## 4729:1-6-01 **Definitions - consult agreements.**

- (A) "Communication between a pharmacist and physician acting under a consult agreement," as used in division (B)(6) of section 4729.39 of the Revised Code, means any of the following:
  - (1) Electronic mail that confirms delivery;
  - (2) Interoperable electronic medical records system;
  - (3) Facsimile that confirms delivery;
  - (4) Electronic prescribing system;
  - (5) Electronic pharmacy record system;
  - (6) Documented verbal communication; or
  - (7) Any other method of documented notification as outlined in the consult agreement between the pharmacist and physician.
- (A) "Certified nurse practitioner," "certified nurse-midwife," "clinical nurse specialist," and "standard care arrangement" have the same meanings as in section 4723.01 of the Revised Code.
- (B) "Collaborating physician" means a physician who has entered into a standard care arrangement with a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner.
- (C) "Communication between a pharmacist and practitioner acting under a consult agreement," as used in division (D)(6) of section 4729.39 of the Revised Code, means any of the following:
  - (1) Electronic mail that confirms delivery:
  - (2) Interoperable electronic medical records system;
  - (3) Facsimile that confirms delivery;
  - (4) Electronic prescribing system;
  - (5) Electronic pharmacy record system;
  - (6) Documented verbal communication; or

(7) Any other method of documented notification as outlined in the consult agreement between the pharmacist and practitioner.

(B)(D) "Comorbid disease," as used in division (BD)(3)(a) of section 4729.39 of the Revised Code, means an additional disease that co-occurs with a primary disease. A comorbid disease may be related to or occur independently of the primary disease.

### <del>(C)</del>(E)

- (1) "Communicated" as used in division (<u>BD</u>)(4) of section 4729.39 of the Revised Code, means consent shall be obtained from each individual patient participating in a consult agreement. With the exception of inpatient management of patient care at an institutional facility, consent shall be obtained prior to a pharmacist managing a patient's drug therapy and shall communicate all of the following:
  - (a) A pharmacist may be utilized in the management of the patient's care; and
  - (b) The patient's or an individual authorized to act on behalf of a patient's right to elect to participate in and withdraw from the consult agreement.
- (2) Consent as required in paragraph ( $\underbrace{EE}$ )(1) of this rule may be obtained as a part of the patient's initial consent to treatment.
- (D)(F) "Consult agreement" means an agreement that has been entered into pursuant to section 4729.39 of the Revised Code.
- (E)(G) "Institutional facility" has the same meaning as defined in agency 4729 of the Administrative Code.
- (F)(H) "Managing pharmacist" means a pharmacist managing a patient's drug therapy pursuant to a consult agreement.
- (I) "Physician" means an individual authorized under Chapter 4731. of the Revised Code to practice medicine and surgery or osteopathic medicine and surgery.
- (J) "Physician assistant" means an individual who is licensed to practice as a physician assistant under Chapter 4730. of the Revised Code, holds a valid prescriber number issued by the state medical board, and has been granted physician-delegated prescriptive authority.

## (G)(K)

(1) "Positive identification" means a method of identifying a person that does not rely on the use of a private personal identifier such as a password, but must use a secure means of identification that includes any of the following:

- (a) A manual signature on a hard copy record;
- (b) A magnetic card reader;
- (c) A bar code reader;
- (d) A biometric method;
- (e) A proximity badge reader;
- (f) A board approved system of randomly generated personal questions;
- (g) A printout of every transaction that is verified and manually signed within a reasonable period of time by the individual who performed the action requiring positive identification. The printout must be maintained for three years and made readily retrievable; or
- (h) Other effective methods for identifying individuals that have been approved by the board.
- (2) A method relying on a magnetic card reader, a bar code reader, a proximity badge reader, or randomly generated questions for identification must also include a private personal identifier, such as a password, for entry into a secure mechanical or electronic system.

### (L) "Practitioner" means any of the following:

- (1) Physician;
- (2) Physician assistant;
- (3) Clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner.
- (H)(M) "Primary disease," as used in division (BD)(3)(a) of section 4729.39 of the Revised Code, means a disease that arises spontaneously and is not associated with or caused by a previous disease, injury, or event, but that may lead to a comorbid disease.
- (1)(N) "OARRS report" means a report of information related to a specific person generated by the drug database established and maintained pursuant to section 4729.75 of the Revised Code.

(J)(O) "Readily retrievable" means that records maintained in accordance with this chapter shall be kept in such a manner that, upon request, they can be produced for review no later than three business days to an agent, officer or inspector of the board.

- (P) "Supervising physician" means a physician who has entered into a supervision agreement with a physician assistant under section 4730.19 of the Revised Code.
- (K)(Q) "Training and experience related to the particular diagnosis for which drug therapy is prescribed," as used in division (AC)(3) of section 4729.39 of the Revised Code, means an Ohio licensed pharmacist whose license is in good standing and who meets the training and experience criteria specified in paragraph (A)(1)(k) of rule 4729:1-6-02 of the Administrative Code.
- (L)(R) "Written notice," as used in division (BD)(2)(b) of section 4729.39 of the Revised Code, means one of the following methods that is capable of confirming delivery of the required written notice:
  - (1) Electronic mail;
  - (2) Interoperable electronic medical records system;
  - (3) Facsimile;
  - (4) Electronic prescribing system;
  - (5) Electronic pharmacy record system;
  - (6) Any other method in writing that provides notice in a timely manner; or
  - (7) Any other method of notification as outlined in the consult agreement that might reasonably be expected to allow for the confirmed transmission of the written notification required.

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# CERTIFIED ELECTRONICALLY

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09/29/2021

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