

1 VIRGINIA ACTS OF ASSEMBLY — CHAPTER

2 *An Act to amend and reenact §§ 8.01-225 and 54.1-3408 of the Code of Virginia, relating to*  
3 *prescription, distribution, and administration of naloxone or other opioid antagonist.*

4 [H 1458]  
5 Approved

6 **Be it enacted by the General Assembly of Virginia:**

7 **1. That §§ 8.01-225 and 54.1-3408 of the Code of Virginia are amended and reenacted as follows:**  
8 **§ 8.01-225. Persons rendering emergency care, obstetrical services exempt from liability.**

9 A. Any person who:

10 1. In good faith, renders emergency care or assistance, without compensation, to any ill or injured  
11 person (i) at the scene of an accident, fire, or any life-threatening emergency; (ii) at a location for  
12 screening or stabilization of an emergency medical condition arising from an accident, fire, or any  
13 life-threatening emergency; or (iii) en route to any hospital, medical clinic, or doctor's office, shall not  
14 be liable for any civil damages for acts or omissions resulting from the rendering of such care or  
15 assistance.

16 2. In the absence of gross negligence, renders emergency obstetrical care or assistance to a female in  
17 active labor who has not previously been cared for in connection with the pregnancy by such person or  
18 by another professionally associated with such person and whose medical records are not reasonably  
19 available to such person shall not be liable for any civil damages for acts or omissions resulting from  
20 the rendering of such emergency care or assistance. The immunity herein granted shall apply only to the  
21 emergency medical care provided.

22 3. In good faith and without compensation, including any emergency medical services technician  
23 certified by the Board of Health, administers epinephrine in an emergency to an individual shall not be  
24 liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of  
25 such treatment if such person has reason to believe that the individual receiving the injection is suffering  
26 or is about to suffer a life-threatening anaphylactic reaction.

27 4. Provides assistance upon request of any police agency, fire department, rescue or emergency  
28 squad, or governmental agency in the event of an accident or other emergency involving the use,  
29 handling, transportation, transmission, or storage of liquefied petroleum gas, liquefied natural gas,  
30 hazardous material, or hazardous waste as defined in § 10.1-1400 or regulations of the Virginia Waste  
31 Management Board shall not be liable for any civil damages resulting from any act of commission or  
32 omission on his part in the course of his rendering such assistance in good faith.

33 5. Is an emergency medical care attendant or technician possessing a valid certificate issued by  
34 authority of the State Board of Health who in good faith renders emergency care or assistance, whether  
35 in person or by telephone or other means of communication, without compensation, to any injured or ill  
36 person, whether at the scene of an accident, fire, or any other place, or while transporting such injured  
37 or ill person to, from, or between any hospital, medical facility, medical clinic, doctor's office, or other  
38 similar or related medical facility, shall not be liable for any civil damages for acts or omissions  
39 resulting from the rendering of such emergency care, treatment, or assistance, including but in no way  
40 limited to acts or omissions which involve violations of State Department of Health regulations or any  
41 other state regulations in the rendering of such emergency care or assistance.

42 6. In good faith and without compensation, renders or administers emergency cardiopulmonary  
43 resuscitation (CPR); cardiac defibrillation, including, but not limited to, the use of an automated external  
44 defibrillator (AED); or other emergency life-sustaining or resuscitative treatments or procedures which  
45 have been approved by the State Board of Health to any sick or injured person, whether at the scene of  
46 a fire, an accident, or any other place, or while transporting such person to or from any hospital, clinic,  
47 doctor's office, or other medical facility, shall be deemed qualified to administer such emergency  
48 treatments and procedures and shall not be liable for acts or omissions resulting from the rendering of  
49 such emergency resuscitative treatments or procedures.

50 7. Operates an AED at the scene of an emergency, trains individuals to be operators of AEDs, or  
51 orders AEDs, shall be immune from civil liability for any personal injury that results from any act or  
52 omission in the use of an AED in an emergency where the person performing the defibrillation acts as  
53 an ordinary, reasonably prudent person would have acted under the same or similar circumstances,  
54 unless such personal injury results from gross negligence or willful or wanton misconduct of the person  
55 rendering such emergency care.

56 8. Maintains an AED located on real property owned or controlled by such person shall be immune

57 from civil liability for any personal injury that results from any act or omission in the use in an  
58 emergency of an AED located on such property unless such personal injury results from gross  
59 negligence or willful or wanton misconduct of the person who maintains the AED or his agent or  
60 employee.

61 9. Is an employee of a school board or of a local health department approved by the local governing  
62 body to provide health services pursuant to § 22.1-274 who, while on school property or at a  
63 school-sponsored event, (i) renders emergency care or assistance to any sick or injured person; (ii)  
64 renders or administers emergency cardiopulmonary resuscitation (CPR); cardiac defibrillation, including,  
65 but not limited to, the use of an automated external defibrillator (AED); or other emergency  
66 life-sustaining or resuscitative treatments or procedures that have been approved by the State Board of  
67 Health to any sick or injured person; (iii) operates an AED, trains individuals to be operators of AEDs,  
68 or orders AEDs; or (iv) maintains an AED, shall not be liable for civil damages for ordinary negligence  
69 in acts or omissions on the part of such employee while engaged in the acts described in this  
70 subdivision.

71 10. Is a volunteer in good standing and certified to render emergency care by the National Ski Patrol  
72 System, Inc., who, in good faith and without compensation, renders emergency care or assistance to any  
73 injured or ill person, whether at the scene of a ski resort rescue, outdoor emergency rescue, or any other  
74 place or while transporting such injured or ill person to a place accessible for transfer to any available  
75 emergency medical system unit, or any resort owner voluntarily providing a ski patroller employed by  
76 him to engage in rescue or recovery work at a resort not owned or operated by him, shall not be liable  
77 for any civil damages for acts or omissions resulting from the rendering of such emergency care,  
78 treatment, or assistance, including but not limited to acts or omissions which involve violations of any  
79 state regulation or any standard of the National Ski Patrol System, Inc., in the rendering of such  
80 emergency care or assistance, unless such act or omission was the result of gross negligence or willful  
81 misconduct.

82 11. Is an employee of a school board, authorized by a prescriber and trained in the administration of  
83 insulin and glucagon, who, upon the written request of the parents as defined in § 22.1-1, assists with  
84 the administration of insulin or administers glucagon to a student diagnosed as having diabetes who  
85 requires insulin injections during the school day or for whom glucagon has been prescribed for the  
86 emergency treatment of hypoglycemia shall not be liable for any civil damages for ordinary negligence  
87 in acts or omissions resulting from the rendering of such treatment if the insulin is administered  
88 according to the child's medication schedule or such employee has reason to believe that the individual  
89 receiving the glucagon is suffering or is about to suffer life-threatening hypoglycemia. Whenever any  
90 employee of a school board is covered by the immunity granted herein, the school board employing him  
91 shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the  
92 rendering of such insulin or glucagon treatment.

93 12. Is a school nurse, an employee of a school board, an employee of a local governing body, or an  
94 employee of a local health department who is authorized by a prescriber and trained in the  
95 administration of epinephrine and who provides, administers, or assists in the administration of  
96 epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber  
97 of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions  
98 resulting from the rendering of such treatment.

99 13. Is an employee of a provider licensed by the Department of Behavioral Health and  
100 Developmental Services, or provides services pursuant to a contract with a provider licensed by the  
101 Department of Behavioral Health and Developmental Services, who has been trained in the  
102 administration of insulin and glucagon and who administers or assists with the administration of insulin  
103 or administers glucagon to a person diagnosed as having diabetes who requires insulin injections or for  
104 whom glucagon has been prescribed for the emergency treatment of hypoglycemia in accordance with  
105 § 54.1-3408 shall not be liable for any civil damages for ordinary negligence in acts or omissions  
106 resulting from the rendering of such treatment if the insulin is administered in accordance with the  
107 prescriber's instructions or such person has reason to believe that the individual receiving the glucagon is  
108 suffering or is about to suffer life-threatening hypoglycemia. Whenever any employee of a provider  
109 licensed by the Department of Behavioral Health and Developmental Services or a person who provides  
110 services pursuant to a contract with a provider licensed by the Department of Behavioral Health and  
111 Developmental Services is covered by the immunity granted herein, the provider shall not be liable for  
112 any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such  
113 insulin or glucagon treatment.

114 14. Is an employee of a provider licensed by the Department of Behavioral Health and  
115 Developmental Services, or provides services pursuant to a contract with a provider licensed by the  
116 Department of Behavioral Health and Developmental Services, who has been trained in the  
117 administration of epinephrine and who administers or assists in the administration of epinephrine to a

118 person believed in good faith to be having an anaphylactic reaction in accordance with the prescriber's  
119 instructions shall not be liable for any civil damages for ordinary negligence in acts or omissions  
120 resulting from the rendering of such treatment.

121 15. In good faith and without compensation, prescribes, dispenses, or administers naloxone or other  
122 opioid antagonist used for overdose reversal in an emergency to an individual who is believed to be  
123 experiencing or is about to experience a life-threatening opiate overdose shall not be liable for any civil  
124 damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment if  
125 such administering person is a participant in a pilot program conducted by the Department of Behavioral  
126 Health and Developmental Services on the administration of naloxone for the purpose of counteracting  
127 the effects of opiate overdose acting in accordance with the provisions of subsection X of § 54.1-3408  
128 or in his role as a member of an emergency medical services agency.

129 B. Any licensed physician serving without compensation as the operational medical director for a  
130 licensed emergency medical services agency in the Commonwealth shall not be liable for any civil  
131 damages for any act or omission resulting from the rendering of emergency medical services in good  
132 faith by the personnel of such licensed agency unless such act or omission was the result of such  
133 physician's gross negligence or willful misconduct.

134 Any person serving without compensation as a dispatcher for any licensed public or nonprofit  
135 emergency services agency in the Commonwealth shall not be liable for any civil damages for any act  
136 or omission resulting from the rendering of emergency services in good faith by the personnel of such  
137 licensed agency unless such act or omission was the result of such dispatcher's gross negligence or  
138 willful misconduct.

139 Any individual, certified by the State Office of Emergency Medical Services as an emergency  
140 medical services instructor and pursuant to a written agreement with such office, who, in good faith and  
141 in the performance of his duties, provides instruction to persons for certification or recertification as a  
142 certified basic life support or advanced life support emergency medical services technician shall not be  
143 liable for any civil damages for acts or omissions on his part directly relating to his activities on behalf  
144 of such office unless such act or omission was the result of such emergency medical services instructor's  
145 gross negligence or willful misconduct.

146 Any licensed physician serving without compensation as a medical advisor to an E-911 system in the  
147 Commonwealth shall not be liable for any civil damages for any act or omission resulting from  
148 rendering medical advice in good faith to establish protocols to be used by the personnel of the E-911  
149 service, as defined in § 58.1-1730, when answering emergency calls unless such act or omission was the  
150 result of such physician's gross negligence or willful misconduct.

151 Any licensed physician who directs the provision of emergency medical services, as authorized by  
152 the State Board of Health, through a communications device shall not be liable for any civil damages  
153 for any act or omission resulting from the rendering of such emergency medical services unless such act  
154 or omission was the result of such physician's gross negligence or willful misconduct.

155 Any licensed physician serving without compensation as a supervisor of an AED in the  
156 Commonwealth shall not be liable for any civil damages for any act or omission resulting from  
157 rendering medical advice in good faith to the owner of the AED relating to personnel training, local  
158 emergency medical services coordination, protocol approval, AED deployment strategies, and equipment  
159 maintenance plans and records unless such act or omission was the result of such physician's gross  
160 negligence or willful misconduct.

161 C. Any communications services provider, as defined in § 58.1-647, including mobile service, and  
162 any provider of Voice-over-Internet Protocol service, in the Commonwealth shall not be liable for any  
163 civil damages for any act or omission resulting from rendering such service with or without charge  
164 related to emergency calls unless such act or omission was the result of such service provider's gross  
165 negligence or willful misconduct.

166 Any volunteer engaging in rescue or recovery work at a mine, or any mine operator voluntarily  
167 providing personnel to engage in rescue or recovery work at a mine not owned or operated by such  
168 operator, shall not be liable for civil damages for acts or omissions resulting from the rendering of such  
169 rescue or recovery work in good faith unless such act or omission was the result of gross negligence or  
170 willful misconduct. For purposes of this subsection, the term "Voice-over-Internet Protocol service" or  
171 "VoIP service" means any Internet protocol-enabled services utilizing a broadband connection, actually  
172 originating or terminating in Internet Protocol from either or both ends of a channel of communication  
173 offering real time, multidirectional voice functionality, including, but not limited to, services similar to  
174 traditional telephone service.

175 D. Nothing contained in this section shall be construed to provide immunity from liability arising out  
176 of the operation of a motor vehicle.

177 E. ~~Expired.~~

178 F. For the purposes of this section, the term "compensation" shall not be construed to include (i) the

179 salaries of police, fire, or other public officials or personnel who render such emergency assistance, (ii)  
180 the salaries or wages of employees of a coal producer engaging in emergency medical technician service  
181 or first aid service pursuant to the provisions of § 45.1-161.38, 45.1-161.101, 45.1-161.199, or  
182 45.1-161.263, (iii) complimentary lift tickets, food, lodging, or other gifts provided as a gratuity to  
183 volunteer members of the National Ski Patrol System, Inc., by any resort, group, or agency, (iv) the  
184 salary of any person who (a) owns an AED for the use at the scene of an emergency, (b) trains  
185 individuals, in courses approved by the Board of Health, to operate AEDs at the scene of emergencies,  
186 (c) orders AEDs for use at the scene of emergencies, or (d) operates an AED at the scene of an  
187 emergency, or (v) expenses reimbursed to any person providing care or assistance pursuant to this  
188 section.

189 For the purposes of this section, an emergency medical care attendant or technician shall be deemed  
190 to include a person licensed or certified as such or its equivalent by any other state when he is  
191 performing services which he is licensed or certified to perform by such other state in caring for a  
192 patient in transit in the Commonwealth, which care originated in such other state.

193 Further, the public shall be urged to receive training on how to use CPR and an AED in order to  
194 acquire the skills and confidence to respond to emergencies using both CPR and an AED.

195 **§ 54.1-3408. Professional use by practitioners.**

196 A. A practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine or a licensed  
197 nurse practitioner pursuant to § 54.1-2957.01, a licensed physician assistant pursuant to § 54.1-2952.1, or  
198 a TPA-certified optometrist pursuant to Article 5 (§ 54.1-3222 et seq.) of Chapter 32 shall only  
199 prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic  
200 purposes within the course of his professional practice.

201 B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral  
202 prescription as authorized by this chapter. The prescriber may administer drugs and devices, or he may  
203 cause drugs or devices to be administered by:

204 1. A nurse, physician assistant, or intern under his direction and supervision;

205 2. Persons trained to administer drugs and devices to patients in state-owned or state-operated  
206 hospitals or facilities licensed as hospitals by the Board of Health or psychiatric hospitals licensed by  
207 the Department of Behavioral Health and Developmental Services who administer drugs under the  
208 control and supervision of the prescriber or a pharmacist;

209 3. Emergency medical services personnel certified and authorized to administer drugs and devices  
210 pursuant to regulations of the Board of Health who act within the scope of such certification and  
211 pursuant to an oral or written order or standing protocol; or

212 4. A licensed respiratory care practitioner as defined in § 54.1-2954 who administers by inhalation  
213 controlled substances used in inhalation or respiratory therapy.

214 C. Pursuant to an oral or written order or standing protocol, the prescriber, who is authorized by  
215 state or federal law to possess and administer radiopharmaceuticals in the scope of his practice, may  
216 authorize a nuclear medicine technologist to administer, under his supervision, radiopharmaceuticals used  
217 in the diagnosis or treatment of disease.

218 D. Pursuant to an oral or written order or standing protocol issued by the prescriber within the  
219 course of his professional practice, such prescriber may authorize registered nurses and licensed practical  
220 nurses to possess (i) epinephrine and oxygen for administration in treatment of emergency medical  
221 conditions and (ii) heparin and sterile normal saline to use for the maintenance of intravenous access  
222 lines.

223 Pursuant to the regulations of the Board of Health, certain emergency medical services technicians  
224 may possess and administer epinephrine in emergency cases of anaphylactic shock.

225 Pursuant to an order or standing protocol issued by the prescriber within the course of his  
226 professional practice, any school nurse, school board employee, employee of a local governing body, or  
227 employee of a local health department who is authorized by a prescriber and trained in the  
228 administration of epinephrine may possess and administer epinephrine.

229 Pursuant to an order issued by the prescriber within the course of his professional practice, an  
230 employee of a provider licensed by the Department of Behavioral Health and Developmental Services or  
231 a person providing services pursuant to a contract with a provider licensed by the Department of  
232 Behavioral Health and Developmental Services may possess and administer epinephrine, provided such  
233 person is authorized and trained in the administration of epinephrine.

234 E. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course  
235 of his professional practice, such prescriber may authorize licensed physical therapists to possess and  
236 administer topical corticosteroids, topical lidocaine, and any other Schedule VI topical drug.

237 F. Pursuant to an oral or written order or standing protocol issued by the prescriber within the course  
238 of his professional practice, such prescriber may authorize licensed athletic trainers to possess and  
239 administer topical corticosteroids, topical lidocaine, or other Schedule VI topical drugs; oxygen for use

240 in emergency situations; and epinephrine for use in emergency cases of anaphylactic shock.

241 G. Pursuant to an oral or written order or standing protocol issued by the prescriber within the  
 242 course of his professional practice, and in accordance with policies and guidelines established by the  
 243 Department of Health pursuant to § 32.1-50.2, such prescriber may authorize registered nurses or  
 244 licensed practical nurses under the immediate and direct supervision of a registered nurse to possess and  
 245 administer tuberculin purified protein derivative (PPD) in the absence of a prescriber. The Department of  
 246 Health's policies and guidelines shall be consistent with applicable guidelines developed by the Centers  
 247 for Disease Control and Prevention for preventing transmission of mycobacterium tuberculosis and shall  
 248 be updated to incorporate any subsequently implemented standards of the Occupational Safety and  
 249 Health Administration and the Department of Labor and Industry to the extent that they are inconsistent  
 250 with the Department of Health's policies and guidelines. Such standing protocols shall explicitly describe  
 251 the categories of persons to whom the tuberculin test is to be administered and shall provide for  
 252 appropriate medical evaluation of those in whom the test is positive. The prescriber shall ensure that the  
 253 nurse implementing such standing protocols has received adequate training in the practice and principles  
 254 underlying tuberculin screening.

255 The Health Commissioner or his designee may authorize registered nurses, acting as agents of the  
 256 Department of Health, to possess and administer, at the nurse's discretion, tuberculin purified protein  
 257 derivative (PPD) to those persons in whom tuberculin skin testing is indicated based on protocols and  
 258 policies established by the Department of Health.

259 H. Pursuant to a written order or standing protocol issued by the prescriber within the course of his  
 260 professional practice, such prescriber may authorize, with the consent of the parents as defined in  
 261 § 22.1-1, an employee of a school board who is trained in the administration of insulin and glucagon to  
 262 assist with the administration of insulin or administer glucagon to a student diagnosed as having diabetes  
 263 and who requires insulin injections during the school day or for whom glucagon has been prescribed for  
 264 the emergency treatment of hypoglycemia. Such authorization shall only be effective when a licensed  
 265 nurse, nurse practitioner, physician, or physician assistant is not present to perform the administration of  
 266 the medication.

267 Pursuant to a written order issued by the prescriber within the course of his professional practice,  
 268 such prescriber may authorize an employee of a provider licensed by the Department of Behavioral  
 269 Health and Developmental Services or a person providing services pursuant to a contract with a provider  
 270 licensed by the Department of Behavioral Health and Developmental Services to assist with the  
 271 administration of insulin or to administer glucagon to a person diagnosed as having diabetes and who  
 272 requires insulin injections or for whom glucagon has been prescribed for the emergency treatment of  
 273 hypoglycemia, provided such employee or person providing services has been trained in the  
 274 administration of insulin and glucagon.

275 I. A prescriber may authorize, pursuant to a protocol approved by the Board of Nursing, the  
 276 administration of vaccines to adults for immunization, when a practitioner with prescriptive authority is  
 277 not physically present, by (i) licensed pharmacists, (ii) registered nurses, or (iii) licensed practical nurses  
 278 under the immediate and direct supervision of a registered nurse. A prescriber acting on behalf of and in  
 279 accordance with established protocols of the Department of Health may authorize the administration of  
 280 vaccines to any person by a pharmacist, nurse, certified emergency medical technician-intermediate, or  
 281 emergency medical technician-paramedic under the direction of an operational medical director when the  
 282 prescriber is not physically present. Emergency medical services personnel shall provide documentation  
 283 of the vaccines to be recorded in the Virginia Immunization Information System.

284 J. A dentist may cause Schedule VI topical drugs to be administered under his direction and  
 285 supervision by either a dental hygienist or by an authorized agent of the dentist.

286 Further, pursuant to a written order and in accordance with a standing protocol issued by the dentist  
 287 in the course of his professional practice, a dentist may authorize a dental hygienist under his general  
 288 supervision, as defined in § 54.1-2722, to possess and administer topical oral fluorides, topical oral  
 289 anesthetics, topical and directly applied antimicrobial agents for treatment of periodontal pocket lesions,  
 290 as well as any other Schedule VI topical drug approved by the Board of Dentistry.

291 In addition, a dentist may authorize a dental hygienist under his direction to administer Schedule VI  
 292 nitrous oxide and oxygen inhalation analgesia and, to persons 18 years of age or older, Schedule VI  
 293 local anesthesia.

294 K. Pursuant to an oral or written order or standing protocol issued by the prescriber within the  
 295 course of his professional practice, such prescriber may authorize registered professional nurses certified  
 296 as sexual assault nurse examiners-A (SANE-A) under his supervision and when he is not physically  
 297 present to possess and administer preventive medications for victims of sexual assault as recommended  
 298 by the Centers for Disease Control and Prevention.

299 L. This section shall not prevent the administration of drugs by a person who has satisfactorily  
 300 completed a training program for this purpose approved by the Board of Nursing and who administers

301 such drugs in accordance with a prescriber's instructions pertaining to dosage, frequency, and manner of  
302 administration, and in accordance with regulations promulgated by the Board of Pharmacy relating to  
303 security and record keeping, when the drugs administered would be normally self-administered by (i) an  
304 individual receiving services in a program licensed by the Department of Behavioral Health and  
305 Developmental Services; (ii) a resident of the Virginia Rehabilitation Center for the Blind and Vision  
306 Impaired; (iii) a resident of a facility approved by the Board or Department of Juvenile Justice for the  
307 placement of children in need of services or delinquent or alleged delinquent youth; (iv) a program  
308 participant of an adult day-care center licensed by the Department of Social Services; (v) a resident of  
309 any facility authorized or operated by a state or local government whose primary purpose is not to  
310 provide health care services; (vi) a resident of a private children's residential facility, as defined in  
311 § 63.2-100 and licensed by the Department of Social Services, Department of Education, or Department  
312 of Behavioral Health and Developmental Services; or (vii) a student in a school for students with  
313 disabilities, as defined in § 22.1-319 and licensed by the Board of Education.

314 In addition, this section shall not prevent a person who has successfully completed a training  
315 program for the administration of drugs via percutaneous gastrostomy tube approved by the Board of  
316 Nursing and been evaluated by a registered nurse as having demonstrated competency in administration  
317 of drugs via percutaneous gastrostomy tube from administering drugs to a person receiving services from  
318 a program licensed by the Department of Behavioral Health and Developmental Services to such person  
319 via percutaneous gastrostomy tube. The continued competency of a person to administer drugs via  
320 percutaneous gastrostomy tube shall be evaluated semiannually by a registered nurse.

321 M. Medication aides registered by the Board of Nursing pursuant to Article 7 (§ 54.1-3041 et seq.)  
322 of Chapter 30 may administer drugs that would otherwise be self-administered to residents of any  
323 assisted living facility licensed by the Department of Social Services. A registered medication aide shall  
324 administer drugs pursuant to this section in accordance with the prescriber's instructions pertaining to  
325 dosage, frequency, and manner of administration; in accordance with regulations promulgated by the  
326 Board of Pharmacy relating to security and recordkeeping; in accordance with the assisted living  
327 facility's Medication Management Plan; and in accordance with such other regulations governing their  
328 practice promulgated by the Board of Nursing.

329 N. In addition, this section shall not prevent the administration of drugs by a person who administers  
330 such drugs in accordance with a physician's instructions pertaining to dosage, frequency, and manner of  
331 administration and with written authorization of a parent, and in accordance with school board  
332 regulations relating to training, security and record keeping, when the drugs administered would be  
333 normally self-administered by a student of a Virginia public school. Training for such persons shall be  
334 accomplished through a program approved by the local school boards, in consultation with the local  
335 departments of health.

336 O. In addition, this section shall not prevent the administration of drugs by a person to (i) a child in  
337 a child day program as defined in § 63.2-100 and regulated by the State Board of Social Services or a  
338 local government pursuant to § 15.2-914, or (ii) a student at a private school that complies with the  
339 accreditation requirements set forth in § 22.1-19 and is accredited by the Virginia Council for Private  
340 Education, provided such person (a) has satisfactorily completed a training program for this purpose  
341 approved by the Board of Nursing and taught by a registered nurse, licensed practical nurse, doctor of  
342 medicine or osteopathic medicine, or pharmacist; (b) has obtained written authorization from a parent or  
343 guardian; (c) administers drugs only to the child identified on the prescription label in accordance with  
344 the prescriber's instructions pertaining to dosage, frequency, and manner of administration; and (d)  
345 administers only those drugs that were dispensed from a pharmacy and maintained in the original,  
346 labeled container that would normally be self-administered by the child or student, or administered by a  
347 parent or guardian to the child or student.

348 P. In addition, this section shall not prevent the administration or dispensing of drugs and devices by  
349 persons if they are authorized by the State Health Commissioner in accordance with protocols  
350 established by the State Health Commissioner pursuant to § 32.1-42.1 when (i) the Governor has  
351 declared a disaster or a state of emergency or the United States Secretary of Health and Human Services  
352 has issued a declaration of an actual or potential bioterrorism incident or other actual or potential public  
353 health emergency; (ii) it is necessary to permit the provision of needed drugs or devices; and (iii) such  
354 persons have received the training necessary to safely administer or dispense the needed drugs or  
355 devices. Such persons shall administer or dispense all drugs or devices under the direction, control, and  
356 supervision of the State Health Commissioner.

357 Q. Nothing in this title shall prohibit the administration of normally self-administered drugs by  
358 unlicensed individuals to a person in his private residence.

359 R. This section shall not interfere with any prescriber issuing prescriptions in compliance with his  
360 authority and scope of practice and the provisions of this section to a Board agent for use pursuant to  
361 subsection G of § 18.2-258.1. Such prescriptions issued by such prescriber shall be deemed to be valid

362 prescriptions.

363 S. Nothing in this title shall prevent or interfere with dialysis care technicians or dialysis patient care  
 364 technicians who are certified by an organization approved by the Board of Health Professions or persons  
 365 authorized for provisional practice pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.), in the ordinary  
 366 course of their duties in a Medicare-certified renal dialysis facility, from administering heparin, topical  
 367 needle site anesthetics, dialysis solutions, sterile normal saline solution, and blood volumizers, for the  
 368 purpose of facilitating renal dialysis treatment, when such administration of medications occurs under the  
 369 orders of a licensed physician, nurse practitioner, or physician assistant and under the immediate and  
 370 direct supervision of a licensed registered nurse. Nothing in this chapter shall be construed to prohibit a  
 371 patient care dialysis technician trainee from performing dialysis care as part of and within the scope of  
 372 the clinical skills instruction segment of a supervised dialysis technician training program, provided such  
 373 trainee is identified as a "trainee" while working in a renal dialysis facility.

374 The dialysis care technician or dialysis patient care technician administering the medications shall  
 375 have demonstrated competency as evidenced by holding current valid certification from an organization  
 376 approved by the Board of Health Professions pursuant to Chapter 27.01 (§ 54.1-2729.1 et seq.).

377 T. Persons who are otherwise authorized to administer controlled substances in hospitals shall be  
 378 authorized to administer influenza or pneumococcal vaccines pursuant to § 32.1-126.4.

379 U. Pursuant to a specific order for a patient and under his direct and immediate supervision, a  
 380 prescriber may authorize the administration of controlled substances by personnel who have been  
 381 properly trained to assist a doctor of medicine or osteopathic medicine, provided the method does not  
 382 include intravenous, intrathecal, or epidural administration and the prescriber remains responsible for  
 383 such administration.

384 V. A physician assistant, nurse or a dental hygienist may possess and administer topical fluoride  
 385 varnish to the teeth of children aged six months to three years pursuant to an oral or written order or a  
 386 standing protocol issued by a doctor of medicine, osteopathic medicine, or dentistry that conforms to  
 387 standards adopted by the Department of Health.

388 W. A prescriber, acting in accordance with guidelines developed pursuant to § 32.1-46.02, may  
 389 authorize the administration of influenza vaccine to minors by a licensed pharmacist, registered nurse,  
 390 licensed practical nurse under the direction and immediate supervision of a registered nurse, certified  
 391 emergency medical technician-intermediate, or emergency medical technician-paramedic when the  
 392 prescriber is not physically present.

393 X. Notwithstanding the provisions of § 54.1-3303 and only for the purpose of participation in pilot  
 394 programs conducted by the Department of Behavioral Health and Developmental Services, a person may  
 395 obtain a prescription for a family member or a friend and may possess and administer naloxone for the  
 396 purpose of counteracting the effects of opiate overdose, pursuant to an oral, written or standing order,  
 397 and in accordance with protocols developed by the Board of Pharmacy in consultation with the Board  
 398 of Medicine and the Department of Health, a pharmacist may dispense naloxone or other opioid  
 399 antagonist used for overdose reversal and a person may possess and administer naloxone or other  
 400 opioid antagonist used for overdose reversal to a person who is believed to be experiencing or about to  
 401 experience a life-threatening opiate overdose. Law enforcement officers as defined in § 9.1-101 and  
 402 firefighters who have completed a training program may also possess and administer naloxone.