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# HOUSE BILL No. 1111

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## DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 25-26-16.

**Synopsis:** Drug regimen protocols. Allows a physician to adopt a protocol that allows a pharmacist to adjust a patient's drug regimen in a setting other than a hospital. Requires a pharmacist to communicate with the admitting practitioner to receive approval to begin the protocol. (Current law requires communication only if a protocol involves parenteral nutrition of the patient.) Requires that when a pharmacist is practicing a protocol under physician authorization that: (1) the pharmacist must be under the direct supervision of the physician; and (2) the protocols must, at a minimum, require that the medical records of the patient are available to both the patient's physician and the pharmacist. Requires a physician to consult with a pharmacist during the implementation, revision, and renewal of a protocol.

**Effective:** July 1, 2011.

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January 6, 2011, read first time and referred to Committee on Public Health.

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First Regular Session 117th General Assembly (2011)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2010 Regular Session of the General Assembly.

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## HOUSE BILL No. 1111



A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

*Be it enacted by the General Assembly of the State of Indiana:*

1 SECTION 1. IC 25-26-16-1, AS AMENDED BY P.L.1-2009,  
2 SECTION 143, IS AMENDED TO READ AS FOLLOWS  
3 [EFFECTIVE JULY 1, 2011]: Sec. 1. As used in this chapter,  
4 "protocol" means the policies, procedures, and protocols of a:

- 5 (1) hospital listed in IC 16-18-2-161(a)(1); **or**
  - 6 (2) **physician licensed under IC 25-22.5;**
- 7 concerning the adjustment of a patient's drug regimen by a pharmacist.

8 SECTION 2. IC 25-26-16-3, AS AMENDED BY P.L.98-2006,  
9 SECTION 27, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
10 JULY 1, 2011]: Sec. 3. (a) At the time of admission to a hospital that  
11 has adopted a protocol under this chapter, the following apply:

- 12 (1) The admitting practitioner shall signify in writing in the form  
13 and manner prescribed by the hospital whether the protocol  
14 applies in the care and treatment of the patient.
- 15 (2) A pharmacist may adjust the drug therapy regimen of the  
16 patient pursuant to the:  
17 (A) written authorization of the admitting practitioner under



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subdivision (1); and  
(B) protocols of the hospital.  
The pharmacist shall review the appropriate medical records of the patient to determine whether the admitting practitioner has authorized the use of a specific protocol before adjusting the patient's drug therapy regimen. The admitting practitioner may at any time modify or cancel a protocol by entering the modification or cancellation in the patient's medical record.

~~(b) Notwithstanding subsection (a)(2), if a protocol involves parenteral nutrition of the patient, the~~ A pharmacist shall communicate with the admitting practitioner to ~~receive approval to~~ begin the protocol. The authorization of the admitting practitioner to use the protocol shall be entered immediately in the patient's medical record, if required by the protocol.

SECTION 3. IC 25-26-16-3.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2011]: **Sec. 3.5. (a) This section does not apply to a protocol adopted in a hospital.**

**(b) Upon authorization of a physician who has adopted a protocol under this chapter, the following apply:**

- (1) The physician shall signify in writing whether the protocol applies in the care and treatment of the patient.**
- (2) A pharmacist may adjust the drug therapy regimen of the patient under the authorization of the physician.**
- (3) The pharmacist shall review the appropriate medical records of the patient to determine whether the physician has authorized the use of a specific protocol before adjusting the patient's drug therapy regimen.**

**(c) The physician who has adopted a protocol under this chapter may at any time modify or cancel a protocol by entering the modification or cancellation in the patient's medical record.**

SECTION 4. IC 25-26-16-4.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2011]: **Sec. 4.5. (a) This section does not apply to a pharmacist who is practicing in a hospital.**

**(b) This section applies to a pharmacist who is practicing under physician authorization. The pharmacist must be under the direct supervision of the physician. The protocols must be developed by health care professionals, including the physician and pharmacist.**

**(c) The protocols developed under this chapter must, at a minimum, require that the medical records of the patient are available to both the patient's physician and the pharmacist and**

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1 **that the procedures performed by the pharmacist relate to a**  
2 **condition for which the patient has first seen the physician or other**  
3 **licensed practitioner.**

4 SECTION 5. IC 25-26-16-5 IS AMENDED TO READ AS  
5 FOLLOWS [EFFECTIVE JULY 1, 2011]: Sec. 5. (a) If a hospital or  
6 private mental health institution elects to implement, revise, or renew  
7 a protocol under this chapter, the governing board of the hospital or  
8 private mental health institution shall consult with that facility's  
9 medical staff, pharmacists, and other health care providers selected by  
10 the governing board. However, the governing board is the ultimate  
11 authority regarding the terms, implementation, revision, and renewal  
12 of the protocol.

13 **(b) If a physician elects to implement, revise, or renew a**  
14 **protocol, in a setting other than a hospital or private mental health**  
15 **institution, the physician shall consult with a pharmacist. However,**  
16 **the physician is the ultimate authority regarding the terms,**  
17 **implementation, revision, and renewal of the protocol.**

18 SECTION 6. IC 25-26-16-7 IS AMENDED TO READ AS  
19 FOLLOWS [EFFECTIVE JULY 1, 2011]: Sec. 7. A protocol of a  
20 health care facility **or a physician that is** developed under this chapter  
21 must be reviewed at least annually.

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