4723-8-04 Standard care arrangement for a certified nurse-midwife, certified nurse practitioner, and clinical nurse specialist.

- (A) Prior to engaging in practice, a standard care arrangement shall be entered into with each physician or podiatrist with whom the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist collaborates. A new standard care arrangement shall be executed when engaging in practice with a different collaborating physician or podiatrist.
 - (1) The standard care arrangement shall be revised to reflect the addition or deletion of a physician or podiatrist with whom the nurse collaborates within that employment setting. Under these circumstances, a new standard care arrangement is not necessary.
 - (2) A new standard care arrangement shall be executed when the nurse is employed at a different setting and engages in practice with a different collaborating physician or podiatrist.
- (B) A certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist engaged in the practice of their specialty, shall enter into a written standard care arrangement with one or more collaborating physicians or podiatrists whose practice is the same or similar to the nurse's practice. A clinical nurse specialist without a certificate to prescribe whose nursing specialty is mental health or psychiatric mental health is exempt from this provision.
- (C) The standard care arrangement shall include at least:
 - (1) The signatures of each individual nurse and each collaborating physician or podiatrist with whom the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist primarily collaborates indicating review of and agreement to abide by the terms of the standard care arrangement; the date when the arrangement is initially executed; and the date of the most recent review of the arrangement;
 - (2) The complete name, specialty and practice area, business address, and business phone number or number at which the individual can be reached at any time for:
 - (a) Each collaborating physician or podiatrist with whom the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist primarily collaborates and who is a party to the standard care arrangement; and
 - (b) Each certified nurse-midwife, certified nurse practitioner, or clinical nurse

specialist who is a party to the standard care arrangement;

(3) A statement of services offered by the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist consistent with section 4723.43 of the Revised Code and this chapter. For holders of certificate to prescribe, a description of the scope of prescriptive practice.

- (4) A plan for incorporation of new technology or procedures consistent with the applicable scope of practice as set forth in section 4723.43 of the Revised Code and this chapter;
- (5) Quality assurance provisions, including at least:
 - (a) A schedule for periodic review and reapproval of the standard care arrangement. The standard care arrangement shall be reviewed at least annually;
 - (b) Criteria for referral of a client by the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist to a collaborating physician or podiatrist, including, for the certified nurse-midwife, a plan for referral of breech or face presentation or any other abnormal condition identified as such in the standard care arrangement;
 - (c) A process for the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist to obtain consultation from the physician or podiatrist;
 - (d) A procedure for regular review of referrals made by the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist to other health care professionals, and the care outcomes for a random sample of all clients seen by the nurse; and
 - (e) A process for chart review in accordance with rule 4723-8-05 of the Administrative Code if the nurse's practice includes any direct client care, education, or management;
- (6) A policy for care of infants up to age one and recommendations for collaborating physician visits for children from birth to age three, if the nurse is providing services to infants;
- (7) A plan for coverage of clients in instances of emergency or planned absences of either the certified nurse-midwife, certified nurse practitioner, or clinical

- nurse specialist, or the collaborating physician or podiatrist;
- (8) A process for resolution of disagreements regarding matters of patient management; and
- (9) An arrangement regarding reimbursement in accordance with division (D) of section 5111.02 of the Revised Code and all rules promulgated thereunder.
- (10) For nurses with a current valid certificate to prescribe, the following quality assurance provisions shall include at least:
 - (a) Provisions to ensure timely direct, personal evaluation of the patient with a collaborating physician or the physician's designee;
 - (b) Additional prescribing parameters for those drugs or therapeutic devices established in the formulary, including:
 - (i) Provisions for use of drugs with non-food and drug administration (FDA) approved indications;
 - (ii) Provisions for use of drugs approved by the FDA subsequent to the date of the standard care arrangement after review by the committee on prescriptive governance; and
 - (iii) Provisions for use of previously reviewed drugs approved by the FDA for new indications subsequent to the date of the standard care arrangement.
 - (c) A procedure for periodic review, at least semiannually, of prescriptions written by the nurse with the collaborating physician; and
 - (d) Provisions as set forth in rule 4723-8-05 of the Administrative Code.
- (D) The most current copy of the standard care arrangement shall be retained and be available upon request at each site where practice of the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist occurs. Upon request of the board, the certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist shall immediately provide a copy of the standard care arrangement to the board.
- (E) When a hospital negotiates a standard care arrangement in accordance with division

(D) of section 4723.431 of the Revised Code and this chapter, the standard care arrangement shall be developed in accordance with paragraph (C) of this rule. Review and approval of the standard care arrangement shall be in accordance with the policies and procedures of the hospital governing body and the bylaws, policies, and procedures of the hospital medical staff.

- (F) A certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist shall notify the board of the identity of a collaborating physician or podiatrist not later than thirty days after engaging in practice.
- (G) A certified nurse-midwife, certified nurse practitioner, or clinical nurse specialist shall notify the board of any change in the identity of a collaborating physician or podiatrist not later than thirty days after the change takes effect.
- (H) A clinical nurse specialist whose nursing specialty is mental health or psychiatric mental health is exempt from the requirement of executing a standard care arrangement in accordance with division (C) of section 4723.431 of the Revised Code. The clinical nurse specialist whose nursing specialty is mental health or psychiatric mental health shall identify a collaborating physician in accordance with division (C) of section 4723.431 of the Revised Code.

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