

1 10A NCAC 14E .0101 is amended under temporary procedures with changes as follows:

2
3 **SUBCHAPTER 14E - CERTIFICATIONS OF CLINICS FOR ABORTION LICENSURE OF SUITABLE**
4 **FACILITIES FOR THE PERFORMANCE OF SURGICAL ABORTIONS**

5
6 **SECTION .0100 – CERTIFICATION LICENSURE PROCEDURE**

7
8 **10A NCAC 14E .0101 DEFINITIONS**

9 The following definitions will apply throughout this Subchapter:

- 10 (1) "Abortion" means the termination of a pregnancy as defined in G.S. ~~90-21.81(1)~~, 90-21.81(1c).
- 11 (2) "Clinic" means a freestanding facility ~~(a~~ facility neither physically attached nor operated by a
12 licensed ~~hospital)~~ hospital for the performance of abortions completed during the first ~~20~~ 12 weeks
13 of pregnancy.
- 14 ~~(3) "Complication" includes but is not limited to hemorrhage, infection, uterine perforation, cervical~~
15 ~~laceration, or retained products of conception.~~
- 16 ~~(4)~~(3) "Division" means the Division of Health Service Regulation of the North Carolina Department of
17 Health and Human Services.
- 18 ~~(5)~~(4) "Gestational age" means the length of pregnancy as indicated by the date of the first day of the last
19 normal monthly menstrual period, if known, or as determined by ultrasound.
- 20 ~~(6)~~(5) "Governing authority" means the individual, agency, group, or corporation appointed, elected or
21 otherwise designated, in which the ultimate responsibility and authority for the conduct of the
22 abortion clinic is vested pursuant to Rule ~~.0302~~ .0318 of this Subchapter.
- 23 ~~(7)~~(6) "Health Screening" means an evaluation of an employee or contractual employee, including
24 tuberculosis testing, to identify any underlying conditions that may affect the person's ability to
25 work in the clinic.
- 26 ~~(8)~~(7) "New clinic" means one that is not certified as an abortion clinic by the Division as of July 1, ~~2014,~~
27 2023, and has not been certified or licensed within the previous six months of the application for
28 ~~certification.~~ licensure.
- 29 ~~(9) "Qualified Physician" means a licensed physician who advises, procures, or causes a miscarriage or~~
30 ~~abortion as defined in G.S. 14-45.1(g). [90-21.81(7a).]~~
- 31 ~~(10)~~(8) "Registered Nurse" means a person who holds a valid license issued by the North Carolina Board
32 of Nursing to practice professional nursing in accordance with the Nursing Practice Act, G.S. 90,
33 Article 9A.

34
35 *History Note:* Authority G.S. 14-45.1(a); 14-45.1(g); ~~[143B-10;]~~ [131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14,
36 s. 2.2;] 2.4;
37 *Eff. February 1, 1976;*

1 *Readopted Eff. December 19, 1977;*
2 *Amended Eff. October 1, 2015; July 1, 1994; December 1, 1989; June 30, 1980;*
3 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
4 *2019;*
5 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
6 *22, 2023;*
7 *Emergency Rule Eff. June 30, 2023;*
8 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7.~~ 150B-21.7.*
9 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0104 is amended under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0104 PLANS**

4 Prior to issuance of a ~~certificate~~ license pursuant to Rule .0107 of this Section, ~~a~~ an applicant for a new clinic shall
 5 submit two copies of the building plans to the ~~Division~~ Division. ~~[for] certification [licensure] purposes [purposes of~~
 6 ~~becoming licensed.]when~~ When the clinic requires a review by the Division and the Department of Insurance,
 7 according to the North Carolina ~~Administration and Enforcement Requirements Code, 2012 State Building Code,~~
 8 2018 edition, including subsequent amendments and editions. Copies of the ~~North Carolina Administration~~ Code are
 9 available from the International Code Council at
 10 ~~http://www.ecodes.biz/ecodes-support/Free-Resources/2012NorthCarolina/12NorthCarolina-main.html~~
 11 https://codes.iccsafe.org/content/NCAPC2018/chapter-1-administrative-code at no cost. When the local jurisdiction
 12 has authority from the North Carolina Building Code Council to review the plans, the clinic shall submit only one
 13 copy of the plans to the Division. In that case, the clinic shall submit an additional set of plans directly to the local
 14 jurisdiction.

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16 History Note: Authority G.S. 14-45.1(a); ~~[143B-10;]~~ 131E-153; 131E-153.2; S.L. 2023-14, s. ~~[2.2;]~~ 2.4;
 17 *Eff. February 1, 1976;*
 18 *Readopted Eff. December 19, 1977;*
 19 *Amended Eff. October 1, 2015;*
 20 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
 21 *2019;*
 22 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
 23 *22, 2023;*
 24 *Emergency Rule Eff. June 30, 2023;*
 25 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7.~~ 150B-21.7.*
 26 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0106 is amended under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0106 APPLICATION**

4 (a) Prior to the admission of patients, an application from the applicant for a new clinic for certification [licensure]
5 shall be submitted to and approved by the Division. submit an application for licensure and receive approval from the
6 Division.

7 (b) Application forms may be obtained by contacting the Division at 2712 Mail Service Center Raleigh, NC 27699-
8 2712.

9 (c) The application form shall set forth: the ownership, staffing patterns, clinical services to be rendered, [and]
10 professional staff in charge of services; [services.] and general information that would be helpful to the Division's
11 understanding of the clinic's operating program.

12 (1) Name of applicant;

13 (2) Name of facility;

14 (3) Ownership disclosure;

15 (4) Building owner;

16 (5) Building owner;

17 (6) Building management;

18 (7) Sanitation services;

19 (8) Medical director;

20 (9) Other medical staff;

21 (10) Director of nursing;

22 (11) Other nursing staff; and

23 (12) Consulting pathologist.

24 (d) After construction requirements in Section .0200 of this Subchapter have been met and the application for
25 certification licensure has been received and approved, the Division shall conduct an on-site, certification licensure
26 survey.

27 (e) Each certificate [license] must be renewed at the beginning of each calendar year. The governing authority shall
28 file an application for renewal of certification [licensure] with the Division at least 30 days prior to the date of
29 expiration on forms furnished by the Division. Failure to file a renewal application shall result in expiration of the
30 certificate [license] to operate.

31
32 *History Note: Authority G.S. 14-45.1(a); 131E-153; 131E-153.2; S.L. 2023-14, s. [2.2]; 2.4;*

33 *Eff. February 1, 1976;*

34 *Readopted Eff. December 19, 1977;*

35 *Amended Eff. July 1, 1994;*

36 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
37 *2019;*

1 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
2 *22, 2023;*
3 *Emergency Rule Eff. June 30, 2023;*
4 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7~~. 150B-21.7;*
5 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0107 is amended under temporary procedures with changes as follows:

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10A NCAC 14E .0107 ISSUANCE OF ~~CERTIFICATE~~ LICENSE

(a) The Division shall issue a ~~certificate~~ license if it finds the facility can:

(1) Comply with all requirements described in this Subchapter; and

(2) ~~Assure that, in the event that complications arise from the abortion procedure, an OB-GYN board certified~~ Have a board certified OB-GYN or board eligible physician by the American Board of Obstetrics and Gynecology shall be ~~available.~~ available in the event that complications arise from an abortion procedure.

(b) Each ~~certificate~~ license shall be issued only for the premises and persons or organizations named in the application and shall not be transferable.

(c) The governing authority shall notify the Division in writing, within 10 working days, of any change in the name of the facility or change in the name of the administrator.

(d) The facility shall report to the Division all incidents, within 10 working days, of vandalism to the facility such as fires, ~~explosions~~ explosions, or other action ~~causing disruption of that prevents~~ services ~~from [being provided.]~~ providing abortion services.

History Note: Authority ~~G.S. 14-45.1(a);~~ 131E-153; 131E-153.2; S.L. 2023-14, s. ~~2.2~~; 2.4;

Eff. February 1, 1976;

Readopted Eff. December 19, 1977;

Amended Eff. July 1, 1994;

Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24, 2019;

Codifier determined that agency's findings of need did not meet criteria for emergency rule on June 22, 2023;

Emergency Rule Eff. June 30, 2023;

Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7.~~ 150B-21.7.

Temporary Amendment Eff. October 27, 2023.

1 10A NCAC 14E .0109 is amended under temporary procedures with changes as follows:

3 **10A NCAC 14E .0109 RENEWAL**

4 ~~(a)~~ Each certificate, license, ~~unless previously suspended or revoked, pursuant to the applicable rules and statutes~~
5 ~~shall be renewable annually renewed at the beginning of each calendar year. upon the filing of an application, payment~~
6 ~~of the non refundable renewal fee as defined in G.S. 131E 269, 131E 153.2, and approval by the Division.~~

7 (b) The renewal application form shall set forth:

8 ~~(1) Name of applicant;~~

9 ~~(2) Name of facility;~~

10 ~~(3) Ownership disclosure;~~

11 ~~(4) Building owner;~~

12 ~~(5) Building owner;~~

13 ~~(6) Building management;~~

14 ~~(7) Sanitation services;~~

15 ~~(8) Medical director;~~

16 ~~(9) Other medical staff;~~

17 ~~(10) Director of nursing;~~

18 ~~(11) Other nursing staff;~~

19 ~~(12) Consulting pathologist;~~

20 ~~(13) The number of procedures performed during the reporting period; and~~

21 ~~(14) The number of patients that were transferred to a hospital during a reporting period.~~

22 ~~((b))(c) Upon the filing of a renewal application, the clinic must pay a non-refundable renewal fee as defined in G.S.~~
23 ~~131E-153.2.~~

24 ~~((e))(d) An application for renewal of licensure must be filed with the Division at least 30 days prior to the date of~~
25 ~~expiration. Renewal application forms shall be furnished by the Division.~~

26 ~~((d))(e) Failure to file a renewal application shall result in expiration of the license to operate.~~

27
28 *History Note: Authority G.S. 14-45.1(a); 131E-269; 131E-153; 131E-153.2; 143B-10; S.L. 2023-14, s. 2.2; 2.4;*
29 *Eff. February 1, 1976;*
30 *Readopted Eff. December 19, 1977;*
31 *Amended Eff. October 1, 2015;*
32 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
33 *2019;*
34 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
35 *22, 2023;*
36 *Emergency Rule Eff. June 30, 2023;*
37 *Repealed Eff. July 1, 2023 pursuant to G.S. 150B-21.7. 150B-21.7;*

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Temporary Amendment Eff. October 27, 2023.

1 10A NCAC 14E .0111 is amended under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0111 INSPECTIONS**

4 (a) Any clinic ~~certified~~ licensed by the Division to perform abortions shall be inspected by representatives of the
5 Division annually and as it may deem necessary as a condition of holding such license. An inspection ~~shall~~ may be
6 conducted whenever the Division receives a complaint alleging the clinic is not in compliance with the rules of the
7 Subchapter. purpose of the inspection is to determine whether the clinic complies with the rules of this Subchapter
8 Subchapter. or whenever there is reason to believe that some condition exists which is not in compliance with the rules
9 of this Subchapter.

10 ~~(b) The Division shall have authority to investigate any complaint relative to the care, treatment, or complication of~~
11 ~~any patient.~~

12 ~~(e)(b)~~ (b) Representatives of the Division shall make their identities known to the person in charge- clinic staff prior to
13 inspection of the clinic.

14 ~~(d)(c)~~ (c) Representatives of the Division may review any records in any medium necessary to determine compliance
15 with the rules of this Subchapter, Subchapter. while maintaining The Department shall maintain the confidentiality of
16 the complainant and the patient, unless otherwise required by law.

17 ~~(e)(d)~~ (d) The clinic shall allow the Division to have immediate access to its premises and the records necessary to
18 conduct an inspection and determine compliance with the rules of this Subchapter.

19 ~~(f)(e)~~ (e) A clinic shall file a written plan of correction for cited deficiencies within 10 business days of receipt of the
20 report of the survey. The Division shall review and respond to a written plan of correction within 10 business days of
21 receipt of the corrective action plan.

22
23 *History Note: Authority G.S. 14-45.1(a); 14-45.1(a1); ~~143B-10;~~ 131E-153; 131E-153.6; S.L. 2013-366, s. 4(e);*
24 *S.L. 2023-14, s. ~~2.2;~~ 2.4;*

25 *Eff. February 1, 1976;*

26 *Readopted Eff. December 19, 1977;*

27 *Amended Eff. October 1, 2015; July 1, 1994;*

28 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
29 *2019;*

30 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
31 *22, 2023;*

32 *Emergency Rule Eff. June 30, 2023;*

33 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7;~~ 150B-21.7;*

34 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0112 is amended under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0112 ALTERATIONS**

4 Any ~~certificate~~ license holder or prospective applicant desiring to make ~~specified types of alteration~~ alterations or
5 ~~addition~~ additions to a clinic or to construct a new clinic, before commencing such alteration, addition or new
6 construction shall submit plans and specifications ~~therefor~~ to the Division for preliminary inspection and approval or
7 recommendations with respect to compliance ~~with this Subchapter, the regulations and standards herein authorized.~~

8

9 *History Note:* Authority G.S. 14-45.1(a); ~~143B-10;~~ 131E-153; S.L. 2023-14, s. ~~2-2;~~ 2.4;

10 *Eff. February 1, 1976;*

11 *Readopted Eff. December 19, 1977;*

12 *Amended Eff. December 1, 1989;*

13 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
14 *2019;*

15 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
16 *22, 2023;*

17 *Emergency Rule Eff. June 30, 2023;*

18 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7; 150B-21.7;~~*

19 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0114 is adopted under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0114 APPROVAL**

4 (a) Approval of [~~construction documents and specifications~~] building plans shall be obtained from the Division of
5 Health Service Regulation, in accordance with the rules in Section .0200 of this Subchapter. [~~The construction~~
6 documents and specifications require additional approval from the Department of Health and Human Services,
7 Division of Public Health, Environmental Health Section, and the Department of Insurance.]

8 (b) Approval of [~~construction documents and specifications~~] building plans shall expire one year after the date of
9 approval unless a building permit for the construction has been obtained prior to the expiration date of the approval
10 of ~~construction documents and specifications~~ building plans.

11

12 *History Note:* Authority G.S. [~~143B-10;~~] 131E-153; ~~S.L. 2013-366, s. 4(e);~~ S.L. 2023-14, s. [2.2;]2.4;

13 Emergency Adoption Eff. July 18, 2023. 2023;

14 Temporary Adoption Eff. October 27, 2023.

1 10A NCAC 14E .0201 is amended under temporary procedures with changes as follows:

2
3 **SECTION .0200 - MINIMUM STANDARDS FOR CONSTRUCTION AND EQUIPMENT**

4
5 **10A NCAC 14E .0201 BUILDING CODE REQUIREMENTS**

6 (a) The physical plant for a clinic shall meet or exceed minimum requirements of the North Carolina State Building
7 Code for Group B occupancy (business office facilities) which is incorporated herein by reference including
8 subsequent amendments and editions. Copies of the Code can be obtained from the International Code Council online
9 at <http://shop.iccsafe.org/north-carolina-doi.discounts?ref=NC> for a cost of five hundred twenty-seven dollars
10 (\$527.00) or accessed electronically free of charge at <http://www.ecodes.biz>.

11 <https://codes.iccsafe.org/content/NCAPC2018/chapter-1-administrative-code>.

12 (b) The requirements contained in this Section shall apply to new clinics and to any alterations, repairs, rehabilitation
13 work, or additions which are made to a previously ~~certified~~ licensed facility.

14
15 *History Note: Authority G.S. 14-45.1(a); ~~143B-10;~~ 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~2.2;~~ 2.4;*
16 *Eff. February 1, 1976;*
17 *Readopted Eff. December 19, 1977;*
18 *Amended Eff. October 1, 2015; July 1, 1994; December 1, 1989;*
19 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
20 *2019;*
21 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
22 *22, 2023;*
23 *Emergency Rule Eff. June 30, 2023;*
24 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7.~~ 150B-21.7;*
25 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0202 is amended under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0202 SANITATION**

4 Clinics that are ~~certified~~ licensed by the Division to perform abortions shall comply with the Rules governing the
5 sanitation of hospitals, nursing homes, adult care homes, and other institutions, contained in 15A NCAC 18A .1300
6 which is hereby incorporated by reference including subsequent amendments and editions. Copies of 15A NCAC 18A
7 .1300 may be obtained at no charge from the Division of Public Health, Environmental Health Section, 1632 Mail
8 Service Center, Raleigh, NC 27699-1632, or accessed electronically free of charge from the Office of Administrative
9 Hearings at ~~<https://www.oah.nc.gov/>~~ <https://reports.oah.state.nc.us/ncac.asp>.

10

11 *History Note:* Authority *G.S. 14-45.1(a); ~~143B-10;~~ 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~2.2;~~ 2.4;*
12 *Eff. February 1, 1976;*
13 *Readopted Eff. December 19, 1977;*
14 *Amended Eff. August 1, 2019; October 1, 2015; July 1, 1994;*
15 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
16 *2019;*
17 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
18 *22, 2023;*
19 *Emergency Rule Eff. June 30, 2023;*
20 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7; 150B-21.7;~~*
21 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0207 is amended under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0207 AREA REQUIREMENTS**

4 The following areas shall comply with Rule .0206 .0212 of this Section, and are considered minimum requirements
5 for clinics that are ~~certified~~ licensed by the Division to perform abortions:

- 6 (1) receiving area;
- 7 (2) examining room;
- 8 (3) preoperative preparation and holding room;
- 9 (4) individual patient locker facilities or equivalent;
- 10 (5) procedure room;
- 11 (6) recovery room;
- 12 (7) clean workroom;
- 13 (8) soiled workroom;
- 14 (9) a clean area for medicine room may be defined as area in the clean workroom if a self-contained
15 secure ~~cabinet~~ medication storage complying with security requirements of state and federal laws
16 is provided;
- 17 (10) separate and distinct areas for storage and handling of clean and soiled linen;
- 18 (11) patient toilet;
- 19 (12) personnel lockers and toilet facilities;
- 20 (13) laboratory;
- 21 (14) nourishment station with storage and preparation area for serving meals or in-between meal snacks;
- 22 (15) janitor's closets;
- 23 (16) adequate space and equipment for assembling, sterilizing and storing medical and surgical supplies;
- 24 (17) storage space for medical records; and
- 25 (18) office space for nurses' charting, doctors' charting, communications, counseling, and business
26 functions.

27

28 *History Note: Authority G.S. ~~14-45.1(a)~~; 143B-10; 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. 2.2; 2.4*
29 *Eff. February 1, 1976;*
30 *Readopted Eff. December 19, 1977;*
31 *Amended Eff. October 1, 2015; December 24, 1979;*
32 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
33 *2019;*
34 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
35 *22, 2023;*
36 *Emergency Rule Eff. June 30, 2023;*
37 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7~~. 150B-21.7;*

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Temporary Amendment Eff. October 27, 2023.

1 10A NCAC 14E .0209 is adopted under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0209 ELEVATOR**

4 (a) In multi-story buildings, [the clinic shall provide] at least one elevator for patient ~~use shall be provided.~~ use.

5 (b) At least one dimension of the elevator cab shall be six and one-half feet to accommodate stretcher patients.

6 (c) The elevator door shall have an opening of no less than three feet in width, which is minimum for stretcher use.

7

8 *History Note:* Authority G.S. ~~[143B-10;]~~ [131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~2.2;~~ 2.4;

9 Emergency Adoption Eff. July 18, 2023. 2023;

10 Temporary Adoption Eff. October 27, 2023.

1 10A NCAC 14E .0210 is adopted under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0210 CORRIDORS**

4 The width of [patient use] corridors shall be [no] sufficient to allow for patient evacuation by stretcher, but in no case
5 shall patient use corridors be less than 60 inches.

6

7 *History Note: Authority [~~143B-10;~~ 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~2.2;~~ 2.4;*

8 *Emergency Adoption Eff. July 18, ~~2023;~~ 2023;*

9 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0211 is adopted under temporary procedures with changes as follows:

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3 **10A NCAC 14E .0211 DOORS**

4 Minimum width of doors to all rooms needing access for stretchers shall be three feet. No door shall swing into
5 corridors in a manner that might obstruct traffic flow or reduce the required corridor width except doors to spaces ~~such~~
6 as small closets not subject to occupancy.

7

8 *History Note:* Authority [~~143B-10;~~] 131E-153; ~~S.L. 2013-366, s. 4(e);~~ S.L. 2023-14, s. [2.2;]2.4;

9 Emergency Adoption Eff. July 18, 2023. 2023;

10 Temporary Adoption Eff. October 27, 2023.

1 10A NCAC 14E .0212 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0212 ELEMENTS AND EQUIPMENT**

4 The physical plant shall provide equipment to carry out the functions of the clinic with the following minimum
5 requirements:

6 (1) Mechanical requirements.

7 (a) Temperatures and humidities:

8 (i) The mechanical systems shall be designed to provide the temperature and
9 humidities shown in this Sub-Item:

<u>Area</u>	<u>Temperature</u>	<u>Relative Humidity</u>
<u>Procedure</u>	<u>70-76 degrees F.</u>	<u>50-60%</u>
<u>Recovery</u>	<u>75-80 degrees F.</u>	<u>30-60%</u>

13 (b) All air supply and exhaust systems for the procedure suite and recovery area shall be
14 mechanically operated. All fans serving exhaust systems shall be located at the discharge
15 end of the system. The ventilation rates shown herein shall be considered as minimum
16 acceptable rates.

17 (i) The ventilation system shall be designed and balanced to provide the pressure
18 relationships detailed in Sub-Item (b)(vii) of this Rule.

19 (ii) All air supplied to procedure rooms shall be delivered at or near the ceiling of the
20 room and all exhaust or return from the area shall be removed near the floor level
21 at not less than three inches above the floor.

22 (iii) Corridors shall not be used to supply air to or exhaust air from any procedure or
23 recovery room except to maintain required pressure relationships.

24 (iv) All ventilation or air conditioning systems serving procedure rooms shall have a
25 minimum of one filter bed with a minimum filter efficiency of 80 percent.

26 (v) Ventilation systems serving the procedure or recovery rooms shall not be tied in
27 with the soiled holding or work rooms, janitors' ~~closets~~ closets, or locker rooms
28 if the air is to be recirculated in any manner.

29 (vi) Air handling duct systems shall not have duct linings.

30 (vii) The following general air pressure relationships to adjacent areas and ventilation
31 rates shall apply:

<u>Area</u>	<u>Pressure Relationship</u>	<u>Minimum Air</u> <u>Changes/Hour</u>
<u>Procedure</u>	<u>P</u>	<u>6</u>
<u>Recovery</u>	<u>P</u>	<u>6</u>
<u>Soiled work,</u> <u>Janitor's closet,</u>		

1 (c) Receptacles located within six feet of sinks or lavatories shall be ground-fault protected.

2 (d) At least one wired-in, ionization-type smoke detector shall be within 15 feet of each
3 procedure or recovery room entrance.

4 (4) Buildings systems and medical equipment shall have preventative maintenance conducted as
5 recommended by the equipment manufacturers' or installers' literature to assure operation in
6 compliance with manufacturer's instructions.

7
8 *History Note: Authority G.S. ~~[143B-10;]~~ 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~[2.2;]~~ 2.4;*

9 *Emergency Adoption Eff. July 18, 2023. 2023;*

10 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0315 is amended under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0315 HOUSEKEEPING**

4 In addition to the standards set forth in Rule .0202 of this Subchapter, Clinics clinics that are certified licensed by the
5 Division to perform abortions shall meet the following standards: ~~for sanitation as required by the Division of Public~~
6 ~~Health, Environmental Health Section, in the rules and regulations governing the sanitation of hospitals, nursing~~
7 ~~homes, adult care homes, and other institutions, set forth in 15A NCAC 18A .1300, including subsequent amendments~~
8 ~~and editions, with special emphasis on the following:~~

- 9 (1) the floors, walls, ~~woodwork~~ woodwork, and windows must be cleaned, ~~and accumulated waste~~
10 ~~material must be removed~~ cleaned at least daily;
- 11 (2) the premises must be kept free from rodents and insect infestation;
- 12 (3) bath and toilet facilities must be maintained in a clean and sanitary condition ~~at all times; and~~
13 consistent with 15A NCAC 18A .1312; and
- 14 (4) linen that comes directly in contact with the patient shall be provided for each individual patient.
15 No such linen shall be interchangeable from one patient to another before being cleaned, sterilized,
16 or laundered.

17 Copies of 15A NCAC 18A .1300 may be obtained at no charge from the Division of Public Health, Environmental
18 Health Section, 1632 Mail Service Center, Raleigh, NC, 27699-1632, or accessed electronically free of charge from
19 the Office of Administrative Hearings at <https://www.oah.nc.gov/>.

20
21 *History Note: Authority G.S. 14-45.1(a); ~~[143B-10;]~~ 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~[2.2;]~~ 2.4;*
22 *Eff. February 1, 1976;*
23 *Readopted Eff. December 19, 1977;*
24 *Amended Eff. August 1, 2019; October 1, 2015; December 1, 1989;*
25 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. August 24,*
26 *2019;*
27 *Codifier determined that agency's findings of need did not meet criteria for emergency rule on June*
28 *22, 2023;*
29 *Emergency Rule Eff. June 30, 2023;*
30 *Repealed Eff. July 1, 2023 pursuant to G.S. ~~150B-21.7.~~ 150B-21.7.*
31 *Temporary Amendment Eff. October 27, 2023.*

1 10A NCAC 14E .0318 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0318 GOVERNING AUTHORITY**

4 (a) The governing authority, as defined in Rule .0101(6) of this Subchapter, shall appoint a chief executive officer or
5 a designee of the clinic to represent the governing authority and shall define his or her authority and duties in writing.
6 This person shall be responsible for the management of the clinic, implementation of the policies of the governing
7 authority and authorized and empowered to carry out the provisions of these Rules.

8 (b) The chief executive officer or designee shall designate, in writing, a person to act on his or her behalf during his
9 or her absence. In the absence of the chief executive officer or designee, the person on the grounds of the clinic who
10 is designated by the chief executive officer or designee to be in charge of the clinic shall have access to all areas in
11 the clinic related to patient care and to the operation of the physical plant.

12 (c) When there is a planned change in ownership or in the chief executive officer, the governing authority of the clinic
13 shall notify the Division in writing of the change.

14 (d) The clinic's governing authority shall adopt operating policies and procedures that shall:

15 (1) specify the individual to whom responsibility for operation and maintenance of the clinic is
16 delegated and methods established by the governing authority for holding such individuals
17 responsible;

18 (2) provide for at least annual meetings of the governing authority, for which minutes shall be
19 maintained; and

20 (3) maintain a policies and procedures manual designed to ensure ~~professional and safe~~ safe and
21 adequate care for the patients which shall be reviewed, and revised when necessary, at least
22 annually, and shall include provisions for administration and use of the clinic, compliance, personnel
23 quality assurance, procurement of outside services and consultations, patient care policies, and
24 services offered.

25 (e) When the clinic contracts with outside vendors to provide services such as ~~laundry,~~ laundry or therapy services,
26 the governing authority shall be responsible to assure the supplier meets the same local and ~~state~~ State standards the
27 clinic would have to meet if it were providing those services itself using its own staff.

28 (f) The governing authority shall provide for the selection and appointment of the professional staff and the granting
29 of clinical privileges and shall be responsible for the professional conduct of these persons.

30 (g) The governing authority shall be responsible for ensuring the availability of supporting personnel to meet patient
31 needs and to provide safe ~~patient care,~~ and adequate treatment.

32
33 *History Note:* Authority G.S. ~~143B-10;~~ 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~2.2;~~ 2.4;
34 *Emergency Adoption Eff. July 18, 2023- 2023;*
35 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0319 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0319 POLICIES AND PROCEDURES AND ADMINISTRATIVE RECORDS**

4 (a) The following essential documents and references shall be on file in the administrative office of the clinic:

- 5 (1) documents evidencing control and ownerships, such as deeds, leases, or incorporation or partnership
6 papers;
7 (2) policies and procedures of the governing authority, as required by Rule .0318 of this Section;
8 (3) minutes of the governing authority meetings;
9 (4) minutes of the clinic's professional and administrative staff meetings;
10 (5) a current copy of the rules of this Subchapter;
11 (6) reports of inspections, reviews, and corrective actions taken related to licensure; and
12 (7) contracts and agreements related to [licensure] care and services [to which] provided by the clinic
13 is a party.

14 (b) All operating licenses, permits, and certificates shall be displayed on the licensed premises.

15 (c) The governing authority shall prepare a manual of clinic policies and procedures for use by employees, medical
16 staff, and contractual physicians to assist them in understanding their responsibilities within the organizational
17 framework of the clinic. These shall include:

- 18 (1) patient selection and exclusion criteria; ~~and clinical discharge criteria;~~
19 (2) clinical discharge criteria;
20 ~~(2)~~ (3) policy and procedure for validating the full and true name of the patient;
21 ~~(3)~~(4) policy and procedure for [each type of] abortion [procedure] procedures performed at the clinic;
22 ~~(4)~~(5) policy and procedure for the provision of patient privacy in the recovery area of the clinic;
23 ~~(5)~~(6) protocol for determining gestational age as defined in Rule .0101(5) of this Subchapter;
24 ~~(6)~~(7) protocol for referral of patients for whom services have been declined; and
25 ~~(7)~~(8) protocol for discharge instructions that informs patients who to contact for post-procedural problems
26 and questions.

27
28 *History Note: Authority G.S. ~~[143B-10; 131E-153]; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~2.2;~~2.4;~~*
29 *Emergency Adoption Eff. July 18, 2023. 2023;*
30 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0320 is adopted under temporary procedures with changes as follows:

2

3 **10A NCAC 14E .0320 ADMISSION AND DISCHARGE**

4 (a) There shall be on the premises throughout all hours of operation an employee authorized to receive patients and
 5 [to] make administrative decisions [on their disposition.] regarding patients.

6 (b) All patients shall be admitted only under the care of a physician who is currently licensed to practice medicine in
 7 North Carolina.

8 (c) Any patient not discharged within 12 hours following the abortion procedure shall be transferred to a [general
 9 hospital.] hospital licensed pursuant to Chapter 131E, Article 5 of the General Statutes.

10 (d) Following admission and prior to obtaining the consent for the procedure, representatives of the clinic's
 11 management shall provide to each patient the following information:

- 12 (1) a fee schedule and any extra charges routinely applied;
 13 (2) the name of the attending [physician(s)] physician or physicians and hospital admitting privileges,
 14 if any. In the absence of admitting privileges a statement to that effect shall be included;
 15 (3) instructions for post-procedure problems and questions as outlined in Rule .0329(d) of this Section;
 16 (4) grievance procedures a patient may follow if dissatisfied with the care and services rendered; and
 17 (5) the telephone number for Complaint Intake of the Division.

18

19 *History Note: Authority G.S. [~~143B-10;~~131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. [~~2-2;~~2.4;*
 20 *Emergency Adoption Eff. July 18, 2023; 2023;*
 21 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0321 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0321 MEDICAL RECORDS**

4 (a) The clinic shall maintain ~~[A]~~ a complete and permanent record ~~[shall be maintained]~~ for all patients including:

- 5 (1) the date and time of admission and discharge;
- 6 (2) the patient's full and true name;
- 7 (3) the patient's address;
- 8 (4) the patient's date of birth;
- 9 (5) the patient's emergency contact information;
- 10 (6) the patient's diagnoses;
- 11 (7) the patient's duration of pregnancy;
- 12 (8) the patient's condition on admission and discharge;
- 13 (9) a voluntarily-signed consent for each surgery or procedure and signature of the physician performing
14 the procedure witnessed by a family member, other patient representative, or facility staff member;
- 15 (10) the patient's history and physical examination including identification of pre-existing or current
16 illnesses, drug sensitivities or other idiosyncrasies ~~[having a bearing on]~~ that may impact the
17 procedure or anesthetic to be administered; and
- 18 (11) documentation that indicates all items listed in Rule .0320(d) of this Section were provided to the
19 patient.

20 (b) ~~The clinic shall record and authenticate by signature, date, and time [All]~~ all other pertinent information such as
21 pre- and post-procedure instructions, laboratory ~~[report,]~~ reports, drugs administered, report of abortion procedure,
22 and follow-up instruction, including family planning ~~[advice, shall be recorded and authenticated by signature, date,~~
23 and time.] advice.

24 (c) If Rh is negative, the clinic shall explain the significance ~~[shall be explained]~~ to the patient and ~~[so recorded,]~~ and
25 shall record the explanation. The patient in writing may reject Rh immunoglobulin. A written record of the patient's
26 decision shall be a permanent part of her medical record.

27 (d) An ultrasound examination shall be performed by a technician qualified in ultrasonography and the results,
28 including gestational age, placed in the patient's medical record for any patient who is scheduled for an abortion
29 procedure.

30 (e) The clinic shall maintain a daily procedure log of all patients receiving abortion services. This log shall contain at
31 least the following:

- 32 (1) the patient name;
- 33 (2) the estimated length of gestation;
- 34 (3) the type of procedure;
- 35 (4) the name of ~~the~~ physician;
- 36 (5) the name of ~~the~~ Registered Nurse on duty; and
- 37 (6) the date and time of procedure.

1 (f) Medical records shall be the property of the clinic and shall be preserved or retained in the State of North Carolina
2 for a period of not less than 10 years from the date of the most recent discharge, unless the client is a minor, in which
3 case the record must be retained until three years after the client's 18th birthday, regardless of change of clinic
4 ownership or administration. Such medical records shall be made available to the Division upon request and shall not
5 be removed from the premises where they are retained except by subpoena or court order.

6 (g) The clinic shall have a written plan for destruction of medical records to identify information to be retained and
7 the manner of destruction to ensure confidentiality of all material.

8 (h) Should a clinic cease operation, ~~arrangements shall be made~~ the clinic shall arrange for preservation of records
9 for at least 10 years. The clinic shall send written notification to the Division of these arrangements.

10
11 *History Note: Authority G.S. ~~[143B-10]; [131E-153]; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. [2-2]; 12.4;~~*
12 *Emergency Adoption Eff. July 18, ~~2023~~ 2023;*
13 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0322 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0322 PERSONNEL RECORDS**

4 (a) Personnel Records:

5 (1) A record of each employee shall be maintained that includes the following:

6 (A) the employee's identification;

7 (B) the application for employment that includes education, training, experience and
8 references;

9 (C) a resume of education and work experience;

10 (D) [verification of] a copy of a valid license (if required), education, training, and prior
11 employment experience; and

12 (E) [verification] a list of references.

13 (2) Personnel records shall be confidential.

14 (3) [Notwithstanding the requirement found in Subparagraph (b)(2) of this Rule, representatives]
15 Representatives of the Division conducting an inspection of the clinic shall have the right to inspect
16 personnel records.

17 (b) Job Descriptions:

18 (1) The clinic shall have a written description that describes the duties of every position.

19 (2) Each job description shall include position title, authority, specific responsibilities, and minimum
20 qualifications. Qualifications shall include education, training, experience, special abilities, and
21 valid license or certification required.

22 (3) The clinic shall review annually and, if needed, update all job descriptions. The clinic shall provide
23 the updated job description to each employee or contractual employee assigned to the position.

24 (c) All persons having direct responsibility for patient care shall be at least 18 years of age.

25 (d) The clinic shall provide an orientation program to familiarize each new employee or contractual employee with
26 the clinic, its policies, and the employee's job responsibilities.

27 (e) The governing authority shall be responsible for implementing health standards for employees, as well as
28 contractual employees, which are consistent with recognized professional practices for the prevention and
29 transmission of communicable diseases.

30 (f) Employee and contractual employee records for health screening as defined in Rule .0101(7) of this Subchapter,
31 education, training, and verification of professional certification shall be available for review by the Division.

32
33 *History Note:* Authority G.S. ~~[143B-10; 131E-153]~~; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~[2.2; 2.4]~~;
34 *Emergency Adoption Eff. July 18, 2023- 2023;*
35 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0323 is adopted under temporary procedures with changes as follows:

2

3 **10A NCAC 14E .0323 NURSING SERVICE**

4 (a) The clinic shall have an organized nursing staff under the supervision of a nursing supervisor who is currently
5 licensed as a Registered Nurse and who has responsibility [and accountability] for all nursing services.

6 (b) The nursing supervisor shall report [be responsible and accountable] to the chief executive officer or designee
7 [for:] and shall be responsible for:

8 (1) provision of nursing services to patients; and

9 (2) developing a nursing policy and procedure manual and written job descriptions for nursing
10 personnel.

11 (c) The clinic shall have the number of licensed and ancillary nursing personnel on duty to assure that staffing levels
12 meet the total nursing needs of patients based on the number of patients in the clinic and their individual nursing care
13 needs.

14 (d) There shall be at least one Registered Nurse with experience in post-operative or post-partum care who is currently
15 licensed to practice professional nursing in North Carolina on duty in the clinic at all times patients are in the clinic.

16

17 *History Note:* Authority G.S. [~~143B-10;~~ 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~2.2;~~ 2.4;

18 *Emergency Adoption Eff. July 18, 2023. 2023;*

19 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0324 is adopted under temporary procedures with changes as follows:

2

3 **10A NCAC 14E .0324 QUALITY ASSURANCE**

4 (a) The governing authority shall establish a quality assurance program for the purpose of providing standards of care
 5 for the clinic. The program shall include the establishment of a committee that shall evaluate compliance with clinic
 6 procedures and policies.

7 (b) The committee shall determine corrective action, if ~~necessary,~~ necessary to achieve and maintain compliance
 8 with clinic procedures and policies.

9 (c) The committee shall consist of at least one physician who is not an owner, the chief executive officer or designee,
 10 and other health professionals. The committee shall meet at least once per quarter.

11 (d) The functions of the committee shall include development of policies for selection of patients, approval for
 12 adoption of policies, review of credentials for staff privileges, peer review, tissue inspection, establishment of infection
 13 control procedures, and approval of additional procedures to be performed in the clinic.

14 (e) Records shall be kept of the activities of the committee for a period not less than 10 years. These records shall
 15 include:

16 (1) reports made to the governing authority;

17 (2) minutes of committee meetings including date, time, persons attending, description and results of
 18 cases reviewed, and recommendations made by the committee; and

19 (3) information on any corrective action taken.

20 (f) The clinic shall conduct ~~[Orientation,] orientation,~~ training, or education programs ~~[shall be conducted]~~ to correct
 21 deficiencies that are uncovered as a result of the quality assurance program.

22

23 *History Note: Authority G.S. ~~[143B-10,]131E-153;~~ S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~[2.2,]2.4;~~*

24 *Emergency Adoption Eff. July 18, 2023; 2023;*

25 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0325 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0325 LABORATORY SERVICES**

4 (a) Each clinic shall have the capability to provide or obtain laboratory tests required in connection with the procedure
5 to be performed.

6 (b) The governing authority shall establish written policies regarding which surgical specimens require ~~[requiring]~~
7 examination by a ~~[pathologist of all surgical specimens except for those types of specimens that the governing~~
8 ~~authority has determined do not require examination.]~~ pathologist.

9 (c) Each patient shall have the following performed and a record of the results placed in the patient's medical record
10 prior to the abortion:

11 (1) pregnancy testing, except when a positive diagnosis of pregnancy has been established by
12 ultrasound;

13 (2) anemia testing (hemoglobin or hematocrit); and

14 (3) Rh factor testing.

15 (d) Patients requiring the administration of blood shall be transferred to a local hospital having blood bank facilities.

16 (e) The clinic shall maintain a manual in a location accessible by employees, that includes the procedures, instructions,
17 and manufacturer's instructions for each test procedure performed, including:

18 (1) sources of reagents, standard and calibration procedures, and quality control procedures; and

19 (2) information concerning the basis for the listed "normal" ranges.

20 (f) The clinic shall perform and document, at least quarterly, calibration of equipment and validation of test results.

21
22 *History Note: Authority G.S. ~~[143B-10;]~~[131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~[2.2;]~~2.4;*
23 *Emergency Adoption Eff. July 18, ~~2023.~~ 2023;*
24 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0326 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0326 EMERGENCY BACK-UP SERVICES**

4 (a) Each clinic shall have a written plan for the transfer of emergency cases from the clinic to [a nearby] the closest
5 hospital when hospitalization becomes necessary. Emergency case is defined as a condition manifesting itself by acute
6 symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could
7 reasonably be expected to result in placing the individual's health in serious jeopardy, serious impairment to bodily
8 functions, or serious dysfunction of bodily organs.

9 (b) The clinic shall have written protocols, [procedures], personnel, and [suitable] equipment to handle medical
10 emergencies as defined above which may arise in connection with services provided by the clinic.

11 (c) The clinic shall have a written agreement between the clinic and a hospital to facilitate the transfer of patients who
12 are in need of emergency care. A clinic that has documentation of its efforts to establish such a transfer agreement
13 with a hospital that provides emergency services and has been unable to secure such an agreement shall be considered
14 to be in compliance with this Rule.

15 (d) The clinic shall provide intervention for emergency situations. These provisions shall include:

16 (1) basic cardio-pulmonary life support;

17 (2) emergency protocols for:

18 (A) administration of intravenous fluids;

19 (B) establishing and maintaining airway support;

20 (C) oxygen administration;

21 (D) utilizing a bag-valve-mask resuscitator with oxygen reservoir;

22 (E) utilizing a suction machine; and

23 (F) utilizing an automated external defibrillator;

24 (3) emergency lighting available in the procedure room as set forth in Rule .0212 of this Subchapter;

25 and

26 (4) ultrasound equipment.

27
28 *History Note: Authority G.S. [143B-10; 131E-153]; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. [2.2; 2.4];*
29 *Emergency Adoption Eff. July 18, 2023. 2023;*
30 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0327 is adopted under temporary procedures with changes as follows:

2
3 **10A NCAC 14E .0327 SURGICAL SERVICES**

4 (a) The procedure room shall be maintained exclusively for surgical procedures and shall be so designed and
5 maintained to provide an environment [atmosphere] free of contamination [by pathogenic organisms.] The clinic shall
6 establish procedures for infection control and universal precautions.

7 (b) Tissue Examination:

8 (1) The physician performing the abortion is responsible for examination of all products of conception
9 (P.O.C.) prior to patient discharge. Such examination shall note specifically the presence or absence
10 of chorionic villi and fetal parts, or the amniotic sac. The results of the examination shall be recorded
11 in the patient's medical record.

12 (2) If adequate tissue is not obtained based on the gestational age, the physician performing the
13 procedure shall evaluate for ectopic [pregnaney] pregnancy, or an incomplete [procedure shall be
14 considered and evaluated by the physician performing the]-procedure.

15 (3) The clinic shall establish procedures for obtaining, identifying, storing, and transporting specimens.

16
17 *History Note:* Authority G.S. [~~143B-10;~~131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. [2.2;]2.4;
18 Emergency Adoption Eff. July 18, 2023; 2023;
19 Temporary Adoption Eff. October 27, 2023.

1 10A NCAC 14E .0328 is adopted under temporary procedures with changes as follows:

2

3 **10A NCAC 14E .0328 MEDICATIONS AND ANESTHESIA**

4 (a) No medication or treatment shall be given except on written order of a physician.

5 (b) Any medications shall be administered by a physician or Registered Nurse [licensed in accordance with G.S. 90-
6 171.30 or G.S. 90-171.32 and must] and shall be recorded in the patient's permanent record.

7 (c) The anesthesia shall be administered only under the direct supervision of a licensed physician. Direct supervision
8 means the physician must be present in the clinic and immediately available to furnish assistance and direction
9 throughout the administration of the anesthesia. It does not mean the physician must be present in the room when the
10 anesthesia is administered.

11

12 *History Note: Authority G.S. [~~143B-10;~~131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. [~~2.2;~~2.4;*

13 *Emergency Adoption Eff. July 18, 2023. 2023;*

14 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0329 is adopted under temporary procedures with changes as follows:

2

3 **10A NCAC 14E .0329 POST-OPERATIVE CARE**

4 (a) A patient whose pregnancy is terminated ~~on an ambulatory basis~~ shall be observed in the clinic to ensure that no
 5 post-operative complications are present. Thereafter, patients may be discharged according to a physician's order and
 6 the clinic's protocols.

7 (b) Any patient having ~~an adverse condition or~~ a complication known or suspected to have occurred during or after
 8 the performance of the abortion shall be transferred to a hospital for evaluation or admission.

9 (c) The following criteria shall be documented prior to discharge:

10 (1) the patient shall be ~~ambulatory~~ able to move independently with a stable blood pressure and pulse;
 11 and

12 (2) bleeding and pain ~~shall be controlled,~~ are assessed to be stable and not a concern for discharge.

13 (d) Written instructions shall be issued to all patients in accordance with the orders of the physician in charge of the
 14 abortion procedure and shall include the following:

15 (1) symptoms and complications to be looked for; and

16 (2) a dedicated telephone number to be used by the patients should any complication occur or question
 17 arise. This number shall be answered by a person 24 hours a day, seven days a week.

18 (e) The clinic shall have a defined protocol for triaging post-operative calls and complications. This protocol shall
 19 establish a pathway for physician contact to ensure ongoing care of complications that the operating physician is
 20 incapable of managing.

21

22 *History Note: Authority G.S. ~~[143B-10;]~~[131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. ~~[2.2;]~~2.4;*

23 *Emergency Adoption Eff. July 18, 2023; 2023;*

24 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0330 is adopted under temporary procedures with changes as follows:

2

3 **10A NCAC 14E .0330 CLEANING OF MATERIALS AND EQUIPMENT**

4 (a) All supplies and equipment used in patient care shall be ~~properly~~ cleaned or sterilized between use for different
5 patients.

6 (b) Methods of cleaning, handling, and storing all supplies and equipment shall be such as to prevent the transmission
7 of infection through their ~~use.~~ use as determined by the clinic through their governing authority.

8

9 *History Note:* Authority G.S. ~~[143B-10; 131E-153; S.L. 2013-366, s. 4(e); S.L. 2023-14, s. 2.2; 2.4;~~

10 *Emergency Adoption Eff. July 18, 2023. 2023;*

11 *Temporary Adoption Eff. October 27, 2023.*

1 10A NCAC 14E .0331 is adopted under temporary procedures as follows:

2

3 **10A NCAC 14E .0331 FOOD SERVICE**

4 Nourishments, such as crackers and soft drinks, shall be available and offered to all patients.

5

6 *History Note: Authority G.S. 143B-10; S.L. 2023-14, s. 2.4;*

7 *Emergency Adoption Eff. July 18, ~~2023~~, 2023;*

8 *Temporary Adoption Eff. October 27, 2023.*