

AMENDMENT TO THE REGULATIONS OF THE COMMISSIONER OF EDUCATION

Pursuant to sections 207, 6504, 6507, 6527, 6902 and 6909 of the Education Law, Part V of Chapter 57 of the Laws of 2015 and Chapter 352 of the Laws of 2014

Section 64.7 of the Regulations of the Commissioner of Education is amended, effective October 7, 2015, as follows:

64.7 Administration of [I]immunizations, emergency treatment of anaphylaxis, purified protein derivative (PPD) mantoux tuberculin skin tests, [and] human immunodeficiency virus (HIV) tests, opioid related overdose treatments and hepatitis C tests pursuant to non-patient specific orders and protocols.

(a) . . .

(b) . . .

(c) . . .

(d) . . .

(e) Opioid related overdose treatment.

(1) As used in this subdivision, opioid related overdose treatment shall include the administration of naloxone or another drug approved by the federal Food and Drug Administration to treat opioid related overdose.

(2) A registered professional nurse may administer opioid related overdose treatment for the urgent or emergency treatment of opioid related overdose or suspected opioid related overdose pursuant to a written non-patient specific order and protocol prescribed or ordered by a licensed physician or a certified nurse practitioner, provided that the requirements of this subdivision are met.

(3) Order and protocol.

(i) The non-patient specific order shall include, at a minimum, the following:

(a) the name, license number and signature of the licensed physician or certified nurse practitioner who orders or prescribes the non-patient specific order and protocol;

(b) the name, dose and route of administration of the drug to be administered to treat opioid related overdose;

(c) a protocol for administering the ordered opioid related overdose treatment or a specific reference to a separate written protocol for administering the ordered opioid related overdose treatment, which shall meet the requirements of subparagraph (ii) of this paragraph;

(d) the period of time that the order is effective, including the beginning and ending dates;

(e) a description of the group(s) of persons to be treated; and

(f) the name and license number of the registered professional nurse(s) authorized to execute the non-patient specific order and protocol to administer the opioid related overdose treatment; or the name of the entity that employs or contracts with registered professional nurses to execute the non-patient specific order and protocol, provided that the registered professional nurses execute the non-patient specific order and protocol only in the course of such employment or pursuant to such contract and provided further that the entity is legally authorized to employ or contract with registered professional nurses to provide nursing services.

(ii) The written protocol, incorporated into the order prescribed in subparagraph (i) of this paragraph, shall, at a minimum, include instructions for administering the

opioid related overdose treatment and require the registered professional nurse to ensure that:

(a) each potential recipient is assessed, pursuant to criteria in the protocol, for conditions that would qualify or preclude him or her from receiving the ordered opioid related overdose treatment;

(b) consent to administer treatment is obtained, pursuant to criteria in the protocol, if the potential recipient is capable of providing it;

(c) the opioid related overdose treatment is documented, pursuant to criteria in the protocol, and includes the name and dose of drug administered, the date, time and location of the treatment, the recipient's name and the administering registered professional nurse's name and this medical documentation relating to opioid related overdose treatment is maintained in accordance with paragraph 29.2(a)(3) of this Title; and,

(d) when opioid related overdose treatment is administered outside of a general hospital, the recipient of the treatment is transferred to a hospital for follow-up care to the extent possible along with documentation describing the opioid related overdose treatment that was administered, in accordance with criteria in the protocol.

(f) Hepatitis C tests.

(1) As used in this subdivision, hepatitis C tests mean one or more laboratory or point of care tests approved by the federal Food and Drug Administration to detect the presence of antibodies or antigens to hepatitis C or the hepatitis C virus.

(2) A registered professional nurse may administer hepatitis C tests pursuant to a written non-patient specific order and protocol prescribed or ordered by a licensed

physician or a certified nurse practitioner, provided that the requirements of this subdivision are met.

(3) Order and protocol.

(i) The non-patient specific order shall include, at a minimum, the following:

(a) the name, license number and signature of the licensed physician or certified nurse practitioner who orders or prescribes the non-patient specific order and protocol;

(b) the name of the specific hepatitis C tests to be administered;

(c) a protocol for administering the ordered hepatitis C tests or a specific reference to a separate written protocol for administering the ordered hepatitis C tests, which shall meet the requirements of subparagraph (ii) of this paragraph;

(d) the period of time that the order is effective, including the beginning and ending dates;

(e) a description of the group(s) of persons to be tested; and

(f) the name and license number of the registered professional nurse(s) authorized to execute the non-patient specific order and protocol to administer the hepatitis C tests; or the name of the entity that employs or contracts with registered professional nurses to execute the non-patient specific order and protocol, provided that the registered professional nurses execute the non-patient specific order and protocol only in the course of such employment or pursuant to such contract and provided further that the entity is legally authorized to employ or contract with registered professional nurses to provide nursing services.

(ii) The written protocol, incorporated into the order prescribed in subparagraph (i) of this paragraph, shall, at a minimum, require the registered professional nurse(s) to ensure that:

(a) each potential recipient is assessed, pursuant to criteria in the protocol, for conditions that would qualify or preclude him or her from receiving the ordered hepatitis C tests;

(b) informed consent for administering the ordered hepatitis C tests or disclosing the hepatitis C test results to a third party (if applicable) has been obtained pursuant to the criteria in the protocol from the recipient, or when the recipient lacks capacity to consent, a person authorized pursuant to law to consent to health care for the recipient;

(c) confirmatory, positive hepatitis C test results are not disclosed to the test recipient or the recipient's authorized representative by the registered professional nurse without a patient specific order from a licensed physician, licensed physician assistant or certified nurse practitioner; and

(d) the administration of the ordered hepatitis C test(s) is documented in the recipient's medical record in accordance with criteria in the protocol and that documentation relating to the hepatitis C testing is maintained in accordance with section 29.2(a)(3) of this Title.