REGISTERED NURSES

Authorization for RNs to dispense drugs and devices on the order of an NP, CNM, and PA in a licensed primary care clinic

New provision for RNs in specific circumstances by approved standardized procedure to dispense self-administered hormonal contraceptives and administer injections of hormonal contraceptives

Legislation enacted during the 2011-2012 Session

Effective January 1, 2013 AB 2348 (Mitchell), Chapter 460, is an act to amend Section 2725.1 of, and to add Section 2725.2 to, the Business and Professions Code, relating to registered nursing.

Section 1. Section 2725.1 of the Business and Professions Code is amended to read:

2725.1. (a) of the Business and Professions Code, the Nursing Practice Act, authorizes a registered nurse to dispense drugs or devices upon an order by a licensed physician and surgeon or an order issued by a certified nurse-midwife, nurse practitioner, and physician assistant issued pursuant to Section 2746.51, 2836.1, or 35.02.1, if the registered nurse is functioning within a licensed primary care clinic as defined in subdivision (a) of Section 1204, or within a clinic as defined in subdivision (b), (c), (h), or (j) of Section 1206, of the Health and Safety Code.

(b) No clinic shall employ a registered nurse to perform dispensing duties exclusively. No registered nurse shall dispense drugs in a pharmacy; keep a pharmacy, open shop, or drugstore for the retailing of drugs and poisons. No registered nurse shall compound drugs. Dispensing of drugs by a registered nurse, except a certified nurse-midwife who functions pursuant to a standardized procedure or protocol described in Section 2746.51, or a nurse practitioner who functions pursuant to a standardized procedure described in Section 2836.1, or protocol, shall not include substances included in the California Uniform Controlled Substance Act (Division 10 commencing with Section 11000 of the Health and Safety Code). Nothing in this section shall exempt a clinic from provisions of Article 13 (commencing with Section 4180) of Chapter 9.

(c) Nothing in this section shall be construed to limit any other authority granted to a certified nurse-midwife pursuant to Article 2.5 (commencing with Section 2746), to a nurse practitioner pursuant to Article 8 (commencing with Section 2834), or to physician assistant pursuant to Chapter 7.7 (commencing with Section 3500).

(d) Nothing in this section shall be construed to affect the sites or types of health care facilities at which drugs are or devices are authorized to be dispensed pursuant to Chapter 9 (commencing with Section 4000)

Section 2. Section 2725.2 is added to Business and Professions Code, to read:
2725.2. (a) Notwithstanding any other provision of law, a registered nurse may dispense self-administered hormonal contraceptives approved by the federal Food and Drug Administration (FDA) and may administer injections of hormonal contraceptives approved by the FDA in strict adherence to standardized procedures developed in compliance with subdivision (c) of Section 2725.

(b) The standardized procedure described in subdivision (a) shall include all of the following:

(1) Which nurse, based on successful completion of a training and competency assessment, may dispense or administer the hormonal contraceptives.

(2) Minimum training requirements regarding educating patients on medical standards for ongoing women’s preventive health, contraception options education and counseling, properly eliciting, documentation, and assessing patient and family health history, and utilization of the United States Medical Eligibility Criteria for Contraceptive Use.

(3) Demonstration of competency in providing the appropriate prior examination comprised of checking blood pressure, weight, and patient and family health history, including medication taken by the patient.

(4) Which hormonal contraceptive may be dispensed or administered under specified circumstances, utilizing the most recent version of the United States Medical Eligibility Criteria for Contraceptive Use.

(5) Criteria and procedures for identification, documentation, and referral of patients with contraindications for hormonal contraceptives, and patients in need of a follow-up visit to a physician and surgeon, nurse practitioner, certified nurse-midwife, or physician assistant.

(6) The extent of physician and surgeon supervision required.

(7) The method of periodic review of the nurse’s competence.

(8) The method of periodic review of the standardized procedure, including, but not limited to, the required frequency of review and the person conducting that review.

(9) Adherence to subdivision (a) of Section 2242 in a manner developed through collaboration with health care providers, including physicians and surgeons, certified nurse-midwives, nurse practitioners, physician assistants, and registered nurses. The appropriate prior examination shall be consistent with the evidence-based practice guidelines adopted by the federal Centers for Disease Control and Prevention in conjunction with the United States Medical Eligibility Criteria for Contraceptive Use.

(10) If a patient has been seen exclusively by a registered nurse for three consecutive years, the patient shall be evaluated by a physician and surgeon, nurse practitioner, certified nurse-midwife, or physician assistant prior to continuing the dispensation or administration of hormonal contraceptives.

(c) Nothing in this section shall be construed to affect the sites and types of health facilities at which drugs or devices are authorized to be dispensed pursuant to Chapter 9 (commencing with Section 4000).