Georgia Composite Medical Board

Executive Director Daniel R. Dorsey, MBA



Chairperson Matthew Norman, MD

Vice Chairperson Andrew Reisman, MD

2 Peachtree Street, NW • 6th Floor • Atlanta, Georgia 30303 • (404) 656-3913 • www.medicalboard.georgia.gov

NOTICE OF INTENT TO AMEND AND ADOPT RULES

TO ALL INTERESTED PARTIES:

Notice is hereby given that pursuant to the authority set forth below, the Georgia Composite Medical Board (hereinafter "Board") proposes amendments to the Georgia Composite Medical Board Rules by amending **Rule 360-34-.06 "Limitations of the Vaccine Protocol Agreement**" An exact copy of the proposed rule is attached to this Notice.

This notice, together with an exact copy of the proposed rules and a synopsis of the proposed amendments may be reviewed between 8:00 a.m. and 4:00 p.m., Monday through Friday, except official state holidays, at 2 Peachtree Street, NW, 6th Floor, Atlanta, GA 30303. These documents can also be reviewed online at http://medicalboard.georgia.gov/notice-intent-amendadopt-rules.

A public hearing is scheduled to begin at **8:30 a.m. on October 6, 2022, via TEAMS** to provide the public an opportunity to comment upon and provide input into the proposed rules. At the public hearing, any interested person may present data, make a statement or comment, or offer a viewpoint or argument orally or in writing. Lengthy statements and statements of a considerable technical or economic nature, as well as previously recorded messages, must be submitted for the official record. Oral statements should be concise and will be limited to five minutes per person. Additional comments should be presented in writing. To ensure their consideration, submit all written comments by **September 22, 2022, to** <u>Kierra.Battle@dch.ga.gov</u> or via mail to the Georgia Composite Medical Board Rules Committee at 2 Peachtree Street, NW, 6th Floor, Atlanta, Georgia 30303.

The Board voted to adopt this Notice of Intent on **September 1, 2022**. Upon conclusion of the public hearing on **October 6, 2022**, the Board will consider whether the formulation and adoption of these proposed rule amendments imposes excessive regulatory costs on any license or entity, and whether any cost to comply with the proposed rule amendments could be reduced by a less expensive alternative that accomplishes the objectives of the statutes which are the basis of the proposed rule. Additionally, the Board will consider whether it is legal or feasible in meeting the objectives of the applicable laws to adopt or implement differing actions for businesses as listed in O.C.G.A. § 50-13-4(3)(A),(B),(C), and (D).

This Notice is adopted and posted in compliance with O.C.G.A. § 50-13-4 of the Georgia Administrative Procedures Act. A synopsis of the proposed rules and an economic impact statement are attached to this Notice. The authority for promulgation of these rules is O.C.G.A. Secs. 43-34-5, 43-34-103, and 43-34-108.

Issued this day September 1, 2022.

Daniel R. Dorsey Executive Director

ECONOMIC IMPACT AND SYNOPSIS FOR

RULE CHAPTER 360-34 Vaccine Protocol Agreements

ECONOMIC IMPACT:

The attached rules are promulgated under the authority of the Medical Practice Act, Title 43, Chapter 34. The Georgia Composite Medical Board licenses and regulates nine professions. The formulation and adoption of these rules do not impose excessive regulatory cost on any licensee, and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative that fully accomplishes the objectives of Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated. Additionally, it is not legal or feasible to meet the objectives of the Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated to adopt or implement differing actions for businesses listed in O.C.G.A. §50-13-4(a)(3)(A), (B), (C) and (D).

RULE SYNOPSIS:

Rule 360-34-.06 "Limitations of the Vaccine Protocol Agreement"

<u>Purpose/Main Features:</u> The proposed changes include the elimination of the requirement that the physician and pharmacist be in the same public health district, as this statutory requirement was removed from O.C.G.A. § 43-34-26.1(j).

Next, the Board proposes to eliminate subsections (5) and (6) from the rule as no longer applicable under the recent revision to the definition of "vaccine" under O.C.G.A. § 43-34-26.1(a)(9).

Finally, there is an added subsection that requires the documentation of informed consent in order to administer a live attenuated virus to a patient; this requirement is directly taken from O.C.G.A. § 43-34-26.1(q), as recently amended.

Authority O.C.G.A. §§ 43-34-5; 43-34-26.1

Rule 360-34-.06 Limitations of the Vaccine Protocol Agreement

(1) The physician shall not enter vaccine protocol agreements with more than ten (10) pharmacists and/or nurses except as provided in O.C.G.A. Section 43-34-26.1(j).

(2) The physician must be in the same public health district as the pharmacists and/or nurses identified in the protocol; or the nurses and/or pharmacists are located in the same or contiguous county as the physician's registration with the vaccination registry.

(3) The physician shall have verified that the pharmacist(s) or nurse(s) have had Basic Cardiac Life Support training and any other training required by law.

(4) The physician shall verify that the pharmacist or nurse administering the protocol has policies and procedures for the handling and disposal of contaminated equipment and supplies.

(5) No vaccine protocol agreement shall permit a pharmacist or nurse to administer a vaccine, including the influenza vaccine, to any child under the age of 13 without an individual prescription from a physician.

(6) No vaccine protocol agreement shall permit a pharmacist or nurse to administer a pneumococcal disease vaccine or meningitis vaccine to a child under the age of 18.

(57) No vaccine protocol agreement shall permit a pharmacist or nurse to administer a vaccine to a child under the age of 18 without consent from the child's parent or legal guardian.

(6) No live attenuated virus shall be administered pursuant to a vaccine protocol unless the patient or his or her parent, if a minor, has signed an informed consent that he or she does not have a contraindication to this vaccine, and such informed consent lists the contraindications to the vaccine.

Authority: O.C.G.A. § 43-34-26.1.