3) Performing cardiopulmonary resuscitation and respiratory 3697
rehabilitation techniques; 3698

(4) Administering medications for the testing or treatment of 3699
cardiopulmonary impairment. 3700

(B) "Respiratory care professional" means a person who is 3701
licensed under this chapter to practice the full range of 3702
respiratory care services as defined in division (A) of this 3703
section. 3704

(C) "Physician" means an individual authorized under Chapter 3705
4731. of the Revised Code to practice medicine and surgery or 3706
osteopathic medicine and surgery. 3707

(D) "Registered nurse" means an individual licensed under 3708
Chapter 4723. of the Revised Code to engage in the practice of 3709
nursing as a registered nurse. 3710

(E) "Hospital" means a facility that meets the operating 3711
standards of section 3727.02 of the Revised Code. 3712

(F) "Nursing facility" has the same meaning as in section 3713
5165.01 of the Revised Code. 3714

(G) "Certified hyperbaric technologist" means a person who 3715
administers hyperbaric oxygen therapy and is certified as a 3716
hyperbaric technologist by the national board of diving and 3717
hyperbaric medical technology or its successor organization. 3718

(H) "Hyperbaric oxygen therapy" means the administration of pure oxygen in a pressurized room or chamber, except that it does not include ventilator management.

(I) "Advanced practice registered nurse" has the same meaning as in section 4723.01 of the Revised Code.

(J) "Physician assistant" means an individual who holds a valid ~~certificate~~ license to practice issued under Chapter 4730. of the Revised Code authorizing the individual to provide services as a physician assistant to patients under the supervision, control, and direction of one or more physicians.

Sec. 4761.17. All of the following apply to the practice of respiratory care by a person who holds a license or limited permit issued under this chapter:

(A) The person shall practice only pursuant to a prescription or other order for respiratory care issued by ~~a~~ any of the following:

(1) A physician ~~or by a;~~

(2) A registered nurse who holds a certificate of authority issued under Chapter 4723. of the Revised Code to practice as a certified nurse practitioner or clinical nurse specialist and has entered into a standard care arrangement with a physician that allows the nurse to prescribe or order respiratory care services;

(3) A physician assistant who has been granted physician-delegated prescriptive authority that allows the physician assistant to prescribe or order respiratory care services.

(B) The person shall practice only under the supervision of ~~a~~ any of the following:

(1) A physician ~~or under the supervision of a;~~

(2) A certified nurse practitioner or clinical nurse specialist who is authorized to prescribe or order respiratory care services as provided in division (A)(2) of this section; 3748
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(3) A physician assistant who is authorized to prescribe or order respiratory care services as provided in division (A)(3) of this section. 3751
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(C) When practicing under the prescription or order of a certified nurse practitioner or clinical nurse specialist or under the supervision of such a nurse, the person's administration of medication that requires a prescription is limited to the drugs that the nurse is authorized to prescribe pursuant to the nurse's certificate to prescribe issued under section 4723.48 of the Revised Code. 3754
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(D) When practicing under the prescription or order of a physician assistant or under the supervision of a physician assistant, the person's administration of medication that requires a prescription is limited to the drugs that the physician assistant is authorized to prescribe pursuant to the physician assistant's physician-delegated prescriptive authority. 3761
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Sec. 4765.01. As used in this chapter: 3767

(A) "First responder" means an individual who holds a current, valid certificate issued under section 4765.30 of the Revised Code to practice as a first responder. 3768
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(B) "Emergency medical technician-basic" or "EMT-basic" means an individual who holds a current, valid certificate issued under section 4765.30 of the Revised Code to practice as an emergency medical technician-basic. 3771
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(C) "Emergency medical technician-intermediate" or "EMT-I" means an individual who holds a current, valid certificate issued under section 4765.30 of the Revised Code to practice as an 3775
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emergency medical technician-intermediate. 3778

(D) "Emergency medical technician-paramedic" or "paramedic" 3779
means an individual who holds a current, valid certificate issued 3780
under section 4765.30 of the Revised Code to practice as an 3781
emergency medical technician-paramedic. 3782

(E) "Ambulance" means any motor vehicle that is used, or is 3783
intended to be used, for the purpose of responding to emergency 3784
medical situations, transporting emergency patients, and 3785
administering emergency medical service to patients before, 3786
during, or after transportation. 3787

(F) "Cardiac monitoring" means a procedure used for the 3788
purpose of observing and documenting the rate and rhythm of a 3789
patient's heart by attaching electrical leads from an 3790
electrocardiograph monitor to certain points on the patient's body 3791
surface. 3792

(G) "Emergency medical service" means any of the services 3793
described in sections 4765.35, 4765.37, 4765.38, and 4765.39 of 3794
the Revised Code that are performed by first responders, emergency 3795
medical technicians-basic, emergency medical 3796
technicians-intermediate, and paramedics. "Emergency medical 3797
service" includes such services performed before or during any 3798
transport of a patient, including transports between hospitals and 3799
transports to and from helicopters. 3800

(H) "Emergency medical service organization" means a public 3801
or private organization using first responders, EMTs-basic, 3802
EMTs-I, or paramedics, or a combination of first responders, 3803
EMTs-basic, EMTs-I, and paramedics, to provide emergency medical 3804
services. 3805

(I) "Physician" means an individual who holds a current, 3806
valid certificate issued under Chapter 4731. of the Revised Code 3807
authorizing the practice of medicine and surgery or osteopathic 3808

medicine and surgery.	3809
(J) "Registered nurse" means an individual who holds a	3810
current, valid license issued under Chapter 4723. of the Revised	3811
Code authorizing the practice of nursing as a registered nurse.	3812
(K) "Volunteer" means a person who provides services either	3813
for no compensation or for compensation that does not exceed the	3814
actual expenses incurred in providing the services or in training	3815
to provide the services.	3816
(L) "Emergency medical service personnel" means first	3817
responders, emergency medical service technicians-basic, emergency	3818
medical service technicians-intermediate, emergency medical	3819
service technicians-paramedic, and persons who provide medical	3820
direction to such persons.	3821
(M) "Hospital" has the same meaning as in section 3727.01 of	3822
the Revised Code.	3823
(N) "Trauma" or "traumatic injury" means severe damage to or	3824
destruction of tissue that satisfies both of the following	3825
conditions:	3826
(1) It creates a significant risk of any of the following:	3827
(a) Loss of life;	3828
(b) Loss of a limb;	3829
(c) Significant, permanent disfigurement;	3830
(d) Significant, permanent disability.	3831
(2) It is caused by any of the following:	3832
(a) Blunt or penetrating injury;	3833
(b) Exposure to electromagnetic, chemical, or radioactive	3834
energy;	3835
(c) Drowning, suffocation, or strangulation;	3836

(d) A deficit or excess of heat.	3837
(O) "Trauma victim" or "trauma patient" means a person who has sustained a traumatic injury.	3838 3839
(P) "Trauma care" means the assessment, diagnosis, transportation, treatment, or rehabilitation of a trauma victim by emergency medical service personnel or by a physician, nurse, physician assistant, respiratory therapist, physical therapist, chiropractor, occupational therapist, speech-language pathologist, audiologist, or psychologist licensed to practice as such in this state or another jurisdiction.	3840 3841 3842 3843 3844 3845 3846
(Q) "Trauma center" means all of the following:	3847
(1) Any hospital that is verified by the American college of surgeons as an adult or pediatric trauma center;	3848 3849
(2) Any hospital that is operating as an adult or pediatric trauma center under provisional status pursuant to section 3727.101 of the Revised Code;	3850 3851 3852
(3) Until December 31, 2004, any hospital in this state that is designated by the director of health as a level II pediatric trauma center under section 3727.081 of the Revised Code;	3853 3854 3855
(4) Any hospital in another state that is licensed or designated under the laws of that state as capable of providing specialized trauma care appropriate to the medical needs of the trauma patient.	3856 3857 3858 3859
(R) "Pediatric" means involving a patient who is less than sixteen years of age.	3860 3861
(S) "Adult" means involving a patient who is not a pediatric patient.	3862 3863
(T) "Geriatric" means involving a patient who is at least seventy years old or exhibits significant anatomical or physiological characteristics associated with advanced aging.	3864 3865 3866

(U) "Air medical organization" means an organization that provides emergency medical services, or transports emergency victims, by means of fixed or rotary wing aircraft.

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

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

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

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

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

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

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

Sec. 4765.51. Nothing in this chapter prevents or restricts the practice, services, or activities of any registered nurse practicing within the scope of the registered nurse's practice.

Nothing in this chapter prevents or restricts the practice, services, or activities of any physician assistant practicing in accordance with a ~~physician supervisory plan approved~~ supervision

agreement entered into under section ~~4730.17~~ 4730.19 of the 3897
Revised Code ~~or, including, if applicable,~~ the policies of the 3898
health care facility in which the physician assistant is 3899
practicing. 3900

Sec. 5122.11. Proceedings for a mentally ill person subject 3901
to court order pursuant to sections 5122.11 to 5122.15 of the 3902
Revised Code shall be commenced by the filing of an affidavit in 3903
the manner prescribed by the department of mental health and 3904
addiction services and in a form prescribed in section 5122.111 of 3905
the Revised Code, by any person or persons with the probate court 3906
~~in the county where the mentally ill person subject to court order~~ 3907
~~resides,~~ either on reliable information or actual knowledge, 3908
whichever is determined to be proper by the court. This section 3909
does not apply to the hospitalization of a person pursuant to 3910
section 2945.39, 2945.40, 2945.401, or 2945.402 of the Revised 3911
Code. 3912

The affidavit shall contain an allegation setting forth the 3913
specific category or categories under division (B) of section 3914
5122.01 of the Revised Code upon which the jurisdiction of the 3915
court is based and a statement of alleged facts sufficient to 3916
indicate probable cause to believe that the person is a mentally 3917
ill person subject to court order. The affidavit may be 3918
accompanied, or the court may require that the affidavit be 3919
accompanied, by a certificate of a psychiatrist, or a certificate 3920
signed by a licensed clinical psychologist and a certificate 3921
signed by a licensed physician stating that the person who issued 3922
the certificate has examined the person and is of the opinion that 3923
the person is a mentally ill person subject to court order, or 3924
shall be accompanied by a written statement by the applicant, 3925
under oath, that the person has refused to submit to an 3926
examination by a psychiatrist, or by a licensed clinical 3927
psychologist and licensed physician. 3928

Upon receipt of the affidavit, if a judge of the court or a referee who is an attorney at law appointed by the court has probable cause to believe that the person named in the affidavit is a mentally ill person subject to court order, the judge or referee may issue a temporary order of detention ordering any health or police officer or sheriff to take into custody and transport the person to a hospital or other place designated in section 5122.17 of the Revised Code, or may set the matter for further hearing. If a temporary order of detention is issued and the person is transported to a hospital or other designated place, the court that issued the order shall retain jurisdiction over the case as it relates to the person's outpatient treatment, notwithstanding that the hospital or other designated place to which the person is transported is outside the territorial jurisdiction of the court.

The person may be observed and treated until the hearing provided for in section 5122.141 of the Revised Code. If no such hearing is held, the person may be observed and treated until the hearing provided for in section 5122.15 of the Revised Code.

Sec. 5122.111. To initiate proceedings for court-ordered treatment of a person under section 5122.11 of the Revised Code, a person or persons shall file an affidavit with the probate court that is identical in form and content to the following:

AFFIDAVIT OF MENTAL ILLNESS

The State of Ohio

..... County, ss.

..... Court

.....
the undersigned, residing at

.....

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says, that he/she has information to believe or has actual knowledge that	3960
.....	3961
(Please specify specific category(ies) below with an X.)	3962
[] Represents a substantial risk of physical harm to self as manifested by evidence of threats of, or attempts at, suicide or serious self-inflicted bodily harm;	3963 3964 3965
[] Represents a substantial risk of physical harm to others as manifested by evidence of recent homicidal or other violent behavior or evidence of recent threats that place another in reasonable fear of violent behavior and serious physical harm or other evidence of present dangerousness;	3966 3967 3968 3969 3970
[] Represents a substantial and immediate risk of serious physical impairment or injury to self as manifested by evidence of being unable to provide for and of not providing for basic physical needs because of mental illness and that appropriate provision for such needs cannot be made immediately available in the community;	3971 3972 3973 3974 3975 3976
[] Would benefit from treatment for mental illness and is in need of such treatment as manifested by evidence of behavior that creates a grave and imminent risk to substantial rights of others or the person; or	3977 3978 3979 3980
[] Would benefit from treatment as manifested by evidence of behavior that indicates all of the following:	3981 3982
(a) The person is unlikely to survive safely in the community without supervision, based on a clinical determination.	3983 3984
(b) The person has a history of lack of compliance with treatment for mental illness and one of the following applies:	3985 3986
(i) At least twice within the thirty-six months prior to the filing of an affidavit seeking court-ordered treatment of the person under section 5122.111 of the Revised Code, the lack of	3987 3988 3989

compliance has been a significant factor in necessitating 3990
hospitalization in a hospital or receipt of services in a forensic 3991
or other mental health unit of a correctional facility, provided 3992
that the thirty-six-month period shall be extended by the length 3993
of any hospitalization or incarceration of the person that 3994
occurred within the thirty-six-month period. 3995

(ii) Within the forty-eight months prior to the filing of an 3996
affidavit seeking court-ordered treatment of the person under 3997
section 5122.111 of the Revised Code, the lack of compliance 3998
resulted in one or more acts of serious violent behavior toward 3999
self or others or threats of, or attempts at, serious physical 4000
harm to self or others, provided that the forty-eight-month period 4001
shall be extended by the length of any hospitalization or 4002
incarceration of the person that occurred within the 4003
forty-eight-month period. 4004

(c) The person, as a result of mental illness, is unlikely to 4005
voluntarily participate in necessary treatment. 4006

(d) In view of the person's treatment history and current 4007
behavior, the person is in need of treatment in order to prevent a 4008
relapse or deterioration that would be likely to result in 4009
substantial risk of serious harm to the person or others. 4010

..... 4011

(Name of the party filing the affidavit) further says that the 4012
facts supporting this belief are as follows:

..... 4013

..... 4014

..... 4015

..... 4016

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..... 4018

These facts being sufficient to indicate probable cause that the 4019

above said person is a mentally ill person subject to 4020

court order. 4021

Name of Patient's Last Physician or Licensed Clinical Psychologist 4022

..... 4023

Address of Patient's Last Physician or Licensed Clinical 4024

Psychologist

..... 4025

..... 4026

The name and address of respondent's legal guardian, spouse, and 4027

adult next of kin are: 4028

Name	Kinship	Address	4029
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..... 4030

.....	Legal Guardian	4031
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..... 4032

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.....	Spouse	4034
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..... 4036

.....	Adult Next of Kin	4037
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..... 4038

..... 4039

.....	Adult Next of Kin	4040
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..... 4041

The following constitutes additional information that may be 4042

necessary for the purpose of determining residence: 4043

..... 4044

..... 4045
..... 4046
..... 4047
..... 4048
Dated this day of, 20... 4049

..... 4050
Signature of the party filing the 4051
affidavit

Sworn to before me and signed in my presence on the day and year 4052
above dated. 4053

..... 4054
Signature of Probate Judge 4055

..... 4056
~~Signature of, Deputy Clerk, or~~ 4057
Notary Public

WAIVER 4058

I, the undersigned party filing the affidavit hereby waive the 4059
issuing and service of notice of the hearing on said affidavit, 4060
and voluntarily enter my appearance herein. 4061

Dated this day of, 20... 4062

..... 4063
Signature of the party filing the 4064
affidavit

Sec. 5123.47. (A) As used in this section: 4065

(1) "In-home care" means the supportive services provided 4066
within the home of an individual with mental retardation or a 4067
developmental disability who receives funding for the services 4068
through a county board of developmental disabilities, including 4069
any recipient of residential services funded as home and 4070
community-based services, family support services provided under 4071
section 5126.11 of the Revised Code, or supported living provided 4072
in accordance with sections 5126.41 to 5126.47 of the Revised 4073
Code. "In-home care" includes care that is provided outside an 4074
individual's home in places incidental to the home, and while 4075
traveling to places incidental to the home, except that "in-home 4076
care" does not include care provided in the facilities of a county 4077
board of developmental disabilities or care provided in schools. 4078

(2) "Parent" means either parent of a child, including an 4079
adoptive parent but not a foster parent. 4080

(3) "Unlicensed in-home care worker" means an individual who 4081
provides in-home care but is not a health care professional. 4082

(4) "Family member" means a parent, sibling, spouse, son, 4083
daughter, grandparent, aunt, uncle, cousin, or guardian of the 4084
individual with mental retardation or a developmental disability 4085
if the individual with mental retardation or developmental 4086
disabilities lives with the person and is dependent on the person 4087
to the extent that, if the supports were withdrawn, another living 4088
arrangement would have to be found. 4089

(5) "Health care professional" means any of the following: 4090

(a) A dentist who holds a valid license issued under Chapter 4091

4715. of the Revised Code;	4092
(b) A registered or licensed practical nurse who holds a valid license issued under Chapter 4723. of the Revised Code;	4093 4094
(c) An optometrist who holds a valid license issued under Chapter 4725. of the Revised Code;	4095 4096
(d) A pharmacist who holds a valid license issued under Chapter 4729. of the Revised Code;	4097 4098
(e) A person who holds a valid certificate issued under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, podiatric medicine and surgery, or a limited brand of medicine;	4099 4100 4101 4102
(f) A physician assistant who holds a valid certificate <u>license</u> issued under Chapter 4730. of the Revised Code;	4103 4104
(g) An occupational therapist or occupational therapy assistant or a physical therapist or physical therapist assistant who holds a valid license issued under Chapter 4755. of the Revised Code;	4105 4106 4107 4108
(h) A respiratory care professional who holds a valid license issued under Chapter 4761. of the Revised Code.	4109 4110
(6) "Health care task" means a task that is prescribed, ordered, delegated, or otherwise directed by a health care professional acting within the scope of the professional's practice.	4111 4112 4113 4114
(B) Except as provided in division (E) of this section, a family member of an individual with mental retardation or a developmental disability may authorize an unlicensed in-home care worker to administer oral and topical prescribed medications or perform other health care tasks as part of the in-home care the worker provides to the individual, if all of the following apply:	4115 4116 4117 4118 4119 4120
(1) The family member is the primary supervisor of the care.	4121

(2) The unlicensed in-home care worker has been selected by 4122
the family member or the individual receiving care and is under 4123
the direct supervision of the family member. 4124

(3) The unlicensed in-home care worker is providing the care 4125
through an employment or other arrangement entered into directly 4126
with the family member and is not otherwise employed by or under 4127
contract with a person or government entity to provide services to 4128
individuals with mental retardation and developmental 4129
disabilities. 4130

(C) A family member shall obtain a prescription, if 4131
applicable, and written instructions from a health care 4132
professional for the care to be provided to the individual. The 4133
family member shall authorize the unlicensed in-home care worker 4134
to provide the care by preparing a written document granting the 4135
authority. The family member shall provide the unlicensed in-home 4136
care worker with appropriate training and written instructions in 4137
accordance with the instructions obtained from the health care 4138
professional. 4139

(D) A family member who authorizes an unlicensed in-home care 4140
worker to administer oral and topical prescribed medications or 4141
perform other health care tasks retains full responsibility for 4142
the health and safety of the individual receiving the care and for 4143
ensuring that the worker provides the care appropriately and 4144
safely. No entity that funds or monitors the provision of in-home 4145
care may be held liable for the results of the care provided under 4146
this section by an unlicensed in-home care worker, including such 4147
entities as the county board of developmental disabilities and the 4148
department of developmental disabilities. 4149

An unlicensed in-home care worker who is authorized under 4150
this section by a family member to provide care to an individual 4151
may not be held liable for any injury caused in providing the 4152
care, unless the worker provides the care in a manner that is not 4153

in accordance with the training and instructions received or the 4154
worker acts in a manner that constitutes wanton or reckless 4155
misconduct. 4156

(E) A county board of developmental disabilities may evaluate 4157
the authority granted by a family member under this section to an 4158
unlicensed in-home care worker at any time it considers necessary 4159
and shall evaluate the authority on receipt of a complaint. If the 4160
board determines that a family member has acted in a manner that 4161
is inappropriate for the health and safety of the individual 4162
receiving the care, the authorization granted by the family member 4163
to an unlicensed in-home care worker is void, and the family 4164
member may not authorize other unlicensed in-home care workers to 4165
provide the care. In making such a determination, the board shall 4166
use appropriately licensed health care professionals and shall 4167
provide the family member an opportunity to file a complaint under 4168
section 5126.06 of the Revised Code. 4169

Section 2. That existing sections 1.64, 2133.211, 2151.3515 4170
2305.113, 2925.61, 3701.92, 3727.06, 3729.05, 4503.44, 4723.01, 4171
4723.06, 4723.07, 4723.18, 4723.181, 4723.48, 4723.482, 4723.50, 4172
4729.01, 4730.01, 4730.02, 4730.03, 4730.04, 4730.06, 4730.08, 4173
4730.091, 4730.10, 4730.101, 4730.11, 4730.12, 4730.13, 4730.14, 4174
4730.19, 4730.21, 4730.22, 4730.25, 4730.251, 4730.27, 4730.28, 4175
4730.31, 4730.32, 4730.33, 4730.38, 4730.39, 4730.41, 4730.42, 4176
4730.43, 4730.431, 4730.49, 4730.51, 4730.53, 4731.07, 4761.01, 4177
4761.17, 4765.01, 4765.51, 5122.11, 5122.111, and 5123.47 and 4178
sections 4730.081, 4730.09, 4730.15, 4730.16, 4730.17, 4730.18, 4179
4730.20, 4730.44, 4730.45, 4730.46, 4730.47, 4730.48, 4730.50, and 4180
4730.52 of the Revised Code are hereby repealed. 4181

Section 3. That the versions of sections 4730.25 and 4730.53 4182
of the Revised Code that are scheduled to take effect April 1, 4183
2015, be amended to read as follows: 4184

Sec. 4730.25. (A) The state medical board, by an affirmative
vote of not fewer than six members, may revoke or may refuse to
grant a ~~certificate~~ license to practice as a physician assistant
~~or a certificate to prescribe~~ to a person found by the board to
have committed fraud, misrepresentation, or deception in applying
for or securing the ~~certificate~~ license.

(B) The board, by an affirmative vote of not fewer than six
members, shall, to the extent permitted by law, limit, revoke, or
suspend an individual's ~~certificate~~ license to practice as a
physician assistant or ~~certificate to prescribe~~ prescriber number,
refuse to issue a ~~certificate~~ license to an applicant, refuse to
reinstate a ~~certificate~~ license, or reprimand or place on
probation the holder of a ~~certificate~~ license for any of the
following reasons:

(1) Failure to practice in accordance with the ~~conditions~~
~~under which the supervising physician's supervision agreement with~~
~~the physician assistant was approved, including the requirement~~
~~that when practicing under a particular supervising physician, the~~
~~physician assistant must practice only according to the physician~~
~~supervisory plan the board approved for that physician or,~~
including, if applicable, the policies of the health care facility
in which the supervising physician and physician assistant are
practicing;

(2) Failure to comply with the requirements of this chapter,
Chapter 4731. of the Revised Code, or any rules adopted by the
board;

(3) Violating or attempting to violate, directly or
indirectly, or assisting in or abetting the violation of, or
conspiring to violate, any provision of this chapter, Chapter
4731. of the Revised Code, or the rules adopted by the board;

(4) Inability to practice according to acceptable and

prevailing standards of care by reason of mental illness or 4216
physical illness, including physical deterioration that adversely 4217
affects cognitive, motor, or perceptive skills; 4218

(5) Impairment of ability to practice according to acceptable 4219
and prevailing standards of care because of habitual or excessive 4220
use or abuse of drugs, alcohol, or other substances that impair 4221
ability to practice; 4222

(6) Administering drugs for purposes other than those 4223
authorized under this chapter; 4224

(7) Willfully betraying a professional confidence; 4225

(8) Making a false, fraudulent, deceptive, or misleading 4226
statement in soliciting or advertising for employment as a 4227
physician assistant; in connection with any solicitation or 4228
advertisement for patients; in relation to the practice of 4229
medicine as it pertains to physician assistants; or in securing or 4230
attempting to secure a certificate license to practice as a 4231
physician assistant, ~~a certificate to prescribe, or approval of a~~ 4232
~~supervision agreement.~~ 4233

As used in this division, "false, fraudulent, deceptive, or 4234
misleading statement" means a statement that includes a 4235
misrepresentation of fact, is likely to mislead or deceive because 4236
of a failure to disclose material facts, is intended or is likely 4237
to create false or unjustified expectations of favorable results, 4238
or includes representations or implications that in reasonable 4239
probability will cause an ordinarily prudent person to 4240
misunderstand or be deceived. 4241

(9) Representing, with the purpose of obtaining compensation 4242
or other advantage personally or for any other person, that an 4243
incurable disease or injury, or other incurable condition, can be 4244
permanently cured; 4245

(10) The obtaining of, or attempting to obtain, money or 4246

anything of value by fraudulent misrepresentations in the course	4247
of practice;	4248
(11) A plea of guilty to, a judicial finding of guilt of, or	4249
a judicial finding of eligibility for intervention in lieu of	4250
conviction for, a felony;	4251
(12) Commission of an act that constitutes a felony in this	4252
state, regardless of the jurisdiction in which the act was	4253
committed;	4254
(13) A plea of guilty to, a judicial finding of guilt of, or	4255
a judicial finding of eligibility for intervention in lieu of	4256
conviction for, a misdemeanor committed in the course of practice;	4257
(14) A plea of guilty to, a judicial finding of guilt of, or	4258
a judicial finding of eligibility for intervention in lieu of	4259
conviction for, a misdemeanor involving moral turpitude;	4260
(15) Commission of an act in the course of practice that	4261
constitutes a misdemeanor in this state, regardless of the	4262
jurisdiction in which the act was committed;	4263
(16) Commission of an act involving moral turpitude that	4264
constitutes a misdemeanor in this state, regardless of the	4265
jurisdiction in which the act was committed;	4266
(17) A plea of guilty to, a judicial finding of guilt of, or	4267
a judicial finding of eligibility for intervention in lieu of	4268
conviction for violating any state or federal law regulating the	4269
possession, distribution, or use of any drug, including	4270
trafficking in drugs;	4271
(18) Any of the following actions taken by the state agency	4272
responsible for regulating the practice of physician assistants in	4273
another state, for any reason other than the nonpayment of fees:	4274
the limitation, revocation, or suspension of an individual's	4275
license to practice; acceptance of an individual's license	4276

surrender; denial of a license; refusal to renew or reinstate a	4277
license; imposition of probation; or issuance of an order of	4278
censure or other reprimand;	4279
(19) A departure from, or failure to conform to, minimal	4280
standards of care of similar physician assistants under the same	4281
or similar circumstances, regardless of whether actual injury to a	4282
patient is established;	4283
(20) Violation of the conditions placed by the board on a	4284
certificate <u>license</u> to practice as a physician assistant, a	4285
certificate to prescribe, a physician supervisory plan, or	4286
supervision agreement;	4287
(21) Failure to use universal blood and body fluid	4288
precautions established by rules adopted under section 4731.051 of	4289
the Revised Code;	4290
(22) Failure to cooperate in an investigation conducted by	4291
the board under section 4730.26 of the Revised Code, including	4292
failure to comply with a subpoena or order issued by the board or	4293
failure to answer truthfully a question presented by the board at	4294
a deposition or in written interrogatories, except that failure to	4295
cooperate with an investigation shall not constitute grounds for	4296
discipline under this section if a court of competent jurisdiction	4297
has issued an order that either quashes a subpoena or permits the	4298
individual to withhold the testimony or evidence in issue;	4299
(23) Assisting suicide, as defined in section 3795.01 of the	4300
Revised Code;	4301
(24) Prescribing any drug or device to perform or induce an	4302
abortion, or otherwise performing or inducing an abortion;	4303
(25) Failure to comply with section 4730.53 of the Revised	4304
Code, unless the board no longer maintains a drug database	4305
pursuant to section 4729.75 of the Revised Code;	4306

~~(25)~~(26) Failure to comply with the requirements in section 4307
3719.061 of the Revised Code before issuing ~~to~~ for a minor a 4308
prescription for a controlled substance containing an opioid; 4309

(27) Having certification by the national commission on 4310
certification of physician assistants or a successor organization 4311
expire, lapse, or be suspended or revoked. 4312

(C) Disciplinary actions taken by the board under divisions 4313
(A) and (B) of this section shall be taken pursuant to an 4314
adjudication under Chapter 119. of the Revised Code, except that 4315
in lieu of an adjudication, the board may enter into a consent 4316
agreement with a physician assistant or applicant to resolve an 4317
allegation of a violation of this chapter or any rule adopted 4318
under it. A consent agreement, when ratified by an affirmative 4319
vote of not fewer than six members of the board, shall constitute 4320
the findings and order of the board with respect to the matter 4321
addressed in the agreement. If the board refuses to ratify a 4322
consent agreement, the admissions and findings contained in the 4323
consent agreement shall be of no force or effect. 4324

(D) For purposes of divisions (B)(12), (15), and (16) of this 4325
section, the commission of the act may be established by a finding 4326
by the board, pursuant to an adjudication under Chapter 119. of 4327
the Revised Code, that the applicant or ~~certificate~~ license holder 4328
committed the act in question. The board shall have no 4329
jurisdiction under these divisions in cases where the trial court 4330
renders a final judgment in the ~~certificate~~ license holder's favor 4331
and that judgment is based upon an adjudication on the merits. The 4332
board shall have jurisdiction under these divisions in cases where 4333
the trial court issues an order of dismissal upon technical or 4334
procedural grounds. 4335

(E) The sealing of conviction records by any court shall have 4336
no effect upon a prior board order entered under the provisions of 4337
this section or upon the board's jurisdiction to take action under 4338

the provisions of this section if, based upon a plea of guilty, a 4339
judicial finding of guilt, or a judicial finding of eligibility 4340
for intervention in lieu of conviction, the board issued a notice 4341
of opportunity for a hearing prior to the court's order to seal 4342
the records. The board shall not be required to seal, destroy, 4343
redact, or otherwise modify its records to reflect the court's 4344
sealing of conviction records. 4345

(F) For purposes of this division, any individual who holds a 4346
~~certificate~~ license issued under this chapter, or applies for a 4347
~~certificate~~ license issued under this chapter, shall be deemed to 4348
have given consent to submit to a mental or physical examination 4349
when directed to do so in writing by the board and to have waived 4350
all objections to the admissibility of testimony or examination 4351
reports that constitute a privileged communication. 4352

(1) In enforcing division (B)(4) of this section, the board, 4353
upon a showing of a possible violation, may compel any individual 4354
who holds a ~~certificate~~ license issued under this chapter or who 4355
has applied for a ~~certificate~~ license pursuant to this chapter to 4356
submit to a mental examination, physical examination, including an 4357
HIV test, or both a mental and physical examination. The expense 4358
of the examination is the responsibility of the individual 4359
compelled to be examined. Failure to submit to a mental or 4360
physical examination or consent to an HIV test ordered by the 4361
board constitutes an admission of the allegations against the 4362
individual unless the failure is due to circumstances beyond the 4363
individual's control, and a default and final order may be entered 4364
without the taking of testimony or presentation of evidence. If 4365
the board finds a physician assistant unable to practice because 4366
of the reasons set forth in division (B)(4) of this section, the 4367
board shall require the physician assistant to submit to care, 4368
counseling, or treatment by physicians approved or designated by 4369
the board, as a condition for an initial, continued, reinstated, 4370

or renewed ~~certificate~~ license. An individual affected under this 4371
division shall be afforded an opportunity to demonstrate to the 4372
board the ability to resume practicing in compliance with 4373
acceptable and prevailing standards of care. 4374

(2) For purposes of division (B)(5) of this section, if the 4375
board has reason to believe that any individual who holds a 4376
~~certificate~~ license issued under this chapter or any applicant for 4377
a ~~certificate~~ license suffers such impairment, the board may 4378
compel the individual to submit to a mental or physical 4379
examination, or both. The expense of the examination is the 4380
responsibility of the individual compelled to be examined. Any 4381
mental or physical examination required under this division shall 4382
be undertaken by a treatment provider or physician qualified to 4383
conduct such examination and chosen by the board. 4384

Failure to submit to a mental or physical examination ordered 4385
by the board constitutes an admission of the allegations against 4386
the individual unless the failure is due to circumstances beyond 4387
the individual's control, and a default and final order may be 4388
entered without the taking of testimony or presentation of 4389
evidence. If the board determines that the individual's ability to 4390
practice is impaired, the board shall suspend the individual's 4391
~~certificate~~ license or deny the individual's application and shall 4392
require the individual, as a condition for initial, continued, 4393
reinstated, or renewed ~~certification~~ licensure to practice or 4394
prescribe, to submit to treatment. 4395

Before being eligible to apply for reinstatement of a 4396
~~certificate~~ license suspended under this division, the physician 4397
assistant shall demonstrate to the board the ability to resume 4398
practice or prescribing in compliance with acceptable and 4399
prevailing standards of care. The demonstration shall include the 4400
following: 4401

(a) Certification from a treatment provider approved under 4402

section 4731.25 of the Revised Code that the individual has 4403
successfully completed any required inpatient treatment; 4404

(b) Evidence of continuing full compliance with an aftercare 4405
contract or consent agreement; 4406

(c) Two written reports indicating that the individual's 4407
ability to practice has been assessed and that the individual has 4408
been found capable of practicing according to acceptable and 4409
prevailing standards of care. The reports shall be made by 4410
individuals or providers approved by the board for making such 4411
assessments and shall describe the basis for their determination. 4412

The board may reinstate a ~~certificate~~ license suspended under 4413
this division after such demonstration and after the individual 4414
has entered into a written consent agreement. 4415

When the impaired physician assistant resumes practice or 4416
prescribing, the board shall require continued monitoring of the 4417
physician assistant. The monitoring shall include compliance with 4418
the written consent agreement entered into before reinstatement or 4419
with conditions imposed by board order after a hearing, and, upon 4420
termination of the consent agreement, submission to the board for 4421
at least two years of annual written progress reports made under 4422
penalty of falsification stating whether the physician assistant 4423
has maintained sobriety. 4424

(G) If the secretary and supervising member determine that 4425
there is clear and convincing evidence that a physician assistant 4426
has violated division (B) of this section and that the 4427
individual's continued practice or prescribing presents a danger 4428
of immediate and serious harm to the public, they may recommend 4429
that the board suspend the individual's ~~certificate~~ license to 4430
practice or authority to prescribe without a prior hearing. 4431
Written allegations shall be prepared for consideration by the 4432
board. 4433

The board, upon review of those allegations and by an affirmative vote of not fewer than six of its members, excluding the secretary and supervising member, may suspend a ~~certificate~~ license without a prior hearing. A telephone conference call may be utilized for reviewing the allegations and taking the vote on the summary suspension.

The board shall issue a written order of suspension by certified mail or in person in accordance with section 119.07 of the Revised Code. The order shall not be subject to suspension by the court during pendency of any appeal filed under section 119.12 of the Revised Code. If the physician assistant requests an adjudicatory hearing by the board, the date set for the hearing shall be within fifteen days, but not earlier than seven days, after the physician assistant requests the hearing, unless otherwise agreed to by both the board and the ~~certificate~~ license holder.

A summary suspension imposed under this division shall remain in effect, unless reversed on appeal, until a final adjudicative order issued by the board pursuant to this section and Chapter 119. of the Revised Code becomes effective. The board shall issue its final adjudicative order within sixty days after completion of its hearing. Failure to issue the order within sixty days shall result in dissolution of the summary suspension order, but shall not invalidate any subsequent, final adjudicative order.

(H) If the board takes action under division (B)(11), (13), or (14) of this section, and the judicial finding of guilt, guilty plea, or judicial finding of eligibility for intervention in lieu of conviction is overturned on appeal, upon exhaustion of the criminal appeal, a petition for reconsideration of the order may be filed with the board along with appropriate court documents. Upon receipt of a petition and supporting court documents, the board shall reinstate the ~~certificate~~ license to practice ~~or~~

prescribe. The board may then hold an adjudication under Chapter 4466
119. of the Revised Code to determine whether the individual 4467
committed the act in question. Notice of opportunity for hearing 4468
shall be given in accordance with Chapter 119. of the Revised 4469
Code. If the board finds, pursuant to an adjudication held under 4470
this division, that the individual committed the act, or if no 4471
hearing is requested, it may order any of the sanctions identified 4472
under division (B) of this section. 4473

(I) The ~~certificate~~ license to practice issued to a physician 4474
assistant and the physician assistant's practice in this state are 4475
automatically suspended as of the date the physician assistant 4476
pleads guilty to, is found by a judge or jury to be guilty of, or 4477
is subject to a judicial finding of eligibility for intervention 4478
in lieu of conviction in this state or treatment or intervention 4479
in lieu of conviction in another state for any of the following 4480
criminal offenses in this state or a substantially equivalent 4481
criminal offense in another jurisdiction: aggravated murder, 4482
murder, voluntary manslaughter, felonious assault, kidnapping, 4483
rape, sexual battery, gross sexual imposition, aggravated arson, 4484
aggravated robbery, or aggravated burglary. Continued practice 4485
after the suspension shall be considered practicing without a 4486
~~certificate~~ license. 4487

The board shall notify the individual subject to the 4488
suspension by certified mail or in person in accordance with 4489
section 119.07 of the Revised Code. If an individual whose 4490
~~certificate~~ license is suspended under this division fails to make 4491
a timely request for an adjudication under Chapter 119. of the 4492
Revised Code, the board shall enter a final order permanently 4493
revoking the individual's ~~certificate~~ license to practice. 4494

(J) In any instance in which the board is required by Chapter 4495
119. of the Revised Code to give notice of opportunity for hearing 4496
and the individual subject to the notice does not timely request a 4497

hearing in accordance with section 119.07 of the Revised Code, the 4498
board is not required to hold a hearing, but may adopt, by an 4499
affirmative vote of not fewer than six of its members, a final 4500
order that contains the board's findings. In that final order, the 4501
board may order any of the sanctions identified under division (A) 4502
or (B) of this section. 4503

(K) Any action taken by the board under division (B) of this 4504
section resulting in a suspension shall be accompanied by a 4505
written statement of the conditions under which the physician 4506
assistant's ~~certificate~~ license may be reinstated. The board shall 4507
adopt rules in accordance with Chapter 119. of the Revised Code 4508
governing conditions to be imposed for reinstatement. 4509
Reinstatement of a ~~certificate~~ license suspended pursuant to 4510
division (B) of this section requires an affirmative vote of not 4511
fewer than six members of the board. 4512

(L) When the board refuses to grant to an applicant a 4513
~~certificate~~ license to practice as a physician assistant ~~or a~~ 4514
~~certificate to prescribe~~, revokes an individual's ~~certificate~~ 4515
license, refuses to issue a ~~certificate~~ license, or refuses to 4516
reinstate an individual's ~~certificate~~ license, the board may 4517
specify that its action is permanent. An individual subject to a 4518
permanent action taken by the board is forever thereafter 4519
ineligible to hold the ~~certificate~~ license and the board shall not 4520
accept an application for reinstatement of the ~~certificate~~ license 4521
or for issuance of a new ~~certificate~~ license. 4522

(M) Notwithstanding any other provision of the Revised Code, 4523
all of the following apply: 4524

(1) The surrender of a ~~certificate~~ license issued under this 4525
chapter is not effective unless or until accepted by the board. 4526
Reinstatement of a ~~certificate~~ license surrendered to the board 4527
requires an affirmative vote of not fewer than six members of the 4528
board. 4529

(2) An application made under this chapter for a ~~certificate,~~ 4530
~~approval of a physician supervisory plan, or approval of a~~ 4531
~~supervision agreement~~ license may not be withdrawn without 4532
approval of the board. 4533

(3) Failure by an individual to renew a ~~certificate~~ license 4534
in accordance with section 4730.14 ~~or section 4730.48~~ of the 4535
Revised Code shall not remove or limit the board's jurisdiction to 4536
take disciplinary action under this section against the 4537
individual. 4538

Sec. 4730.53. (A) As used in this section, "drug database" 4539
means the database established and maintained by the state board 4540
of pharmacy pursuant to section 4729.75 of the Revised Code. 4541

(B) Except as provided in divisions (C) and (E) of this 4542
section, a physician assistant ~~holding a certificate to prescribe~~ 4543
~~issued~~ licensed under this chapter who has been granted 4544
physician-delegated prescriptive authority shall comply with all 4545
of the following as conditions of prescribing a drug that is 4546
either an opioid analgesic or a benzodiazepine as part of a 4547
patient's course of treatment for a particular condition: 4548

(1) Before initially prescribing the drug, the physician 4549
assistant or the physician assistant's delegate shall request from 4550
the drug database a report of information related to the patient 4551
that covers at least the twelve months immediately preceding the 4552
date of the request. If the physician assistant practices 4553
primarily in a county of this state that adjoins another state, 4554
the physician assistant or delegate also shall request a report of 4555
any information available in the drug database that pertains to 4556
prescriptions issued or drugs furnished to the patient in the 4557
state adjoining that county. 4558

(2) If the patient's course of treatment for the condition 4559
continues for more than ninety days after the initial report is 4560

requested, the physician assistant or delegate shall make periodic 4561
requests for reports of information from the drug database until 4562
the course of treatment has ended. The requests shall be made at 4563
intervals not exceeding ninety days, determined according to the 4564
date the initial request was made. The request shall be made in 4565
the same manner provided in division (B)(1) of this section for 4566
requesting the initial report of information from the drug 4567
database. 4568

(3) On receipt of a report under division (B)(1) or (2) of 4569
this section, the physician assistant shall assess the information 4570
in the report. The physician assistant shall document in the 4571
patient's record that the report was received and the information 4572
was assessed. 4573

(C) Division (B) of this section does not apply in any of the 4574
following circumstances: 4575

(1) A drug database report regarding the patient is not 4576
available, in which case the physician assistant shall document in 4577
the patient's record the reason that the report is not available. 4578

(2) The drug is prescribed in an amount indicated for a 4579
period not to exceed seven days. 4580

(3) The drug is prescribed for the treatment of cancer or 4581
another condition associated with cancer. 4582

(4) The drug is prescribed to a hospice patient in a hospice 4583
care program, as those terms are defined in section 3712.01 of the 4584
Revised Code, or any other patient diagnosed as terminally ill. 4585

(5) The drug is prescribed for administration in a hospital, 4586
nursing home, or residential care facility. 4587

(D) With respect to prescribing any drug that is not an 4588
opioid analgesic or a benzodiazepine but is included in the drug 4589
database pursuant to rules adopted under section 4729.84 of the 4590

Revised Code, the state medical board shall adopt rules that 4591
establish standards and procedures to be followed by a physician 4592
assistant ~~who holds a certificate to prescribe issued~~ licensed 4593
under this chapter who has been granted physician-delegated 4594
prescriptive authority regarding the review of patient information 4595
available through the drug database under division (A)(5) of 4596
section 4729.80 of the Revised Code. The rules shall be adopted in 4597
accordance with Chapter 119. of the Revised Code. 4598

(E) This section and the rules adopted under it do not apply 4599
if the state board of pharmacy no longer maintains the drug 4600
database. 4601

Section 4. That the existing versions of sections 4730.25 and 4602
4730.53 of the Revised Code that are scheduled to take effect 4603
April 1, 2015, are hereby repealed. 4604

Section 5. Sections 3 and 4 of this act shall take effect 4605
April 1, 2015. 4606

Section 6. (A) The State Medical Board may continue to issue 4607
certificates to practice and certificates to prescribe pursuant to 4608
Chapter 4730. of the Revised Code for not longer than ninety days 4609
after the effective date of this act. Thereafter, the Board shall 4610
issue physician assistant licenses in compliance with this act. 4611

(B) Certificates to practice and certificates to prescribe 4612
issued pursuant to division (A) of this section or Chapter 4730. 4613
of the Revised Code, as it existed immediately prior to the 4614
effective date of this act, shall satisfy the requirements for 4615
physician assistant licenses, as created by this act, until the 4616
thirty-first day of January of the first even-numbered year 4617
following the effective date of this act. 4618

Section 7. Section 4730.25 of the Revised Code is presented 4619

in Section 4 of this act as a composite of the section as amended 4620
by Sub. H.B. 314, Am. Sub. H.B. 341, and Am. Sub. H.B. 483, all of 4621
the 130th General Assembly. The General Assembly, applying the 4622
principle stated in division (B) of section 1.52 of the Revised 4623
Code that amendments are to be harmonized if reasonably capable of 4624
simultaneous operation, finds that the composite is the resulting 4625
version of the section in effect prior to the effective date of 4626
the section as presented in this act. 4627