

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1995

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SENATE BILL 1017

Short Title: Change Medical Board Name.

(Public)

Sponsors: Senator Odom.

Referred to: Commerce

May 4, 1995

A BILL TO BE ENTITLED

AN ACT TO CHANGE THE NAME OF THE BOARD OF MEDICAL EXAMINERS OF THE STATE OF NORTH CAROLINA TO THE NORTH CAROLINA MEDICAL BOARD AND TO MAKE CONFORMING CHANGES THROUGHOUT THE GENERAL STATUTES.

The General Assembly of North Carolina enacts:

Section 1. G.S. 90-2 reads as rewritten:

"§ 90-2. ~~Board of Examiners.~~ Medical Board.

(a) In order to properly regulate the practice of medicine and surgery for the benefit and protection of the people of North Carolina, there is established ~~a Board of Medical Examiners of the State of North Carolina.~~ the North Carolina Medical Board. The Board shall consist of 12 members.

(1) Seven of the members shall be duly licensed physicians elected and nominated to the Governor by the North Carolina Medical Society.

(2) Of the remaining five members, all to be appointed by the Governor, at least three shall be public members and at least one shall be a physician assistant as defined in G.S. 90-18.1 or a nurse practitioner as defined in G.S. 90-18.2. A public member shall not be a health care provider nor the spouse of a health care provider. For purposes of board membership, 'health care provider' means any licensed health care

1 professional and any agent or employee of any health care institution,  
2 health care insurer, health care professional school, or a member of any  
3 allied health profession. For purposes of this section, a person enrolled  
4 in a program to prepare him to be a licensed health care professional or  
5 an allied health professional shall be deemed a health care provider. For  
6 purposes of this section, any person with significant financial interest in  
7 a health service or profession is not a public member.

8 (b) No member appointed to the Board on or after November 1, 1981, shall serve  
9 more than two complete consecutive three-year terms, except that each member shall  
10 serve until his successor is chosen and qualifies.

11 (c) In order to establish regularly overlapping terms, the terms of office of the  
12 members shall expire as follows: two on October 31, 1993; four on October 31, 1994;  
13 four on October 31, 1995; and two on October 31, 1996. No initial physician member of  
14 the Board may serve another term until at least three years from the date of expiration of  
15 his current term.

16 (d) Any initial or regular member of the Board may be removed from office by the  
17 Governor for good cause shown. Any vacancy in the initial or regular physician  
18 membership of the Board shall be filled for the period of the unexpired term by the  
19 Governor from a list of physicians submitted by the North Carolina Medical Society  
20 Executive Council. Any vacancy in the public membership of the Board shall be filled  
21 by the Governor for the unexpired term.

22 (e) ~~The Board of Medical Examiners~~ North Carolina Medical Board shall have the  
23 power to acquire, hold, rent, encumber, alienate, and otherwise deal with real property in  
24 the same manner as any private person or corporation, subject only to approval of the  
25 Governor and the Council of State as to the acquisition, rental, encumbering, leasing, and  
26 sale of real property. Collateral pledged by the Board for an encumbrance is limited to  
27 the assets, income, and revenues of the Board."

28 Sec. 2. Effective until October 1, 1998, G.S. 58-50-25 reads as rewritten:  
29 **"§ 58-50-25. Nurses' services.**

30 No agency, institution or physician providing a service for which payment or  
31 reimbursement is required to be made under a policy governed by Articles 1 through 64  
32 of this Chapter shall be denied such payment or reimbursement on account of the fact that  
33 such services were rendered through a registered nurse acting under authority of rules and  
34 regulations adopted by the North Carolina Medical Board ~~of Medical Examiners~~ and the  
35 Board of Nursing pursuant to G.S. 90-6 and 90-171.23."

36 Sec. 3. Effective October 1, 1998, G.S. 58-50-25 reads as rewritten:  
37 **"§ 58-50-25. Nurses' services.**

38 No agency, institution or physician providing a service for which payment or  
39 reimbursement is required to be made under a policy governed by Articles 1 through 64  
40 of this Chapter shall be denied such payment or reimbursement on account of the fact that  
41 such services were rendered through a registered nurse acting under authority of rules and  
42 regulations adopted by the North Carolina Medical Board ~~of Medical Examiners~~ and the  
43 Board of Nursing pursuant to G.S. 90-6 and 90-171.23.

1 Nothing herein shall be construed to authorize contracting with or making payments  
2 directly to any nurse not otherwise permitted."

3 Sec. 4. Effective until October 1, 1998, G.S. 58-65-35 reads as rewritten:

4 **"§ 58-65-35. Nurses' services.**

5 No agency, institution or physician providing a service for which payment or  
6 reimbursement is required to be made under a contract governed by this Article and  
7 Article 66 of this Chapter shall be denied such payment or reimbursement on account of  
8 the fact that the service was rendered through a registered nurse acting under authority of  
9 rules and regulations adopted by the North Carolina Medical Board of Medical Examiners  
10 and the Board of Nursing pursuant to G.S. 90-6 and 90-171.23."

11 Sec. 5. Effective October 1, 1998, G.S. 58-65-35 reads as rewritten:

12 **"§ 58-65-35. Nurses' services.**

13 No agency, institution or physician providing a service for which payment or  
14 reimbursement is required to be made under a contract governed by this Article and  
15 Article 66 of this Chapter shall be denied such payment or reimbursement on account of  
16 the fact that the service was rendered through a registered nurse acting under authority of  
17 rules and regulations adopted by the North Carolina Medical Board of Medical Examiners  
18 and the Board of Nursing pursuant to G.S. 90-6 and 90-171.23.

19 Nothing herein shall be construed to authorize contracting with or making payments  
20 directly to a nurse not otherwise permitted."

21 Sec. 6. G.S. 88A-5(2) reads as rewritten:

22 "(2) A physician licensed under Chapter 90 of the General Statutes, who  
23 shall be nominated by the North Carolina Medical Board of Medical  
24 Examiners and appointed by the Governor."

25 Sec. 7. G.S. 90-4 reads as rewritten:

26 **"§ 90-4. Board elects officers; quorum.**

27 The North Carolina Medical Board of Medical Examiners is authorized to elect all  
28 officers and adopt all bylaws as may be necessary. A majority of the membership of the  
29 Board shall constitute a quorum for the transaction of business."

30 Sec. 8. G.S. 90-5 reads as rewritten:

31 **"§ 90-5. Meetings of Board.**

32 The North Carolina Medical Board of Medical Examiners shall assemble once in every  
33 year in the City of Raleigh, and shall remain in session from day to day until all  
34 applicants who may present themselves for examination within the first two days of this  
35 meeting have been examined and disposed of; other meetings in each year may be held at  
36 some suitable point in the State if deemed advisable."

37 Sec. 9. G.S. 90-6 reads as rewritten:

38 **"§ 90-6. Regulations governing applicants for license, examinations, etc.;  
39 appointment of subcommittee.**

40 The North Carolina Medical Board of Medical Examiners is empowered to prescribe  
41 such regulations as it may deem proper, governing applicants for license, admission to  
42 examinations, the conduct of applicants during examinations, and the conduct of  
43 examinations proper.

1 The North Carolina Medical Board of Medical Examiners shall appoint and maintain a  
2 subcommittee to work jointly with a subcommittee of the Board of Nursing to develop  
3 rules and regulations to govern the performance of medical acts by registered nurses,  
4 including the determination of reasonable fees to accompany an application for approval  
5 not to exceed one hundred dollars (\$100.00) and for renewal of such approval not to  
6 exceed fifty dollars (\$50.00). The fee for reactivation of an inactive incomplete  
7 application shall be five dollars (\$5.00). Rules and regulations developed by this  
8 subcommittee from time to time shall govern the performance of medical acts by  
9 registered nurses and shall become effective when adopted by both the North Carolina  
10 Medical Board of Medical Examiners and the Board of Nursing. The North Carolina  
11 Medical Board of Medical Examiners shall have responsibility for securing compliance  
12 with these regulations."

13 Sec. 10. G.S. 90-7 reads as rewritten:

14 **"§ 90-7. Bond of secretary.**

15 The secretary of the North Carolina Medical Board of Medical Examiners shall give  
16 bond with good surety, to the president of the Board, for the safekeeping and proper  
17 payment of all moneys that may come into his hands."

18 Sec. 11. G.S. 90-9 reads as rewritten:

19 **"§ 90-9. Examination for license; scope; conditions and prerequisites.**

20 It is the duty of the North Carolina Medical Board of Medical Examiners to examine for  
21 license to practice medicine or surgery, or any of the branches thereof, every applicant  
22 who complies with the following provisions: the applicant shall, before admittance to  
23 examination, satisfy the Board of possession of academic education equal to the entrance  
24 requirements of the University of North Carolina, or furnish a certificate from the  
25 superintendent of public instruction of the county that the applicant has passed an  
26 examination upon literary attainments to meet the requirements of entrance in the regular  
27 course of the State University. The applicant shall exhibit a diploma or furnish  
28 satisfactory proof of graduation from a medical college or an osteopathic college  
29 approved by the American Osteopathic Association at the time of graduation, dated from  
30 January 1, 1960, to the present, and whose medical and osteopathic schools shall require  
31 an attendance of not less than four years or for a lesser period of time approved by the  
32 Board, and supply these facilities for clinical and scientific instruction as meet the  
33 approval of the Board. An applicant shall have graduated from a medical college  
34 approved by the Liaison Commission on Medical Education or osteopathic college that  
35 has been approved by the American Osteopathic Association; or, if graduated from any  
36 other medical or osteopathic college, the applicant shall be enrolled in a graduate medical  
37 education and training program in North Carolina that has been approved by the Board.  
38 An applicant who has graduated from a medical college not approved by the Liaison  
39 Commission on Medical Education or osteopathic college that has not been approved by  
40 the American Osteopathic Association and who has not enrolled in a graduate medical  
41 education and training program in North Carolina which has been approved by the Board  
42 shall satisfy the Board that the applicant has successfully completed three years of  
43 graduate medical education in a training program approved by the Board. No applicant

1 from a medical or osteopathic college that has been disapproved by the Board is eligible  
2 to take the examination.

3 The examination shall cover the branches of medical science and subjects which the  
4 Board considers necessary to determine competence to practice medicine. The Board  
5 may divide the examination into parts or components.

6 The Board shall grant the applicant a license authorizing the applicant to practice  
7 medicine in any of its branches if the Board determines that the applicant has successfully  
8 passed the examination, is of good moral character, and is:

- 9 (1) a graduate of a medical college approved by the Liaison Commission on  
10 Medical Education or an osteopathic college approved by the American  
11 Osteopathic Association and has successfully completed one year of  
12 training in a medical education program approved by the Board after  
13 graduation from medical school;
- 14 (2) a graduate of a medical college approved by the Liaison Commission on  
15 Medical Education or an osteopathic college approved by the American  
16 Osteopathic Association, is a dentist licensed to practice dentistry under  
17 Article 2 of Chapter 90 of the General Statutes, and has been certified  
18 by the American Board of Oral and Maxillofacial Surgery after having  
19 completed a residency in an Oral and Maxillofacial Surgery Residency  
20 Program approved by the Board before completion of medical school;  
21 or
- 22 (3) a graduate of a medical college that has not been approved by the  
23 Liaison Commission on Medical Education or an osteopathic college  
24 that has not been approved by the American Osteopathic Association  
25 and has successfully completed three years of training in a medical  
26 education program approved by the Board after graduation from  
27 medical school.

28 Applicants shall be examined by number only; names and other identifying  
29 information shall not appear on examination papers."

30 Sec. 12. G.S. 90-11 reads as rewritten:

31 **"§ 90-11. Qualifications of applicant for license.**

32 Every applicant for a license to practice medicine or for approval to perform medical  
33 acts in the State shall satisfy the North Carolina Medical Board of Medical Examiners that  
34 such applicant is of good moral character and meets the other qualifications for the  
35 issuance of such a license or for such approval before any such license or approval is  
36 granted by the Board to such applicant."

37 Sec. 13. G.S. 90-13 reads as rewritten:

38 **"§ 90-13. When license without examination allowed.**

39 The North Carolina Medical Board of Medical Examiners shall in their discretion issue  
40 a license to any applicant to practice medicine and surgery in this State without  
41 examination if said applicant exhibits a diploma or satisfactory proof of graduation from  
42 a medical or osteopathic college, approved as provided in G.S. 90-9 and requiring an  
43 attendance of not less than four years or for such lesser period of time approved by the

1 Board, and a license issued to him to practice medicine and surgery by the Board of  
2 Medical Examiners of another state, and has successfully completed one year of training  
3 after his graduation from medical college in a medical education and training program  
4 approved by the Board, in which program the Board may permit him to practice  
5 medicine. An applicant for licensing under this section who was graduated from a  
6 medical college not approved by the Liaison Commission on Medical Education or  
7 osteopathic college that has not been approved by the American Osteopathic Association  
8 shall have successfully completed three years of training in a medical education and  
9 training program approved by the Board after graduation. The Board may grant a license  
10 under this section for any period of time and with any conditions it deems appropriate.  
11 No license may be granted to any applicant who was graduated from a medical or  
12 osteopathic college which has been disapproved by the Board. "

13 Sec. 14. G.S. 90-14.1 reads as rewritten:

14 **"§ 90-14.1. Judicial review of Board's decision denying issuance of a license.**

15 Whenever the North Carolina Medical Board of Medical Examiners has determined that  
16 a person who has duly made application to take an examination to be given by the Board  
17 showing his education, training and other qualifications required by said Board, or that a  
18 person who has taken and passed an examination given by the Board, has failed to satisfy  
19 the Board of his qualifications to be examined or to be issued a license, for any cause  
20 other than failure to pass an examination, the Board shall immediately notify such person  
21 of its decision, and indicate in what respect the applicant has so failed to satisfy the  
22 Board. Such applicant shall be given a formal hearing before the Board upon request of  
23 such applicant filed with or mailed by registered mail to the secretary of the Board at  
24 Raleigh, North Carolina, within 10 days after receipt of the Board's decision, stating the  
25 reasons for such request. The Board shall within 20 days of receipt of such request notify  
26 such applicant of the time and place of a public hearing, which shall be held within a  
27 reasonable time. The burden of satisfying the Board of his qualifications for licensure  
28 shall be upon the applicant. Following such hearing, the Board shall determine whether  
29 the applicant is qualified to be examined or is entitled to be licensed as the case may be.  
30 Any such decision of the Board shall be subject to judicial review upon appeal to the  
31 Superior Court of Wake County upon the filing with the Board of a written notice of  
32 appeal with exceptions taken to the decision of the Board within 20 days after service of  
33 notice of the Board's final decision. Within 30 days after receipt of notice of appeal, the  
34 secretary of the Board shall certify to the clerk of the Superior Court of Wake County the  
35 record of the case which shall include a copy of the notice of hearing, a transcript of the  
36 testimony and evidence received at the hearing, a copy of the decision of the Board, and a  
37 copy of the notice of appeal and exceptions. Upon appeal the case shall be heard by the  
38 judge without a jury, upon the record, except that in cases of alleged omissions or errors  
39 in the record, testimony may be taken by the court. The decision of the Board shall be  
40 upheld unless the substantial rights of the applicant have been prejudiced because the  
41 decision of the Board is in violation of law or is not supported by any evidence  
42 admissible under this Article, or is arbitrary or capricious. Each party to the review  
43 proceeding may appeal to the Supreme Court as hereinafter provided in G.S. 90-14.11."

1           Sec. 15. G.S. 90-15 reads as rewritten:

2 **"§ 90-15. License fee; salaries, fees, and expenses of Board.**

3           Each applicant for a license by examination shall pay to the North Carolina Medical  
4 ~~Board of Medical Examiners of the State of North Carolina~~ a fee which shall be prescribed by  
5 the Board in an amount not exceeding the sum of four hundred dollars (\$400.00) plus the  
6 cost of test materials before being admitted to the examination. Whenever a license is  
7 granted without examination, as authorized in G.S. 90-13, the applicant shall pay to the  
8 Board a fee in an amount to be prescribed by the Board not in excess of two hundred fifty  
9 dollars (\$250.00). Whenever a limited license is granted as provided in G.S. 90-12, the  
10 applicant shall pay to the Board a fee not to exceed one hundred fifty dollars (\$150.00),  
11 except where a limited license to practice in a medical education and training program  
12 approved by the Board for the purpose of education or training is granted, the applicant  
13 shall pay a fee of twenty-five dollars (\$25.00). A fee of twenty-five dollars (\$25.00) shall  
14 be paid for the issuance of a duplicate license. All fees shall be paid in advance to the  
15 ~~Board of Medical Examiners of the State of North Carolina,~~ North Carolina Medical Board, to  
16 be held in a fund for the use of the Board. The compensation and expenses of the  
17 members and officers of the the Board and all expenses proper and necessary in the  
18 opinion of the Board to the discharge of its duties under and to enforce the laws  
19 regulating the practice of medicine or surgery shall be paid out of the fund, upon the  
20 warrant of the Board. The per diem compensation of Board members shall not exceed  
21 two hundred dollars (\$200.00) per day per member for time spent in the performance and  
22 discharge of duties as a member. Any unexpended sum or sums of money remaining in  
23 the treasury of the Board at the expiration of the terms of office of the members of the  
24 Board shall be paid over to their successors in office.

25           For the initial and annual registration of an assistant to a physician, the Board may  
26 require the payment of a fee not to exceed a reasonable amount."

27           Sec. 16. G.S. 90-15.1 reads as rewritten:

28 **"§ 90-15.1. Registration every two years with Board.**

29           Every person licensed to practice medicine by the North Carolina Medical Board ~~of~~  
30 ~~Medical Examiners~~ shall, during the month of January in every odd-numbered year,  
31 register with the Board. A person who registers with the Board shall report to the Board  
32 the person's name and office and residence address and any other information required by  
33 the Board, and shall pay a registration fee fixed by the Board not in excess of two  
34 hundred dollars (\$200.00). A physician who fails to register when required shall pay an  
35 additional fee of twenty dollars (\$20.00) to the Board. Should a physician fail to register  
36 and pay the fees imposed, and should such failure continue for a period of 30 days, the  
37 license of such physician may be suspended by the Board, after notice and hearing at the  
38 next regular meeting of the Board. Upon payment of all fees and penalties which are due,  
39 the license of the physician may be reinstated, subject to the Board requiring the  
40 physician to appear before the Board for an interview and to comply with other licensing  
41 requirements."

42           Sec. 17. G.S. 90-16 reads as rewritten:

1 **"§ 90-16. Board to keep record; publication of names of licentiates; transcript as**  
2 **evidence; receipt of evidence concerning treatment of patient who has not**  
3 **consented to public disclosure.**

4 The North Carolina Medical Board of Examiners shall keep a regular record of its  
5 proceedings in a book kept for that purpose, together with the names of the members of  
6 the Board present, the names of the applicants for license, and other information as to its  
7 actions. The North Carolina Medical Board of Examiners shall cause to be entered in a  
8 separate book the name of each applicant to whom a license is issued to practice  
9 medicine or surgery, along with any information pertinent to such issuance. The North  
10 Carolina Medical Board of Examiners shall publish the names of those licensed in three  
11 daily newspapers published in the State of North Carolina, within 30 days after granting  
12 the same. A transcript of any such entry in the record books, or certificate that there is not  
13 entered therein the name and proficiency or date of granting such license of a person  
14 charged with the violation of the provisions of this Article, certified under the hand of the  
15 secretary and the seals of the Board of Medical Examiners of the State of North Carolina,  
16 shall be admitted as evidence in any court of this State when it is otherwise competent.

17 The Board may in a closed session receive evidence involving or concerning the  
18 treatment of a patient who has not expressly or impliedly consented to the public  
19 disclosure of such treatment as may be necessary for the protection of the rights of such  
20 patient or of the accused physician and the full presentation of relevant evidence. All  
21 records, papers and other documents containing information collected and compiled by  
22 the Board, or its members or employees as a result of investigations, inquiries or  
23 interviews conducted in connection with a licensing or disciplinary matter shall not be  
24 considered public records within the meaning of Chapter 132 of the General Statutes;  
25 provided, however, that any notice or statement of charges against any licensee, or any  
26 notice to any licensee of a hearing in any proceeding shall be a public record within the  
27 meaning of Chapter 132 of the General Statutes, notwithstanding that it may contain  
28 information collected and compiled as a result of any such investigation, inquiry or  
29 interview; and provided, further, that if any such record, paper or other document  
30 containing information theretofore collected and compiled by the Board, as hereinbefore  
31 provided, is received and admitted in evidence in any hearing before the Board, it shall  
32 thereupon be a public record within the meaning of Chapter 132 of the General Statutes.

33 In any proceeding before the Board, in any record of any hearing before the Board,  
34 and in the notice of the charges against any licensee (notwithstanding any provision  
35 herein to the contrary) the Board may withhold from public disclosure the identity of a  
36 patient who has not expressly or impliedly consented to the public disclosure of treatment  
37 by the accused physician."

38 Sec. 18. G.S. 90-18(13) reads as rewritten:

39 "(13) Any act, task or function performed by an assistant to a person  
40 licensed as a physician by the North Carolina Medical Board of  
41 Medical Examiners when

- 42 a. Such assistant is approved by and annually registered with the  
43 Board as one qualified by training or experience to function as an



1 assistant to a physician, except that no more than two assistants  
2 may be currently registered for any physician, and

3 b. Such act, task or function is performed at the direction or under  
4 the supervision of such physician, in accordance with rules and  
5 regulations promulgated by the Board, and

6 c. The services of the assistant are limited to assisting the physician  
7 in the particular field or fields for which the assistant has been  
8 trained, approved and registered;

9 Provided that this subdivision shall not limit or prevent any physician  
10 from delegating to a qualified person any acts, tasks or functions which  
11 are otherwise permitted by law or established by custom."

12 Sec. 19. G.S. 90-18(14) reads as rewritten:

13 "(14) The practice of nursing by a registered nurse engaged in the practice  
14 of nursing and the performance of acts otherwise constituting  
15 medical practice by a registered nurse when performed in  
16 accordance with rules and regulations developed by a joint  
17 subcommittee of the North Carolina Medical Board of Medical  
18 ~~Examiners~~ and the Board of Nursing and adopted by both boards."

19 Sec. 20. G.S. 90-18.1 reads as rewritten:

20 **"§ 90-18.1. Limitations on physician assistants.**

21 (a) Any person who is approved under the provisions of G.S. 90-18(13) to perform  
22 medical acts, tasks or functions as an assistant to a physician may use the title 'physician  
23 assistant.' Any other person who uses the title in any form or holds out to be a physician  
24 assistant or to be so approved, shall be deemed to be in violation of this Article.

25 (b) Physician assistants are authorized to write prescriptions for drugs under the  
26 following conditions:

27 (1) The North Carolina Medical Board of Medical Examiners has adopted  
28 regulations governing the approval of individual physician assistants to  
29 write prescriptions with such limitations as the Board may determine to  
30 be in the best interest of patient health and safety;

31 (2) The physician assistant has current approval from the Board;

32 (3) The North Carolina Medical Board of Medical Examiners has assigned an  
33 identification number to the physician assistant which is shown on the  
34 written prescription; and

35 (4) The supervising physician has provided to the physician assistant  
36 written instructions about indications and contraindications for  
37 prescribing drugs and a written policy for periodic review by the  
38 physician of the drugs prescribed.

39 (c) Physician assistants are authorized to compound and dispense drugs under the  
40 following conditions:

41 (1) The function is performed under the supervision of a licensed  
42 pharmacist; and

1 (2) Rules and regulations of the North Carolina Board of Pharmacy  
2 governing this function are complied with.

3 (d) Physician assistants are authorized to order medications, tests and treatments in  
4 hospitals, clinics, nursing homes and other health facilities under the following  
5 conditions:

6 (1) The North Carolina Medical Board of Medical Examiners ~~has~~ adopted  
7 regulations governing the approval of individual physician assistants to  
8 order medications, tests and treatments with such limitations as the  
9 Board may determine to be in the best interest of patient health and  
10 safety;

11 (2) The physician assistant has current approval from the Board;

12 (3) The supervising physician has provided to the physician assistant  
13 written instructions about ordering medications, tests and treatments,  
14 and when appropriate, specific oral or written instructions for an  
15 individual patient, with provision for review by the physician of the  
16 order within a reasonable time, as determined by the Board, after the  
17 medication, test or treatment is ordered; and

18 (4) The hospital or other health facility has adopted a written policy,  
19 approved by the medical staff after consultation with the nursing  
20 administration, about ordering medications, tests and treatments,  
21 including procedures for verification of the physician assistants' orders  
22 by nurses and other facility employees and such other procedures as are  
23 in the interest of patient health and safety.

24 (e) Any prescription written by a physician assistant or order given by a physician  
25 assistant for medications, tests or treatments shall be deemed to have been authorized by  
26 the physician approved by the Board as the supervisor of the physician assistant and such  
27 supervising physician shall be responsible for authorizing such prescription or order.

28 (f) Any registered nurse or licensed practical nurse who receives an order from a  
29 physician assistant for medications, tests or treatments is authorized to perform that order  
30 in the same manner as if it were received from a licensed physician."

31 Sec. 21. G.S. 90-18.2 reads as rewritten:

32 **"§ 90-18.2. Limitations on nurse practitioners.**

33 (a) Any nurse approved under the provisions of G.S. 90-18(14) to perform medical  
34 acts, tasks or functions may use the title 'nurse practitioner.' Any other person who uses  
35 the title in any form or holds out to be a nurse practitioner or to be so approved, shall be  
36 deemed to be in violation of this Article.

37 (b) Nurse practitioners are authorized to write prescriptions for drugs under the  
38 following conditions:

39 (1) The North Carolina Medical Board of Medical Examiners ~~and~~ Board of  
40 Nursing have adopted regulations developed by a joint subcommittee  
41 governing the approval of individual nurse practitioners to write  
42 prescriptions with such limitations as the boards may determine to be in  
43 the best interest of patient health and safety;

- 1           (2)    The nurse practitioner has current approval from the boards;
- 2           (3)    The North Carolina Medical Board of Medical Examiners has assigned an  
3           identification number to the nurse practitioner which is shown on the  
4           written prescription; and
- 5           (4)    The supervising physician has provided to the nurse practitioner written  
6           instructions about indications and contraindications for prescribing  
7           drugs and a written policy for periodic review by the physician of the  
8           drugs prescribed.
- 9       (c)    Nurse practitioners are authorized to compound and dispense drugs under the  
10       following conditions:
- 11           (1)    The function is performed under the supervision of a licensed  
12           pharmacist; and
- 13           (2)    Rules and regulations of the North Carolina Board of Pharmacy  
14           governing this function are complied with.
- 15       (d)    Nurse practitioners are authorized to order medications, tests and treatments in  
16       hospitals, clinics, nursing homes and other health facilities under the following  
17       conditions:
- 18           (1)    The North Carolina Medical Board of Medical Examiners and Board of  
19           Nursing have adopted regulations developed by a joint subcommittee  
20           governing the approval of individual nurse practitioners to order  
21           medications, tests and treatments with such limitations as the boards  
22           may determine to be in the best interest of patient health and safety;
- 23           (2)    The nurse practitioner has current approval from the boards;
- 24           (3)    The supervising physician has provided to the nurse practitioner written  
25           instructions about ordering medications, tests and treatments, and when  
26           appropriate, specific oral or written instructions for an individual  
27           patient, with provision for review by the physician of the order within a  
28           reasonable time, as determined by the Board, after the medication, test  
29           or treatment is ordered; and
- 30           (4)    The hospital or other health facility has adopted a written policy,  
31           approved by the medical staff after consultation with the nursing  
32           administration, about ordering medications, tests and treatments,  
33           including procedures for verification of the nurse practitioners' orders  
34           by nurses and other facility employees and such other procedures as are  
35           in the interest of patient health and safety.
- 36       (e)    Any prescription written by a nurse practitioner or order given by a nurse  
37       practitioner for medications, tests or treatments shall be deemed to have been authorized  
38       by the physician approved by the boards as the supervisor of the nurse practitioner and  
39       such supervising physician shall be responsible for authorizing such prescription or order.
- 40       (f)    Any registered nurse or licensed practical nurse who receives an order from a  
41       nurse practitioner for medications, tests or treatments is authorized to perform that order  
42       in the same manner as if it were received from a licensed physician."

43           Sec. 22. G.S. 90-21 reads as rewritten:

1 **"§ 90-21. Certain offenses prosecuted in superior court; duties of Attorney General.**

2 In case of the violation of the criminal provisions of G.S. 90-18, the Attorney General  
3 of the State of North Carolina, upon complaint of the ~~Board of Medical Examiners of the~~  
4 ~~State of North Carolina,~~ North Carolina Medical Board, shall investigate the charges  
5 preferred, and if in his judgment the law has been violated, he shall direct the district  
6 attorney of the district in which the offense was committed to institute a criminal action  
7 against the offending persons. A district attorney's fee of five dollars (\$5.00) shall be  
8 allowed and collected in accordance with the provisions of G.S. 6-12. The North Carolina  
9 Medical Board of Medical Examiners may also employ, at their own expense, special  
10 counsel to assist the Attorney General or the district attorney.

11 Exclusive original jurisdiction of all criminal actions instituted for the violations of  
12 G.S. 90-18 shall be in the superior court, the provisions of any special or local act to the  
13 contrary notwithstanding."

14 Sec. 23. G.S. 90-21.22(a) reads as rewritten:

15 "(a) The North Carolina Medical Board of Medical Examiners may, under rules  
16 adopted by the Board in compliance with Chapter 150B of the General Statutes, enter  
17 into agreements with the North Carolina Medical Society and its local medical society  
18 components, and with the North Carolina Academy of Physician Assistants for the  
19 purpose of conducting peer review activities. Peer review activities to be covered by  
20 such agreements shall include investigation, review, and evaluation of records, reports,  
21 complaints, litigation and other information about the practices and practice patterns of  
22 physicians licensed by the Board, and of physician assistants approved by the Board, and  
23 shall include programs for impaired physicians and impaired physician assistants.  
24 Agreements between the Academy and the Board shall be limited to programs for  
25 impaired physicians and physician assistants and shall not include any other peer review  
26 activities."

27 Sec. 24. G.S. 90-85.3(r) reads as rewritten:

28 "(r) 'Practice of pharmacy' means the responsibility for: interpreting and evaluating  
29 drug orders, including prescription orders; compounding, dispensing and labeling  
30 prescription drugs and devices; properly and safely storing drugs and devices;  
31 maintaining proper records; and controlling pharmacy goods and services. A pharmacist  
32 may advise and educate patients and health care providers concerning therapeutic values,  
33 content, uses and significant problems of drugs and devices; assess, record and report  
34 adverse drug and device reactions; take and record patient histories relating to drug and  
35 device therapy; monitor, record and report drug therapy and device usage; perform drug  
36 utilization reviews; and participate in drug and drug source selection and device and  
37 device source selection as provided in G.S. 90-85.27 through G.S. 90-85.31. A  
38 pharmacist who has received special training may be authorized and permitted to  
39 administer drugs pursuant to a specific prescription order in accordance with rules and  
40 regulations adopted by each of the Boards of Pharmacy, the Board of Nursing, and the  
41 ~~Board of Medical Examiners of the State of North Carolina.~~ North Carolina Medical Board.  
42 Such rules and regulations shall be designed to ensure the safety and health of the  
43 patients for whom such drugs are administered."

Sec. 25. G.S. 90-85.21(b) reads as rewritten:

"(b) Each physician who dispenses prescription drugs, for a fee or other charge, shall annually register with the Board on the form provided by the Board, and with the licensing board having jurisdiction over the physician. Such dispensing shall comply in all respects with the relevant laws and regulations that apply to pharmacists governing the distribution of drugs, including packaging, labeling, and record keeping. Authority and responsibility for disciplining physicians who fail to comply with the provisions of this subsection are vested in the licensing board having jurisdiction over the physician. The form provided by the Board under this subsection shall be as follows:

**APPLICATION FOR REGISTRATION  
WITH THE PHARMACY BOARD  
AS A DISPENSING PHYSICIAN**

- |  |                             |
|--|-----------------------------|
| 1.                                       | 2.                          |
| Name and Address of Dispensing Physician | Affix Dispensing Label Here |

3. Physician's North Carolina License Number \_\_\_\_\_

4. Are you currently practicing in a professional association registered with the North Carolina Board of Medical Examiners? Board? \_\_\_ Yes \_\_\_ No. If yes, enter the name and registration number of the professional corporation:

5. I certify that the information is correct and complete.

\_\_\_\_\_  
Signature Date".

Sec. 26. G.S. 90-101(h) reads as rewritten:

"(h) A physician licensed by the North Carolina Medical Board of ~~Medical Examiners~~ pursuant to Article 1 of this Chapter may possess, dispense or administer tetrahydrocannabinols in duly constituted pharmaceutical form for human administration for treatment purposes pursuant to rules adopted by the Commission."

Sec. 27. G.S. 90-101(i) reads as rewritten:

"(i) A physician licensed by the North Carolina Medical Board of ~~Medical Examiners~~ pursuant to Article 1 of this Chapter may dispense or administer Dronabinol or Nabilone as scheduled in G.S. 90-90(e) only as an antiemetic agent in cancer chemotherapy."

Sec. 28. G.S. 90-171.23(14) reads as rewritten:

1           "(14)     Appoint and maintain a subcommittee of the Board to work jointly  
2                     with the subcommittee of the North Carolina Medical Board of  
3                     ~~Medical Examiners~~ to develop rules and regulations to govern the  
4                     performance of medical acts by registered nurses and to determine  
5                     reasonable fees to accompany an application for approval or  
6                     renewal of such approval as provided in G.S. 90-6. The fees and  
7                     rules developed by this subcommittee shall govern the performance  
8                     of medical acts by registered nurses and shall become effective  
9                     when they have been adopted by both Boards;"

10           Sec. 29. G.S. 90-171.37 reads as rewritten:

11   **"§ 90-171.37. Revocation, suspension, or denial of licensure.**

12           The Board shall initiate an investigation upon receipt of information about any  
13           practice that might violate any provision of this Article or any rule or regulation  
14           promulgated by the Board. In accordance with the provisions of Chapter 150B of the  
15           General Statutes, the Board may require remedial education, issue a letter of reprimand,  
16           restrict, revoke, or suspend any license to practice nursing in North Carolina or deny any  
17           application for licensure if the Board determines that the nurse or applicant:

- 18           (1)     Has given false information or has withheld material information from  
19                     the Board in procuring or attempting to procure a license to practice  
20                     nursing;
- 21           (2)     Has been convicted of or pleaded guilty or nolo contendere to any crime  
22                     which indicates that the nurse is unfit or incompetent to practice nursing  
23                     or that the nurse has deceived or defrauded the public;
- 24           (3)     Has a mental or physical disability or uses any drug to a degree that  
25                     interferes with his or her fitness to practice nursing;
- 26           (4)     Engages in conduct that endangers the public health;
- 27           (5)     Is unfit or incompetent to practice nursing by reason of deliberate or  
28                     negligent acts or omissions regardless of whether actual injury to the  
29                     patient is established;
- 30           (6)     Engages in conduct that deceives, defrauds, or harms the public in the  
31                     course of professional activities or services;
- 32           (7)     Has violated any provision of this Article; or
- 33           (8)     Has willfully violated any rules enacted by the Board.

34           The Board may take any of the actions specified above in this section when a  
35           registered nurse approved to perform medical acts has violated rules governing the  
36           performance of medical acts by a registered nurse; provided this shall not interfere with  
37           the authority of the North Carolina Medical Board of ~~Medical Examiners~~ to enforce rules  
38           and regulations governing the performance of medical acts by a registered nurse.

39           The Board may reinstate a revoked license or remove licensure restrictions when it  
40           finds that the reasons for revocation or restriction no longer exist and that the nurse or  
41           applicant can reasonably be expected to safely and properly practice nursing."

42           Sec. 30. G.S. 90-178.2(3) reads as rewritten:

1           "(3) 'Midwifery' means the act of providing prenatal, intrapartum,  
2           postpartum, newborn and interconceptional care. The term does not  
3           include the practice of medicine by a physician licensed to practice  
4           medicine when engaged in the practice of medicine as defined by law,  
5           the performance of medical acts by a physician assistant or nurse  
6           practitioner when performed in accordance with the rules of the ~~Board of~~  
7           ~~Medical Examiners,~~ North Carolina Medical Board, the practice of  
8           nursing by a registered nurse engaged in the practice of nursing as  
9           defined by law, or the rendering of childbirth assistance in an  
10          emergency situation."

11          Sec. 31. G.S. 90-178.4(a) reads as rewritten:

12          "(a) The joint subcommittee of the North Carolina Medical Board ~~of Medical~~  
13          ~~Examiners~~ and the Board of Nursing created pursuant to G.S. 90-18.2 shall administer the  
14          provisions of this Article and the rules adopted pursuant to this Article; Provided,  
15          however, that actions of the joint subcommittee pursuant to this Article shall not require  
16          approval by the ~~Boards of Medical Examiners and North Carolina Medical Board~~ and the  
17          Board of Nursing. For purposes of this Article, the joint subcommittee shall be enlarged  
18          by four additional members, including two certified midwives and two obstetricians who  
19          have had working experience with midwives."

20          Sec. 32. G.S. 110-91(1) reads as rewritten:

21          "(1) Medical Care and Sanitation. – The Commission for Health Services  
22          shall adopt rules which establish minimum sanitation standards for child  
23          day care facilities and their personnel. The sanitation rules adopted by  
24          the Commission for Health Services shall cover such matters as the  
25          cleanliness of floors, walls, ceilings, storage spaces, utensils, and other  
26          facilities; adequacy of ventilation; sanitation of water supply, lavatory  
27          facilities, toilet facilities, sewage disposal, food protection facilities,  
28          bactericidal treatment of eating and drinking utensils, and solid-waste  
29          storage and disposal; methods of food preparation and serving;  
30          infectious disease control; sleeping facilities; and other items and  
31          facilities as are necessary in the interest of the public health. These  
32          rules shall be developed in consultation with the Department.

33                 The Commission shall adopt rules to establish minimum  
34                 requirements for child and staff health assessments and medical  
35                 care procedures. These rules shall be developed in consultation  
36                 with the Department of Environment, Health, and Natural  
37                 Resources. Each child shall have a health assessment before  
38                 being admitted or within 30 days following admission to a child  
39                 day care facility. The assessment shall be done by: (i) a licensed  
40                 physician, (ii) the physician's authorized agent who is currently  
41                 approved by the North Carolina ~~Board of Medical Examiners,~~  
42                 Medical Board, or comparable certifying board in any state  
43                 contiguous to North Carolina, (iii) a certified nurse practitioner,

1 or (iv) a public health nurse meeting the Department of  
2 Environment, Health, and Natural Resources' Standards for Early  
3 Periodic Screening, Diagnosis, and Treatment Program. A  
4 record of each child's assessment shall be on file in the records of  
5 the facility. However, no health assessment shall be required of  
6 any child who is and has been in normal health and whose parent,  
7 guardian, or full-time custodian objects in writing to a health  
8 assessment on religious grounds which conform to the teachings  
9 and practice of any recognized church or religious denomination.  
10 Each child shall be immunized in a manner that meets the  
11 requirements of Article 6 of Chapter 130A of the General  
12 Statutes and the pertinent rules adopted by the Commission for  
13 Health Services.

14 Each child day care facility shall have a plan of emergency  
15 medical care which shall include provisions for communication  
16 with and transportation to a specified medical resource, unless  
17 otherwise previously instructed. No child receiving day care  
18 shall be administered any drug or other medication without  
19 specific written instructions from a physician or the child's  
20 parent, guardian or full-time custodian. Emergency information  
21 on each child in care, including the names, addresses, and  
22 telephone numbers of the child's physician and parents, legal  
23 guardian or full-time custodian shall be readily available to the  
24 staff of the child day care facility while children are in care.

25 Nonprofit, tax-exempt organizations that provide prepared meals  
26 to day care centers only are considered day care centers for  
27 purposes of compliance with appropriate sanitation standards."

28 Sec. 33. G.S. 130A-403(8) reads as rewritten:

29 "(8) 'Qualified individual' means any of the following individuals who has  
30 completed a course in eye enucleation and has been certified as  
31 competent to enucleate eyes by an accredited school of medicine in this  
32 State:

- 33 a. An embalmer licensed to practice in this State;
- 34 b. A physician's assistant approved by the North Carolina Medical  
35 Board of Medical Examiners pursuant to G.S. 90-18(13);
- 36 c. A registered or a licensed practical nurse licensed by the Board  
37 of Nursing pursuant to Article 9A of Chapter 90 of the General  
38 Statutes;
- 39 d. A student who is enrolled in an accredited school of medicine  
40 operating within this State and who has completed two or more  
41 years of a course of study leading to the awarding of a degree of  
42 doctor of medicine;



1 e. A technician who has successfully completed a written  
2 examination by the North Carolina Eye and Human Tissue Bank,  
3 Inc., certified by the Eye Bank Association of America."

4 Sec. 34. G.S. 143-509(9) reads as rewritten:

5 "(9) Promote a means of training individuals to administer life-saving  
6 treatment to persons who suffer a severe adverse reaction to insect  
7 stings. Individuals, upon successful completion of this training program,  
8 may be approved by the North Carolina Medical Board ~~of Medical~~  
9 ~~Examiners~~ to administer epinephrine to these persons, in the absence of  
10 the availability of physicians or other practitioners who are authorized  
11 to administer the treatment. This training may also be offered as part of  
12 the emergency medical technician training program."

13 Sec. 35. G.S. 143-514 reads as rewritten:

14 **"§ 143-514. Training programs; utilization of emergency services personnel.**

15 The Department of Human Resources in cooperation with educational institutions  
16 shall develop training programs for emergency medical service personnel. Upon  
17 successful completion of such training programs and other programs approved by the  
18 ~~Board of Medical Examiners of the State of North Carolina,~~ North Carolina Medical Board,  
19 emergency medical services personnel may, in the course of their emergency medical  
20 services duties, perform such acts, tasks and functions as they have been trained to  
21 perform and as provided in rules and regulations of such Board, regardless of other  
22 provisions of law."

23 Sec. 36. G.S. 148-19(c) reads as rewritten:

24 "(c) Each prisoner committed to the State Department of Correction shall receive a  
25 physical and mental examination by a health care professional authorized by the North  
26 Carolina Medical Board ~~of Medical Examiners~~ to perform such examinations as soon as  
27 practicable after admission and before being assigned to work. The prisoner's work and  
28 other assignments shall be made with due regard for the prisoner's physical and mental  
29 condition."

30 Sec. 37. Unless otherwise provided, this act is effective upon ratification.