HOUSE OF REPRESENTATIVES - FLOOR VERSION

STATE OF OKLAHOMA

1st Session of the 56th Legislature (2017)

HOUSE BILL 1013

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(Kevin), Murdock, Tadlock,
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and Sanders

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AS INTRODUCED

An Act relating to professions and occupations; amending 59 O.S. 2011, Section 353.1a, which relates to prescribing authority of advanced practice registered nurse; removing supervisory physician requirement; updating statutory references; removing requirement that certain information be identified; amending 59 O.S. 2011, Section 567.3a, which relates to definitions used in the Oklahoma Nursing Practice Act; modifying and deleting certain definitions; amending 59 O.S. 2011, Section 567.4a, which relates to prescriptive authority; permitting Oklahoma Board of Nursing to grant and limit prescribing and ordering authority to certain licensees; deleting requirements of certain rules promulgated by the Board; amending 59 O.S. 2011, Section 567.5a as amended by Section 2, Chapter 228, O.S.L. 2013 (59 O.S. Supp. 2016, Section 567.5a), which relates to license to practice as Advanced Practice Registered Nurse; removing requirement to submit certain statement from Oklahoma physician; amending 63 O.S. 2011, Section 2-312, which relates to the authority to prescribe controlled dangerous substances; updating statutory references; providing advanced practice registered nurse may only dispense controlled dangerous substances pursuant to certain provisions; repealing 59 O.S. 2011, Section 567.4b, which relates to the Formulary Advisory Council; and providing an effective date.

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BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

2 SECTION 1. AMENDATORY 59 O.S. 2011, Section 353.1a, is 3 amended to read as follows:

Section 353.1a Prescribing authority shall be allowed, under the medical direction of a supervising physician, for an advanced practice nurse recognized by the Oklahoma Board of Nursing in one of the following categories: advanced registered certified nurse practitioners, clinical nurse specialists, or certified nursemidwives. The advanced practice nurse may write or sign, or transmit by word of mouth, telephone or other means of communication an order for drugs or medical supplies that is intended to be filled, compounded, or dispensed by a pharmacist. The supervising physician and the advanced practice nurse shall be identified at the time of origination of the prescription and the name of the advanced practice nurse shall be printed on the prescription label.

SECTION 2. AMENDATORY 59 O.S. 2011, Section 567.3a, is amended to read as follows:

Section 567.3a As used in the Oklahoma Nursing Practice Act:

- 1. "Board" means the Oklahoma Board of Nursing;
- 2. "The practice of nursing" means the performance of services provided for purposes of nursing diagnosis and treatment of human responses to actual or potential health problems consistent with educational preparation. Knowledge and skill are the basis for assessment, analysis, planning, intervention, and evaluation used in

1	the promotion and maintenance of health and nursing management of
2	illness, injury, infirmity, restoration or optimal function, or
3	death with dignity. Practice is based on understanding the human
4	condition across the human lifespan and understanding the
5	relationship of the individual within the environment. This
6	practice includes execution of the medical regime including the
7	administration of medications and treatments prescribed by any
8	person authorized by state law to so prescribe;

- 3. "Registered nursing" means the practice of the full scope of nursing which includes, but is not limited to:
 - a. assessing the health status of individuals, families and groups,
 - analyzing assessment data to determine nursing care needs,
 - c. establishing goals to meet identified health care needs,
 - d. planning a strategy of care,
 - e. establishing priorities of nursing intervention to implement the strategy of care,
 - f. implementing the strategy of care,
 - g. delegating such tasks as may safely be performed by others, consistent with educational preparation and that do not conflict with the provisions of the Oklahoma Nursing Practice Act,

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1	h. p	roviding safe and effective nursing care rendered
2	d	irectly or indirectly,
3	i. e	valuating responses to interventions,
4	j. t	eaching the principles and practice of nursing,
5	k. m	anaging and supervising the practice of nursing,
6	1. c	ollaborating with other health professionals in the
7	m	anagement of health care,
8	m. p	erforming additional nursing functions in accordance
9	W	ith knowledge and skills acquired beyond basic
10	n	ursing preparation, and
11	n. d	elegating those nursing tasks as defined in the rules
12	0	f the Board that may be performed by an advanced
13	u	nlicensed assistive person;
14	4. "Licens	ed practical nursing" means the practice of nursing
15	under the super	vision or direction of a registered nurse, licensed
16	physician or de	ntist. This directed scope of nursing practice
17	includes, but i	s not limited to:
18	a. c	ontributing to the assessment of the health status of
19	i	ndividuals and groups,
20	b. p	articipating in the development and modification of
21	t	he plan of care,
22	c. i	mplementing the appropriate aspects of the plan of
23	С	are,
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1	d.	delegating such tasks as may safely be performed by
2		others, consistent with educational preparation and
3		that do not conflict with the Oklahoma Nursing
4		Practice Act,
5	е.	providing safe and effective nursing care rendered
6		directly or indirectly,
7	f.	participating in the evaluation of responses to
8		interventions,
9	g.	teaching basic nursing skills and related principles,
10	h.	performing additional nursing procedures in accordance
11		with knowledge and skills acquired through education
12		beyond nursing preparation, and
13	i.	delegating those nursing tasks as defined in the rules
14		of the Board that may be performed by an advanced
15		unlicensed assistive person;
16	5. "Adva	nced Practice Registered Nurse" means a licensed
17	Registered Nu	rse:
18	a.	who has completed an advanced practice registered
19		nursing education program in preparation for one of
20		four recognized advanced practice registered nurse
21		roles,
22	b.	who has passed a national certification examination
23		recognized by the Board that measures the advanced
24		practice registered nurse role and specialty

competencies and who maintains recertification in the role and specialty through a national certification

- who has acquired advanced clinical knowledge and skills in preparation for providing both direct and indirect care to patients; however, the defining factor for all Advanced Practice Registered Nurses is that a significant component of the education and practice focuses on direct care of individuals,
- whose practice builds on the competencies of Registered Nurses by demonstrating a greater depth and breadth of knowledge, a greater synthesis of data, and increased complexity of skills and interventions, and
- who has been educationally prepared to assume responsibility and accountability for health promotion and/or maintenance as well as the assessment, diagnosis and management of patient problems which may include the use and prescription of pharmacological and nonpharmacological interventions,
- who has clinical experience of sufficient depth and breadth to reflect the license, and
- who has obtained a license as an Advanced Practice Registered Nurse in one of the following roles: Certified Registered Nurse Anesthetist, Certified

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Nurse-Midwife, Clinical Nurse Specialist, or Certified
Nurse Practitioner.

Practicing as an Advanced Practice Registered Nurse means an expanded scope of nursing in a role and population focus approved by the Board, with or without compensation or personal profit, and includes the registered nurse scope of practice. The scope of an Advanced Practice Registered Nurse may include, but is not limited to, performing acts of advanced assessment; diagnosing; prescribing and ordering nonpharmacological interventions, including, but not limited to, durable medical equipment, medical devices, nutrition, blood and blood products; and supportive services, including, but not limited to, home health care, hospice and physical and occupational therapy. Advanced Practice Registered Nurses may serve as primary care providers of record.

Advanced Practice Registered Nurses are expected to practice as licensed practitioners within standards established and/or recognized by the Board. Each Advanced Practice Registered Nurse is accountable to patients, the nursing profession and the Board for complying with the requirements of the Oklahoma Nursing Practice Act and accountable for the quality of advanced nursing care rendered, for recognizing limits of knowledge and experience, for planning for the management of situations beyond the Advanced Practice Registered Nurse's expertise and for consulting with or referring patients to other health care providers, as appropriate.

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Only those persons who hold a license to practice advanced practice registered nursing in this state shall have the right to use the title "Advanced Practice Registered Nurse" and to use the abbreviation "APRN". Only those persons who have obtained a license in the following disciplines shall have the right to fulfill the roles and use the applicable titles: Certified Registered Nurse Anesthetist and the abbreviation "CRNA", Certified Nurse-Midwife and the abbreviation "CNM", Clinical Nurse Specialist and the abbreviation "CNS", and Certified Nurse Practitioner and the abbreviation "CNP".

It shall be unlawful for any person to assume the role or use the title Advanced Practice Registered Nurse or use the abbreviation "APRN" or use the respective specialty role titles and abbreviations or to use any other titles or abbreviations that would reasonably lead a person to believe the user is an Advanced Practice Registered Nurse, unless permitted by this act. Any individual doing so shall be guilty of a misdemeanor, which shall be punishable, upon conviction, by imprisonment in the county jail for not more than one (1) year or by a fine of not less than One Hundred Dollars (\$100.00) nor more than One Thousand Dollars (\$1,000.00), or by both such imprisonment and fine for each offense;

6. "Certified Nurse Practitioner" is an Advanced Practice
Registered Nurse who performs in an expanded role in the delivery of
health care:

1	a. consistent with advanced educational preparation as a
2	Certified Nurse Practitioner in an area of specialty,
3	b. functions within the Certified Nurse Practitioner
4	scope of practice for the selected area of
5	specialization, and
6	c. is in accord with the standards for Certified Nurse
7	Practitioners as identified by the certifying body and
8	approved by the Board
9	is prepared to function as a licensed practitioner, providing
10	primary or acute care in accordance with education and specialty
11	certification, along the wellness-illness continuum to a specific
12	population in diverse settings. The Certified Nurse Practitioner
13	diagnoses and treats patients with undifferentiated symptoms as well
14	as those with established diagnoses. The Certified Nurse
15	Practitioner practices in accordance with the standards for
16	certified nurse practitioner practice as defined by the professional
17	associations recognized by the Board.
18	A Certified Nurse Practitioner shall be eligible, in accordance
19	with the scope of practice of the Certified Nurse Practitioner, to
20	obtain recognition as authorized by the Board to prescribe and
21	order, as defined by the rules promulgated by the Board pursuant to
22	this section and subject to the medical direction of a supervising
23	physician. This authorization shall not include dispensing drugs,

but shall not preclude, subject to federal regulations, the receipt

1	of, the signing for, or the dispensing of professional samples to
2	patients.
3	The Certified Nurse Practitioner accepts responsibility,
4	accountability, and obligation to practice in accordance with usual
5	and customary advanced practice registered nursing standards and
6	functions as defined by the scope of practice/role definition
7	statements for the Certified Nurse Practitioner;
8	7. a. "Clinical Nurse Specialist" is an Advanced Practice
9	Registered Nurse who holds÷
10	(1) a master's degree or higher in nursing with
11	clinical specialization preparation to function
12	in an expanded role,
13	(2) specialty certification from a national
14	certifying organization recognized by the Board,
15	(3) a certificate of recognition from the Board, and
16	(4) any nurse holding a specialty certification as a
17	Clinical Nurse Specialist valid on January 1,
18	1994, granted by a national certifying
19	organization recognized by the Board, shall be
20	deemed to be a Clinical Nurse Specialist under
21	the provisions of the Oklahoma Nursing Practice
22	Act.
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1	b.	In the expanded role, the Clinical Nurse Specialist
2		performs at an advanced practice level which shall
3		include, but not be limited to:
4		(1) practicing as an expert clinician in the
5		provision of direct nursing care to a selected
6		population of patients or clients in any setting,
7		including private practice,
8		(2) managing the care of patients or clients with
9		complex nursing problems,
10		(3) enhancing patient or client care by integrating
11		the competencies of clinical practice, education,
12		consultation, and research, and
13		(4) referring patients or clients to other services
14		as a licensed practitioner, diagnosing and treating
15		patients with undifferentiated symptoms as well as
16		those with established diagnoses, in a specialized
17		area of nursing practice to specific populations in
18		diverse settings. The Clinical Nurse Specialist
19		practices in accordance with the standards for
20		clinical nurse specialist practice as defined by the
21		professional associations recognized by the Board.
22	c. b.	A Clinical Nurse Specialist in accordance with the
23		scope of practice of such Clinical Nurse Specialist
24		shall be eligible to obtain recognition as authorized

by the Board to prescribe <u>and order</u>, as defined by the rules promulgated by the Board pursuant to this section, and subject to the medical direction of a <u>supervising physician</u>. This authorization shall not include dispensing drugs, but shall not preclude, subject to federal regulations, the receipt of, the signing for, or the dispensing of professional samples to patients.

- d. c. The Clinical Nurse Specialist accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice nursing standards and functions as defined by the scope of practice/role definition statements for the Clinical Nurse Specialist;
- 8. "Nurse-Midwife" is a qualified registered nurse who has received a certificate of recognition from the Oklahoma Board of Nursing who possesses evidence of certification according to the requirements of the American College of Nurse-Midwives an Advanced Practice Registered Nurse who is prepared to function as a licensed practitioner providing a full range of primary health care services in diverse settings to women throughout the lifespan, including gynecologic care, family planning services, preconception care, prenatal and postpartum care, childbirth, care of the newborn and treating the male partner of female patients for sexually

transmitted infection and reproductive health. The Certified Nurse-Midwife practices in accordance with the standards for nurse-midwife practice as defined by the professional associations recognized by the Board.

A Certified Nurse-Midwife in accordance with the scope of practice of such Certified Nurse-Midwife shall be eligible to obtain recognition as authorized by the Board to prescribe and order, as defined by the rules promulgated by the Board pursuant to this section and subject to the medical direction of a supervising physician. This authorization shall not include the dispensing of drugs, but shall not preclude, subject to federal regulations, the receipt of, the signing for, or the dispensing of professional samples to patients.

The Certified Nurse-Midwife accepts responsibility, accountability, and obligation to practice in accordance with usual and customary advanced practice registered nursing standards and functions as defined by the scope of practice/role definition statements for the Certified Nurse-Midwife;

9. "Nurse-midwifery practice" means providing management of care of normal newborns and women, antepartally, intrapartally, postpartally and gynecologically, occurring within a health care system which provides for medical consultation, medical management or referral, and is in accord with the standards for nurse-midwifery practice as defined by the American College of Nurse-Midwives;

10. a. "Certified Registered Nurse Anesthetist" is an Advanced Practice Registered Nurse who:

- (1) is certified by the Council on Certification of
 Nurse Anesthetists as a Certified Registered
 Nurse Anesthetist within one (1) year following
 completion of an approved certified registered
 nurse anesthetist education program, and
 continues to maintain such recertification by the
 Council on Recertification of Nurse Anesthetists,
 and
- (2) administers anesthesia under the supervision of a medical doctor, an osteopathic physician, a podiatric physician or a dentist licensed in this state and under conditions in which timely onsite consultation by such doctor, osteopath, podiatric physician or dentist is available.
- b. A Certified Registered Nurse Anesthetist, under the supervision of a medical doctor, osteopathic physician, podiatric physician or dentist licensed in this state, and under conditions in which timely, onsite consultation by such medical doctor, osteopathic physician, podiatric physician or dentist is available, shall be authorized, pursuant to rules adopted by the Oklahoma Board of Nursing, to order,

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select, obtain and administer legend drugs, Schedules
II through V controlled substances, devices, and
medical gases only when engaged in the preanesthetic
preparation and evaluation; anesthesia induction,
maintenance and emergence; and postanesthesia care. A
Certified Registered Nurse Anesthetist may order,
select, obtain and administer drugs only during the
perioperative or periobstetrical period.

- c. A Certified Registered Nurse Anesthetist who applies for authorization to order, select, obtain and administer drugs shall:
 - (1) be currently recognized as a Certified Registered

 Nurse Anesthetist in this state,
 - (2) provide evidence of completion, within the twoyear period immediately preceding the date of
 application, of a minimum of fifteen (15) units
 of continuing education in advanced pharmacology
 related to the administration of anesthesia as
 recognized by the Council on Recertification of
 Nurse Anesthetists or the Council on
 Certification of Nurse Anesthetists, and
 - (3) complete and submit a notarized application, on a form prescribed by the Board, accompanied by the

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application fee established pursuant to this section.

- d. The authority to order, select, obtain and administer drugs shall be terminated if a Certified Registered Nurse Anesthetist has:
 - (1) ordered, selected, obtained or administered drugs outside of the Certified Registered Nurse Anesthetist scope of practice or ordered, selected, obtained or administered drugs for other than therapeutic purposes, or
 - (2) violated any provision of state laws or rules or federal laws or regulations pertaining to the practice of nursing or the authority to order, select, obtain and administer drugs.
- e. The Oklahoma Board of Nursing shall notify the Board of Pharmacy after termination of or a change in the authority to order, select, obtain and administer drugs for a Certified Registered Nurse Anesthetist.
- f. The Board shall provide by rule for biennial application renewal and reauthorization of authority to order, select, obtain and administer drugs for Certified Registered Nurse Anesthetists. At the time of application renewal, a Certified Registered Nurse Anesthetist shall submit documentation of a minimum of

- eight (8) units of continuing education, completed during the previous two (2) years, in advanced pharmacology relating to the administration of anesthesia, as recognized by the Council on Recertification of Nurse Anesthetists or the Council on Certification of Nurse Anesthetists.
- g. This paragraph shall not prohibit the administration of local or topical anesthetics as now permitted by law. Provided further, nothing in this paragraph shall limit the authority of the Board of Dentistry to establish the qualifications for dentists who direct the administration of anesthesia; and
- 11. "Supervising physician" means an individual holding a current license to practice as a physician from the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, who supervises a Certified Nurse Practitioner, a Clinical Nurse Specialist, or a Certified Nurse-Midwife, and who is not in training as an intern, resident, or fellow. To be eligible to supervise such Advanced Practice Registered Nurse, such physician shall remain in compliance with the rules promulgated by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners;
- 12. "Supervision of an Advanced Practice Registered Nurse with prescriptive authority" means overseeing and accepting

responsibility for the ordering and transmission by a Certified Nurse Practitioner, a Clinical Nurse Specialist, or a Certified Nurse-Midwife of written, telephonic, electronic or oral prescriptions for drugs and other medical supplies, subject to a defined formulary; and 13. "Advanced Unlicensed Assistant" means any person who has successfully completed a certified training program approved by the Board that trains the Advanced Unlicensed Assistant to perform specified technical skills identified by the Board in acute care settings under the direction and supervision of the Registered Nurse or Licensed Practical Nurse. SECTION 3. AMENDATORY 59 O.S. 2011, Section 567.4a, is amended to read as follows Section 567.4a The Board may grant prescribing and ordering authority through the Advanced Practice Registered Nurse license to Certified Nurse Practitioners, Certified Nurse-Midwives and Clinical Nurse Specialists meeting requirements identified in the Board's rules. The Board may limit the ability of Certified Nurse Practitioners, Certified Nurse-Midwives and Clinical Nurse Specialists to prescribe and order. All licensed Certified Nurse Practitioners, Certified Nurse-Midwives and Clinical Nurse Specialists who are granted prescribing and ordering authority are authorized to diagnose, prescribe and institute therapy or referrals of patients to healthcare agencies, healthcare providers and

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community resources. They are authorized to prescribe, procure, administer and dispense over the counter legend and controlled substances. They plan and initiate a therapeutic regimen that includes ordering and prescribing medical devices and equipment, nutrition, diagnostic and supportive services, including, but not limited to, speech therapy, home health care, hospice and physical and occupational therapy.

The rules regarding prescriptive prescribing and ordering authority recognition promulgated by the Oklahoma Board of Nursing pursuant to paragraphs 6 through 9, 11 and 12 of Section 567.3a of this title shall:

1. Define the procedure for documenting supervision by a physician licensed in Oklahoma to practice by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners. Such procedure shall include a written statement that defines appropriate referral, consultation, and collaboration between the advanced practice nurse, recognized to prescribe as defined in paragraphs 6 through 9, 11 and 12 of Section 567.3a of this title, and the supervising physician. The written statement shall include a method of assuring availability of the supervising physician through direct contact, telecommunications or other appropriate electronic means for consultation, assistance with medical emergencies, or patient referral. The written statement shall be part of the initial application and the renewal application

submitted to the Board for recognition for prescriptive authority

for the advanced practice nurse. Changes to the written statement

shall be filed with the Board within thirty (30) days of the change

and shall be effective on filing;

2. Define minimal requirements for initial application for prescriptive authority which shall include, but not be limited to, evidence of completion of a minimum of forty-five (45) contact hours or three (3) academic credit hours of education in pharmacotherapeutics, clinical application, and use of pharmacological agents in the prevention of illness, and in the restoration and maintenance of health in a program beyond basic registered nurse preparation, approved by the Board. Such contact hours or academic credits shall be obtained within a time period of three (3) years immediately preceding the date of application for prescriptive authority;

3. 2. Define minimal requirements for application for renewal of prescriptive authority which shall include, but not be limited to, documentation of a minimum of fifteen (15) contact hours or one (1) academic credit hour of education in pharmacotherapeutics, clinical application, and use of pharmacological agents in the prevention of illness, and in the restoration and maintenance of health in a program beyond basic registered nurse preparation, approved by the Board, within the two-year period immediately

preceding the effective date of application for renewal of prescriptive authority;

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4. 3. Require that beginning July 1, 2002, an advanced practice nurse Advanced Practice Registered Nurse shall demonstrate successful completion of a master's degree in a clinical nurse specialty in order to be eligible for initial application for prescriptive authority under the provisions of this act;

- 5. Define the method for communicating authority to prescribe or termination of same, and the formulary to the Board of Pharmacy, all pharmacies, and all registered pharmacists;
 - 6. 4. Define terminology used in such rules;
- 7. 5. Define the parameters for the prescribing practices of the advanced practice nurse Advanced Practice Registered Nurse; and
- 8.6. Define the methods for termination of prescriptive authority for advanced practice nurses; and
 - 9. a. Establish a Formulary Advisory Council that shall develop and submit to the Board recommendations for an exclusionary formulary that shall list drugs or categories of drugs that shall not be prescribed by advanced practice nurses recognized to prescribe by the Oklahoma Board of Nursing. The Formulary Advisory Council shall also develop and submit to the Board recommendations for practice-specific prescriptive standards for each category of advanced practice nurse

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recognized to prescribe by the Oklahoma Board of

Nursing pursuant to the provisions of the Oklahoma

Nursing Practice Act. The Board shall either accept

or reject the recommendations made by the Council. No

amendments to the recommended exclusionary formulary

may be made by the Board without the approval of the

Formulary Advisory Council.

- b. The Formulary Advisory Council shall be composed of twelve (12) members as follows:
 - (1) four members, to include a pediatrician, an obstetrician-gynecological physician, a general internist, and a family practice physician; provided that three of such members shall be appointed by the Oklahoma State Medical Association, and one shall be appointed by the Oklahoma Osteopathic Association,
 - (2) four members who are registered pharmacists, appointed by the Oklahoma Pharmaceutical

 Association, and
 - four members, one of whom shall be an advanced registered nurse practitioner, one of whom shall be a clinical nurse specialist, one of whom shall be a certified nurse-midwife, and one of whom shall be a current member of the Oklahoma Board

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of Nursing, all of whom shall be appointed by the Oklahoma Board of Nursing.

All professional members of the Formulary Advisory Council shall be in active clinical practice, at least fifty percent (50%) of the time, within their defined area of specialty. The members of the Formulary Advisory Council shall serve at the pleasure of the appointing authority for a term of three (3) years. The terms of the members shall be staggered. Members of the Council may serve beyond the expiration of their term of office until a successor is appointed by the original appointing authority. A vacancy on the Council shall be filled for the balance of the unexpired term by the original appointing authority. Members of the Council shall elect a chair and a vicechair from among the membership of the Council. For the transaction of business, at least seven members, with a minimum of two members present from each of the identified categories of physicians, pharmacists and advanced practice nurses, shall constitute a quorum. The Council shall recommend and the Board shall approve and implement an initial exclusionary formulary on or before January 1, 1997. The Council and the Board shall annually review the approved

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exclusionary formulary and shall make any necessary revisions utilizing the same procedures used to develop the initial exclusionary formulary the Advanced Practice Registered Nurse.

SECTION. 4 AMENDATORY 59 O.S. 2011, Section 567.5a, as amended by Section 2, Chapter 228, O.S.L. 2013 (59 O.S. Supp. 2016, Section 567.5a), is amended to read as follows:

Section 567.5a A. All applicants for a license to practice as an Advanced Practice Registered Nurse shall be subject to Section 567.8 of this title.

- B. An applicant for an initial license to practice as an Advanced Practice Registered Nurse shall:
- 1. Submit a completed written application and appropriate fees as established by the Board;
- 2. Submit a criminal history records check that complies with Section 567.18 of this title;
 - 3. Hold a current Registered Nurse license in this state;
- 4. Have completed an advanced practice registered nursing education program in one of the four advanced practice registered nurse roles and a specialty area recognized by the Board. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology, neonatal,

pediatrics, women's health/gender-related, or psychiatric/mental
health;

- 5. Be currently certified in an advanced practice specialty certification consistent with educational preparation and by a national certifying body recognized by the Board; and
- 6. Provide any and all other evidence as required by the Board in its rules.
 - C. The Board may issue a license by endorsement to an Advanced Practice Registered Nurse licensed under the laws of another state if the applicant meets the qualifications for licensure in this state. An applicant by endorsement shall:
- 1. Submit a completed written application and appropriate fees as established by the Board;
 - 2. Hold a current Registered Nurse license in this state;
- 3. Hold recognition as an Advanced Practice Registered Nurse in a state or territory;
- 4. Have completed an advanced practice registered nursing education program in one of the four roles and a specialty area recognized by the Board. Effective January 1, 2016, the applicant shall have completed an accredited graduate level advanced practice registered nursing education program in at least one of the following population foci: family/individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health/gender-related, or psychiatric/mental health;

- 5. Be currently certified in an advanced practice specialty certification consistent with educational preparation and by a national certifying body recognized by the Board;
- 6. Meet continued competency requirements as set forth in Board rules; and
- 7. Provide any and all other evidence as required by the Board in its rules.
- D. The Board may issue prescriptive authority recognition by endorsement to an Advanced Practice Registered Nurse licensed as an APRN-CNP, APRN-CNS, or APRN-CNM under the laws of another state if the applicant meets the requirements set forth in this section. An applicant for prescriptive authority recognition by endorsement shall:
- 1. Submit a completed written application and appropriate fees as established by the Board;
- 2. Hold current Registered Nurse and Advanced Practice
 Registered Nurse licenses (APRN-CNP, APRN-CNS, or APRN-CNM) in the
 state;
- 3. Hold current licensure or recognition as an Advanced Practice Registered Nurse in the same role and specialty with prescribing privileges in another state or territory;
- 4. Submit documentation verifying successful completion of a graduate level advanced practice registered nursing education program that included an academic course in pharmacotherapeutic

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management, and didactic and clinical preparation for prescribing incorporated throughout the program;

- 5. Submit a written statement from an Oklahoma licensed physician supervising prescriptive authority as required by the Board in its rules;
- $\frac{6.}{5.}$ Meet continued competency requirements as set forth in Board rules; and
- 7. 6. Provide any and all other evidence as required by the Board in its rules.
 - E. An Advanced Practice Registered Nurse license issued under this section shall be renewed concurrently with the registered nurse license provided that qualifying criteria continue to be met.
- F. The Board may reinstate a license as set forth in Board rules.
- SECTION 5. AMENDATORY 63 O.S. 2011, Section 2-312, is amended to read as follows:
 - Section 2-312. A. A physician, podiatrist, optometrist or a dentist who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of such person's professional practice only, may prescribe and administer controlled dangerous substances, or may cause the same to be administered by medical or paramedical personnel acting under the direction and supervision of the physician, podiatrist, optometrist or dentist, and only may dispense

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- controlled dangerous substances pursuant to the provisions of Sections $\frac{355}{7}$ 355.1 and 355.2 of Title 59 of the Oklahoma Statutes.
- B. A veterinarian who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of the professional practice of the veterinarian only, and not for use by a human being, may prescribe, administer, and dispense controlled dangerous substances and may cause them to be administered by an assistant or orderly under the direction and supervision of the veterinarian.
- C. An advanced practice registered nurse who is recognized to prescribe by the Oklahoma Board of Nursing as an advanced registered a certified nurse practitioner, clinical nurse specialist or certified nurse-midwife, who is subject to medical direction by a supervising physician, pursuant to Section 567.3a of Title 59 of the Oklahoma Statutes, and who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of professional practice only, may prescribe and administer Schedule II, III, IV and V controlled dangerous substances, and only may dispense controlled dangerous substances pursuant to the provisions of Sections 355.1 and 355.2 of Title 59 of the Oklahoma Statutes.
- D. An advanced practice <u>registered</u> nurse who is recognized to order, select, obtain and administer drugs by the Oklahoma Board of Nursing as a certified registered nurse anesthetist pursuant to

- 1 Section 353.1b of Title 59 of the Oklahoma Statutes and who has complied with the registration requirements of the Uniform 3 Controlled Dangerous Substances Act, in good faith and in the course 4 of such practitioner's professional practice only, may order, 5 select, obtain and administer Schedules II through V controlled 6 dangerous substances in a preanesthetic preparation or evaluation; 7 anesthesia induction, maintenance or emergence; or postanesthesia care setting only. A certified registered nurse anesthetist may 8 9 order, select, obtain and administer such drugs only during the 10 perioperative or periobstetrical period.
 - E. A physician assistant who is recognized to prescribe by the State Board of Medical Licensure and Supervision under the medical direction of a supervising physician, pursuant to subsection D of Section 519.6 of Title 59 of the Oklahoma Statutes, and who has complied with the registration requirements of the Uniform Controlled Dangerous Substances Act, in good faith and in the course of professional practice only, may prescribe and administer Schedule II through V controlled dangerous substances.
- 19 SECTION 6. REPEALER 59 O.S. 2011, Section 567.4b, is 20 hereby repealed.
- 21 SECTION 7. This act shall become effective November 1, 2017.
- COMMITTEE REPORT BY: COMMITTEE ON BUSINESS, COMMERCE AND TOURISM, dated 02/08/2017 DO PASS, As Coauthored.

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