STANDING ORDERS: Health Professionals & Immunization Practice

NEW JERSEY

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<th>Assessment</th>
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<td>Own Authority</td>
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NOTES:

1. Immunization Practice: Includes the assessment of patient status, the prescription of appropriate vaccines, and the administration of vaccines.

2. Delegated Authority: May include the following terms: standing orders, protocol, collaborative agreement, direct or indirect supervision, at the direction of another provider, as ordered by another provider, or as prescribed by another provider.

3. Legal Interpretation—Nurses: Registered Nurses retain all authority granted to Practical Nurses and Vocational Nurses. Nurses engaging in advanced practice (Advanced Practice, Clinical Nurse Spec., and Nurse Practitioner) retain all authority granted to Registered Nurses, Practical Nurses, and Vocational Nurses.

4. Legal Interpretation—Midwives: Because midwives are not nurses in all states, they are identified as a separate professional category. When midwives are nurses, the following interpretations apply: Midwives who are identified as Registered Nurses retain all authority granted to Practical Nurses and Vocational Nurses. Midwives who engage in advanced practice retain all authority granted to Registered Nurses, Practical Nurses, and Vocational Nurses.

5. Gray box: Provider practices within the state, however the state has no relevant law addressing this element.

MEDICAL ASSISTANT

. . . (b) A physician may direct a certified medical assistant employed in the medical practice in which the physician practices medicine, to administer to the physician's patients an intradermal, intramuscular or subcutaneous injection in the limited circumstances set forth in this section . . . . (c) A physician may direct the administration of an injection by a certified medical assistant only where the following conditions are satisfied: 1. The physician has determined and documented that the certified medical assistant has the qualifications set forth in (a)2 above and has attained a satisfactory level of comprehension and experience in the administration of intramuscular and subcutaneous injection techniques. 2. The physician shall examine the patient to ascertain the nature of the trauma, disease or condition of the patient; to determine the appropriate treatment of the patient including administration of an injection; to assess the risks of such injection for a given patient and the diagnosed injury, disease or condition; and to determine that the anticipated benefits are likely to outweigh those risks. 3. The physician shall determine all components of the precise treatment to be given, including the type of injection to be utilized, dosage, method and area of administration, and any other factors peculiar to the risks, such as avoidance of administration sites on certain parts of the body.
The physician shall assure that this information shall be written on the patient's record and made available at all times to the medical assistant carrying out the treatment instructions, who shall also be identified by name and credentials in the patient record on each occasion that an injection is administered. 4. The physician shall remain on the premises at all times that treatment orders for injections are being carried out by the assistant and shall be within reasonable proximity to the treatment room and available to observe, assess and take any necessary action regarding effectiveness, adverse reaction or any emergency. 5. The certified medical assistant shall wear a clearly visible identification badge indicating his or her name and credentials.


MIDWIFE
A certified nurse midwife may prescribe drugs, as delineated in standing orders and practice protocols developed in agreement between a certified nurse midwife and a collaborative physician. The practice protocols shall be established in accordance with standards adopted by the board. N.J. Stat. 45:10-18 (2012) Prescription of drugs by certified nurse-midwives

NURSES
Advanced Practice
(a) An advanced practice nurse may prescribe or order medication and devices and shall do so in conformity written protocols for the prescription of medications and devices jointly developed by the advanced practice nurse and the collaborating physician.


(b) Advance practice nurses who seek to prescribe or order medications or devices and the collaborating physician(s) with whom they are in collaboration shall develop a joint protocol.

(d) Failure to establish and implement joint protocols consistent with the standards set forth in this section and any violation of the joint protocol by an advanced practice nurse or physician may be deemed professional misconduct or other grounds for disciplinary sanction by his or her respective licensing board.


a. In addition to all other tasks which a registered professional nurse may, by law, perform, an advanced practice nurse may manage preventive care services, and diagnose and manage deviations from wellness and long-term illnesses, consistent with the needs of the patient and within the scope of practice of the advanced practice nurse, by: (2) prescribing or ordering medications. (3) prescribing or ordering treatments, including referrals to other licensed health care professionals.

b. An advanced practice nurse may order medications in the inpatient setting.

c. An advanced practice nurse may prescribe medications in all other medically appropriate settings, subject to the following conditions:

(2) the prescription is written in accordance with standing orders or joint protocols developed in agreement between a collaborating physician and the advanced practice nurse, or pursuant to the specific direction of a physician.

N.J. Stat. 45:11-49 (2012) Authority of nurse practitioner/clinical nurse specialist to perform tasks, order medications or devices, or make prescriptions; standards of joint protocols

Registered Nurse
b. The practice of nursing as a registered professional nurse is defined as diagnosing and treating human responses to actual or potential physical and emotional health problems. Diagnosing in the context of nursing practice means the identification of and discrimination between physical and psychosocial signs and symptoms essential to effective execution and management of the nursing regimen within the scope of practice of the registered professional nurse. Such diagnostic privilege is distinct from a medical diagnosis.

(a) The registered professional nurse is responsible for the . . . assessment of the nursing needs, the plan of nursing care, the implementation, and the monitoring and evaluation of the plan.  


. . . b. To protect the public health during a vaccine shortage, the commissioner shall issue an order to implement a New Jersey Vaccine Education and Prioritization Plan, which shall comprise . . . (2) procedures for the distribution and administration of vaccines that shall apply to physicians, nurses, health care facilities, pharmacies and others that dispense vaccines. The procedures shall include, but not be limited to, a definition of high-risk groups for priority protection or treatment in the event a vaccine shortage is imminent or existent . . . .  

\textit{N.J. Stat. 26:13-23 (2012) New Jersey Vaccine Education and Prioritization Plan; conditions for establishment; “vaccine” defined; penalties for violation}

\textbf{PHARMACIST}

. . . b. Notwithstanding any law, rule or regulation to the contrary, other than for pediatric immunizations, a pharmacist may administer drugs in immunization programs and programs sponsored by governmental agencies that are not patient specific provided the pharmacist is appropriately educated and qualified, as determined by the board in accordance with the requirements set forth in the rules jointly promulgated by the board and the State Board of Medical Examiners.  

\textit{N.J. Stat. 45:14-63 (2012) Medications administered for treatment of disease; nationally certified programs; immunization programs and programs sponsored by government agencies}

(a) A New Jersey licensed physician may participate in an immunization program with a licensed pharmacist . . . provided that the pharmacist is authorized to engage in such activities by the Board of Pharmacy . . . and provided the pharmacist administers vaccines . . . pursuant to: 1. A prescription for the vaccine, related emergency medications, and pharmacist administration of the vaccine that is patient specific; and/or 2. A physician's standing order for the vaccine, related emergency medications above, and administration instructions that are not patient specific.  

(b) A physician shall supervise a licensed pharmacist who is participating in an immunization program implemented pursuant to the physician's standing order . . . .  


(a) The provisions of this section set forth the requirements for licensed pharmacists authorized to administer vaccines and related emergency medications, which shall be limited to diphenhydramine and epinephrine, to eligible patients who are 18 years of age and older . . . under the following circumstances: 1. Pursuant to a prescription by a New Jersey licensed physician for a vaccine, related emergency medications, and pharmacist administration of the vaccine that is patient specific; 2. In immunization programs implemented pursuant to a New Jersey licensed physician's standing order for the vaccine, related emergency medications, and administration instructions that are not patient specific; and/or 3. In immunization programs sponsored by government agencies that are not patient specific.  

(b) In order to administer vaccines and related emergency medications pursuant to this section, a licensed pharmacist shall be pre-approved by the Board . . . .  

(e) A physician's standing order shall specify the procedures that shall be followed for the reporting of adverse events . . . .  

(g) Before administration of a vaccine, the licensed pharmacist shall: 1. Screen the patient using CDC established criteria for each specific vaccine to be administered . . . .  

(m) In the case of immunization programs implemented pursuant to a physician's standing order, a licensed pharmacist shall be supervised by the delegating physician. Supervision by the delegating physician shall be deemed adequate if the delegating physician: 1. Is responsible for formulating or approving a standing order, periodically reviewing the order and the services provided to patients under the order; 2. Is geographically located to be easily accessible to the pharmacy practice site and, if applicable, to the immunization location. 3. Is available through direct telecommunication for consultation, assistance, and direction; and 4. Receives annual status reports on the immunization program as administered by the pharmacist.  

PHYSICIAN ASSISTANT

a. A physician assistant may perform the following procedures: (1) Approaching a patient to elicit a detailed and accurate history, perform an appropriate physical examination, identify problems, record information and interpret and present information to the supervising physician . . . b. A physician assistant may perform the following procedures only when directed, ordered or prescribed by the supervising physician or specified in accordance with protocols promulgated pursuant to subsection c. of section 15 of this act . . . (2) Giving injections, administering medications and requesting diagnostic studies . . . (4) Writing prescriptions or ordering medications in an inpatient or outpatient setting in accordance with section 10 of this act . . .


a. A physician assistant and a temporary licensed physician assistant shall be under the direct supervision of a physician at all times during which the physician assistant or temporary licensed physician assistant is working in his official capacity. b. In an inpatient setting, direct supervision of a physician assistant shall include, but not be limited to . . . (3) personal review by a physician of all charts and records of patients and countersignature by a physician of all medical orders, including prescribing and administering medication, within 24 hours of their entry by the physician assistant. c. In an outpatient setting, direct supervision of a physician assistant shall include, but not be limited to . . . (3) personal review by a physician of the charts and records of patients and countersignature by a physician of all medical orders, within seven days of their entry by the physician assistant, except that in the case of any medical order prescribing or administering medication, a physician shall review and countersign the order within 48 hours of its entry by the physician assistant. . . .


Source: GWU/SPHHS STANDING ORDERS: Health Professionals & Immunization Practice—Summer 2013
### Health Professionals & Immunization Practice

#### Practice Settings

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<th>Health Professional</th>
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<tr>
<td>Medical Assistant</td>
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<tr>
<td>Advanced Practice Nurse</td>
<td>Inpatient setting; other medically appropriate settings; licensed acute care facility; long-term care facility</td>
</tr>
<tr>
<td>Clinical Nurse Specialist</td>
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### Nurses

**Advanced Practice**

- b. An advanced practice nurse may order medications and devices in the inpatient setting.
- c. An advanced practice nurse may prescribe medications and devices in all other medically appropriate settings.  

Authority of nurse practitioner/clinical nurse specialist to perform tasks, order medications or devices, or make prescriptions; standards of joint protocols

- c) An advanced practice nurse who issues prescriptions in any setting other than in a licensed acute care or long-term care facility may issue written prescriptions for medications to patients only on New Jersey Prescription Blanks.  

Prescriptive practice

### Physician Assistant

**a.** A physician assistant may practice in all medical care settings, including, but not limited to, a physician's office, a health care facility, an institution, a veterans' home or a private home, provided that: (1) the physician assistant is under the direct supervision of a physician pursuant to section 9 of this act; (2) the practice of the physician assistant is limited to those procedures authorized under section 7 of this act; (3) an appropriate notice of employment has been filed with the board pursuant to subsection b. of section 5 of this act; (4) the supervising physician or physician assistant advises the patient at the time that services are rendered that they are to be performed by the physician assistant; . . . and (6) any entry by a physician assistant in a clinical record is appropriately signed and followed by the designation, "PA-C."  

Authorized medical care settings for practice; conditions; violation

- b. A physician assistant may perform the following procedures only when directed, ordered or prescribed by the supervising physician or specified in accordance with protocols promulgated.  

Authorized procedures

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Source: GWU/SPHIS STANDING ORDERS: Health Professionals & Immunization Practice—Summer 2013
CITED AUTHORITIES
NEW JERSEY


N.J. Stat. 45:11-49 (2012) Authority of nurse practitioner/clinical nurse specialist to perform tasks, order medications or devices, or make prescriptions; standards of joint protocols


N.J. Stat. 45:14-63 (2012) Medications administered for treatment of disease; nationally certified programs; immunization programs and programs sponsored by government agencies


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