Note: Email completed form to jcarr1@jcarr.state.oh.us.

Hearing Date: 11/15/2017 Today's Date: 12/7/2017
Agency: Ohio Board of Nursing
Rule Number(s): Rules 4723-1-03, 4723-1-04, 4723-1-10, 4723-2-03; 4723-3-01, 4723-7-09; 4723-8-01 through 4723-8-05 and 4723-8-07 through 4723-8-10; 4723-9-01 through 4723-9-08 and 4723-9-10 through 4723-9-12; 4723-14-01 through 4723-14-05; 4723-14-09; 4723-14-12; 4723-14-14; 4723-14-15; 4723-14-17; 4723-14-18; and 4723-23-01 and 4723-23-08.
If no comments at the hearing, please check the box. \Box
List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question.
1. Christine Williams, APRN, NP, re: Rule 4723-9-10
2. Mary Jane Maloney, APRN, NP, on behalf of the Ohio Association of Advanced Practice Nurses, re: Rule 4723-9-10
3. Karin Grant, APRN, NP, re: Rule 4723-9-10
4. Tiffany Bukoffsky, RN, on behalf of the Ohio Nurses Association, re: Rule 4723-9-10
5. Betsy Houchen, RN, MS, JD, re: all rules on behalf of the Ohio Board of Nursing
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Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

Testimony from Ohio Association of Advanced Practice Nurses (OAAPN), the Ohio Nurses Association (ONA), and Christine Williams, APRN, NP representing herself, requested that the Board remove all the proposed language that would authorize prescribing APRNs to exceed the 30 MED average. They requested additional time to further examine and evaluate possible changes to language in the rule. They commented in general on possible negative impact on the profession from language linking the Nursing Board rule to Medical Board rule (4731-11-13, OAC) that governs physicians; the Medical Board rule requires that the prescribing physician be singularly accountable for prescriptions that exceed the 30 MED.

Karin Grant, APRN, RN who practices and prescribes in an acute care setting stated that all nurse practitioners have a collaborating arrangement with every treating physician whose patients he/she sees. She testified in support of the Nursing Board rule being expanded to include the ability of the APRN to use the narrow exception when necessary and make her practice consistent with physicians and physician assistants. She asked that the proposed exception not be removed and commented that her practice would be enhanced by the exception and was needed at this time.

Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s). If no comments were incorporated, explain why not.

The Board revised Rule 4723-9-10, OAC, that was last modified with an effective date of August 31, 2017. The Board received numerous comments from APRNs who stated that they needed a similar exception to the 30 MED average established for physicians and physician assistants in Medical Board Rule 4731-11-13, OAC, that became effective at the same time as the Nursing Board Rule. The Nursing Board revised the Rule 4723-9-10 to grant the exception requested and vetted the rule prior to the rules hearing with the Board's Advisory Committee on Advanced Practice Registered Nursing that was created by statute in 2017. The Committee is made up of a majority of APRN members who are not Board Members. The Committee discussed and approved language that provided the needed exception so that care could be provided in a similar manner to that permitted for physicians and physician assistants.