

GENERAL ASSEMBLY OF NORTH CAROLINA  
1995 SESSION

CHAPTER 94  
SENATE BILL 1017

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

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

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

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

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

Sec. 2. Effective until October 1, 1998, G.S. 58-50-25 reads as rewritten:

**"§ 58-50-25. Nurses' services.**

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

Sec. 3. Effective October 1, 1998, G.S. 58-50-25 reads as rewritten:

**"§ 58-50-25. Nurses' services.**

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

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

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

**"§ 58-65-35. Nurses' services.**

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

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

**"§ 58-65-35. Nurses' services.**

No agency, institution or physician providing a service for which payment or reimbursement is required to be made under a contract governed by this Article and Article 66 of this Chapter shall be denied such payment or reimbursement on account of the fact that the service was rendered through a registered nurse acting under authority

of rules and regulations adopted by the North Carolina Medical Board of Medical Examiners and the Board of Nursing pursuant to G.S. 90-6 and 90-171.23.

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

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

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

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

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

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

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

**"§ 90-5. Meetings of Board.**

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

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

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

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

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

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

**"§ 90-7. Bond of secretary.**

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

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

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

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

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

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

- (1) a graduate of a medical college approved by the Liaison Commission on Medical Education or an osteopathic college approved by the American Osteopathic Association and has successfully completed one year of training in a medical education program approved by the Board after graduation from medical school;
- (2) a graduate of a medical college approved by the Liaison Commission on Medical Education or an osteopathic college approved by the American Osteopathic Association, is a dentist licensed to practice dentistry under Article 2 of Chapter 90 of the General Statutes, and has been certified by the American Board of Oral and Maxillofacial

Surgery after having completed a residency in an Oral and Maxillofacial Surgery Residency Program approved by the Board before completion of medical school; or

- (3) a graduate of a medical college that has not been approved by the Liaison Commission on Medical Education or an osteopathic college that has not been approved by the American Osteopathic Association and has successfully completed three years of training in a medical education program approved by the Board after graduation from medical school.

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

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

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

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

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

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

The North Carolina Medical Board of Medical Examiners shall in their discretion issue a license to any applicant to practice medicine and surgery in this State without examination if said applicant exhibits a diploma or satisfactory proof of graduation from a medical or osteopathic college, approved as provided in G.S. 90-9 and requiring an attendance of not less than four years or for such lesser period of time approved by the Board, and a license issued to him to practice medicine and surgery by the Board of Medical Examiners of another state, and has successfully completed one year of training after his graduation from medical college in a medical education and training program approved by the Board, in which program the Board may permit him to practice medicine. An applicant for licensing under this section who was graduated from a medical college not approved by the Liaison Commission on Medical Education or osteopathic college that has not been approved by the American Osteopathic Association shall have successfully completed three years of training in a medical education and training program approved by the Board after graduation. The Board may grant a license under this section for any period of time and with any conditions it deems appropriate. No license may be granted to any applicant who was graduated from a medical or osteopathic college which has been disapproved by the Board."

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

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

Whenever the North Carolina Medical Board of Medical Examiners has determined that a person who has duly made application to take an examination to be given by the Board showing his education, training and other qualifications required by said Board, or that a person who has taken and passed an examination given by the Board, has failed to satisfy the Board of his qualifications to be examined or to be issued a license, for

any cause other than failure to pass an examination, the Board shall immediately notify such person of its decision, and indicate in what respect the applicant has so failed to satisfy the Board. Such applicant shall be given a formal hearing before the Board upon request of such applicant filed with or mailed by registered mail to the secretary of the Board at Raleigh, North Carolina, within 10 days after receipt of the Board's decision, stating the reasons for such request. The Board shall within 20 days of receipt of such request notify such applicant of the time and place of a public hearing, which shall be held within a reasonable time. The burden of satisfying the Board of his qualifications for licensure shall be upon the applicant. Following such hearing, the Board shall determine whether the applicant is qualified to be examined or is entitled to be licensed as the case may be. Any such decision of the Board shall be subject to judicial review upon appeal to the Superior Court of Wake County upon the filing with the Board of a written notice of appeal with exceptions taken to the decision of the Board within 20 days after service of notice of the Board's final decision. Within 30 days after receipt of notice of appeal, the secretary of the Board shall certify to the clerk of the Superior Court of Wake County the record of the case which shall include a copy of the notice of hearing, a transcript of the testimony and evidence received at the hearing, a copy of the decision of the Board, and a copy of the notice of appeal and exceptions. Upon appeal the case shall be heard by the judge without a jury, upon the record, except that in cases of alleged omissions or errors in the record, testimony may be taken by the court. The decision of the Board shall be upheld unless the substantial rights of the applicant have been prejudiced because the decision of the Board is in violation of law or is not supported by any evidence admissible under this Article, or is arbitrary or capricious. Each party to the review proceeding may appeal to the Supreme Court as hereinafter provided in G.S. 90-14.11."

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

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

Each applicant for a license by examination shall pay to the North Carolina Medical Board of Medical Examiners of the State of North Carolina a fee which shall be prescribed by the Board in an amount not exceeding the sum of four hundred dollars (\$400.00) plus the cost of test materials before being admitted to the examination. Whenever a license is granted without examination, as authorized in G.S. 90-13, the applicant shall pay to the Board a fee in an amount to be prescribed by the Board not in excess of two hundred fifty dollars (\$250.00). Whenever a limited license is granted as provided in G.S. 90-12, the applicant shall pay to the Board a fee not to exceed one hundred fifty dollars (\$150.00), except where a limited license to practice in a medical education and training program approved by the Board for the purpose of education or training is granted, the applicant shall pay a fee of twenty-five dollars (\$25.00). A fee of twenty-five dollars (\$25.00) shall be paid for the issuance of a duplicate license. All fees shall be paid in advance to the ~~Board of Medical Examiners of the State of North Carolina~~, North Carolina Medical Board, to be held in a fund for the use of the Board. The compensation and expenses of the members and officers of the the Board and all expenses proper and necessary in the opinion of the Board to the discharge of its duties under and to enforce the laws regulating the practice of medicine or surgery shall be

paid out of the fund, upon the warrant of the Board. The per diem compensation of Board members shall not exceed two hundred dollars (\$200.00) per day per member for time spent in the performance and discharge of duties as a member. Any unexpended sum or sums of money remaining in the treasury of the Board at the expiration of the terms of office of the members of the Board shall be paid over to their successors in office.

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

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

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

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

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

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

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

The Board may in a closed session receive evidence involving or concerning the treatment of a patient who has not expressly or impliedly consented to the public disclosure of such treatment as may be necessary for the protection of the rights of such

patient or of the accused physician and the full presentation of relevant evidence. All records, papers and other documents containing information collected and compiled by the Board, or its members or employees as a result of investigations, inquiries or interviews conducted in connection with a licensing or disciplinary matter shall not be considered public records within the meaning of Chapter 132 of the General Statutes; provided, however, that any notice or statement of charges against any licensee, or any notice to any licensee of a hearing in any proceeding shall be a public record within the meaning of Chapter 132 of the General Statutes, notwithstanding that it may contain information collected and compiled as a result of any such investigation, inquiry or interview; and provided, further, that if any such record, paper or other document containing information theretofore collected and compiled by the Board, as hereinbefore provided, is received and admitted in evidence in any hearing before the Board, it shall thereupon be a public record within the meaning of Chapter 132 of the General Statutes.

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

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

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

- a. Such assistant is approved by and annually registered with the Board as one qualified by training or experience to function as an assistant to a physician, except that no more than two assistants may be currently registered for any physician, and
- b. Such act, task or function is performed at the direction or under the supervision of such physician, in accordance with rules and regulations promulgated by the Board, and
- c. The services of the assistant are limited to assisting the physician in the particular field or fields for which the assistant has been trained, approved and registered;

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

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

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

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

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



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

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

- (1) The North Carolina Medical Board of Medical Examiners has adopted regulations governing the approval of individual physician assistants to write prescriptions with such limitations as the Board may determine to be in the best interest of patient health and safety;
- (2) The physician assistant has current approval from the Board;
- (3) The North Carolina Medical Board of Medical Examiners has assigned an identification number to the physician assistant which is shown on the written prescription; and
- (4) The supervising physician has provided to the physician assistant written instructions about indications and contraindications for prescribing drugs and a written policy for periodic review by the physician of the drugs prescribed.

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

- (1) The function is performed under the supervision of a licensed pharmacist; and
- (2) Rules and regulations of the North Carolina Board of Pharmacy governing this function are complied with.

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

- (1) The North Carolina Medical Board of Medical Examiners has adopted regulations governing the approval of individual physician assistants to order medications, tests and treatments with such limitations as the Board may determine to be in the best interest of patient health and safety;
- (2) The physician assistant has current approval from the Board;
- (3) The supervising physician has provided to the physician assistant written instructions about ordering medications, tests and treatments, and when appropriate, specific oral or written instructions for an individual patient, with provision for review by the physician of the order within a reasonable time, as determined by the Board, after the medication, test or treatment is ordered; and
- (4) The hospital or other health facility has adopted a written policy, approved by the medical staff after consultation with the nursing administration, about ordering medications, tests and treatments, including procedures for verification of the physician assistants' orders

by nurses and other facility employees and such other procedures as are in the interest of patient health and safety.

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

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

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

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

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

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

- (1) The ~~North Carolina Medical Board of Medical Examiners~~ and Board of Nursing have adopted regulations developed by a joint subcommittee governing the approval of individual nurse practitioners to write prescriptions with such limitations as the boards may determine to be in the best interest of patient health and safety;
- (2) The nurse practitioner has current approval from the boards;
- (3) The ~~North Carolina Medical Board of Medical Examiners~~ has assigned an identification number to the nurse practitioner which is shown on the written prescription; and
- (4) The supervising physician has provided to the nurse practitioner written instructions about indications and contraindications for prescribing drugs and a written policy for periodic review by the physician of the drugs prescribed.

(c) Nurse practitioners are authorized to compound and dispense drugs under the following conditions:

- (1) The function is performed under the supervision of a licensed pharmacist; and
- (2) Rules and regulations of the North Carolina Board of Pharmacy governing this function are complied with.

(d) Nurse practitioners are authorized to order medications, tests and treatments in hospitals, clinics, nursing homes and other health facilities under the following conditions:

- (1) The ~~North Carolina Medical Board of Medical Examiners~~ and Board of Nursing have adopted regulations developed by a joint subcommittee governing the approval of individual nurse practitioners to order medications, tests and treatments with such limitations as the

boards may determine to be in the best interest of patient health and safety;

- (2) The nurse practitioner has current approval from the boards;
- (3) The supervising physician has provided to the nurse practitioner written instructions about ordering medications, tests and treatments, and when appropriate, specific oral or written instructions for an individual patient, with provision for review by the physician of the order within a reasonable time, as determined by the Board, after the medication, test or treatment is ordered; and
- (4) The hospital or other health facility has adopted a written policy, approved by the medical staff after consultation with the nursing administration, about ordering medications, tests and treatments, including procedures for verification of the nurse practitioners' orders by nurses and other facility employees and such other procedures as are in the interest of patient health and safety.

(e) Any prescription written by a nurse practitioner or order given by a nurse practitioner for medications, tests or treatments shall be deemed to have been authorized by the physician approved by the boards as the supervisor of the nurse practitioner and such supervising physician shall be responsible for authorizing such prescription or order.

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

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

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

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

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

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

"(a) The North Carolina Medical Board ~~of Medical Examiners~~ may, under rules adopted by the Board in compliance with Chapter 150B of the General Statutes, enter into agreements with the North Carolina Medical Society and its local medical society components, and with the North Carolina Academy of Physician Assistants for the purpose of conducting peer review activities. Peer review activities to be covered by

such agreements shall include investigation, review, and evaluation of records, reports, complaints, litigation and other information about the practices and practice patterns of physicians licensed by the Board, and of physician assistants approved by the Board, and shall include programs for impaired physicians and impaired physician assistants. Agreements between the Academy and the Board shall be limited to programs for impaired physicians and physician assistants and shall not include any other peer review activities."

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

"(r) 'Practice of pharmacy' means the responsibility for: interpreting and evaluating drug orders, including prescription orders; compounding, dispensing and labeling prescription drugs and devices; properly and safely storing drugs and devices; maintaining proper records; and controlling pharmacy goods and services. A pharmacist may advise and educate patients and health care providers concerning therapeutic values, content, uses and significant problems of drugs and devices; assess, record and report adverse drug and device reactions; take and record patient histories relating to drug and device therapy; monitor, record and report drug therapy and device usage; perform drug utilization reviews; and participate in drug and drug source selection and device and device source selection as provided in G.S. 90-85.27 through G.S. 90-85.31. A pharmacist who has received special training may be authorized and permitted to administer drugs pursuant to a specific prescription order in accordance with rules and regulations adopted by each of the Boards of Pharmacy, the Board of Nursing, and the ~~Board of Medical Examiners of the State of North Carolina~~ North Carolina Medical Board. Such rules and regulations shall be designed to ensure the safety and health of the 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. Name and Address of Dispensing Physician        | 2. 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:

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

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

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

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

- (1) Has given false information or has withheld material information from the Board in procuring or attempting to procure a license to practice nursing;
- (2) Has been convicted of or pleaded guilty or nolo contendere to any crime which indicates that the nurse is unfit or incompetent to practice nursing or that the nurse has deceived or defrauded the public;
- (3) Has a mental or physical disability or uses any drug to a degree that interferes with his or her fitness to practice nursing;
- (4) Engages in conduct that endangers the public health;

- (5) Is unfit or incompetent to practice nursing by reason of deliberate or negligent acts or omissions regardless of whether actual injury to the patient is established;
- (6) Engages in conduct that deceives, defrauds, or harms the public in the course of professional activities or services;
- (7) Has violated any provision of this Article; or
- (8) Has willfully violated any rules enacted by the Board.

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

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

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

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

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

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

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

"(1) Medical Care and Sanitation. – The Commission for Health Services shall adopt rules which establish minimum sanitation standards for child day care facilities and their personnel. The sanitation rules adopted by the Commission for Health Services shall cover such matters as the cleanliness of floors, walls, ceilings, storage spaces, utensils, and other facilities; adequacy of ventilation; sanitation of water supply, lavatory facilities, toilet facilities, sewage disposal, food protection facilities, bactericidal treatment of eating and drinking

utensils, and solid-waste storage and disposal; methods of food preparation and serving; infectious disease control; sleeping facilities; and other items and facilities as are necessary in the interest of the public health. These rules shall be developed in consultation with the Department.

The Commission shall adopt rules to establish minimum requirements for child and staff health assessments and medical care procedures. These rules shall be developed in consultation with the Department of Environment, Health, and Natural Resources. Each child shall have a health assessment before being admitted or within 30 days following admission to a child day care facility. The assessment shall be done by: (i) a licensed physician, (ii) the physician's authorized agent who is currently approved by the North Carolina ~~Board of Medical Examiners, Medical Board,~~ or comparable certifying board in any state contiguous to North Carolina, (iii) a certified nurse practitioner, or (iv) a public health nurse meeting the Department of Environment, Health, and Natural Resources' Standards for Early Periodic Screening, Diagnosis, and Treatment Program. A record of each child's assessment shall be on file in the records of the facility. However, no health assessment shall be required of any child who is and has been in normal health and whose parent, guardian, or full-time custodian objects in writing to a health assessment on religious grounds which conform to the teachings and practice of any recognized church or religious denomination.

Each child shall be immunized in a manner that meets the requirements of Article 6 of Chapter 130A of the General Statutes and the pertinent rules adopted by the Commission for Health Services.

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

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

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

"(8) 'Qualified individual' means any of the following individuals who has completed a course in eye enucleation and has been certified as

competent to enucleate eyes by an accredited school of medicine in this State:

- a. An embalmer licensed to practice in this State;
- b. A physician's assistant approved by the North Carolina Medical Board of Medical Examiners pursuant to G.S. 90-18(13);
- c. A registered or a licensed practical nurse licensed by the Board of Nursing pursuant to Article 9A of Chapter 90 of the General Statutes;
- d. A student who is enrolled in an accredited school of medicine operating within this State and who has completed two or more years of a course of study leading to the awarding of a degree of doctor of medicine;
- e. A technician who has successfully completed a written examination by the North Carolina Eye and Human Tissue Bank, Inc., certified by the Eye Bank Association of America."

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

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

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

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

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

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

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

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

In the General Assembly read three times and ratified this the 22nd day of May, 1995.



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Dennis A. Wicker  
President of the Senate

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Harold J. Brubaker  
Speaker of the House of Representatives