

21 NCAC 36 .0806 is amended, **with changes**, as published in NCR 31:09, pages 834-835, as follows:

**21 NCAC 36 .0806 ANNUAL RENEWAL**

(a) Each registered nurse who is approved to practice as a nurse practitioner in this **state State** shall annually renew each approval to practice with the Board of Nursing no later than the last day of the nurse practitioner's birth month by:

(1) Maintaining current RN licensure;

(2) Maintaining certification as a nurse practitioner by a national credentialing body identified in **[21**

**NCAC 36 .0801(8);] Rule .0801(8) of this Section:**

~~(2)~~(3) Submitting the fee required in Rule .0813 of this Section; and

~~(3)~~(4) Completing the renewal application.

(b) If the nurse practitioner has not renewed by the last day of her or his birth month, the approval to practice as a nurse practitioner shall lapse.

*History Note:* Authority G.S. 90-8.1; **90-8.2; 90-8.2; 90-18(14); 90-18(c)(14); 90-171.23(b); 90-171.23(b)(14);** 90-171.83;

*Recodified from 21 NCAC 36.0227(e) Eff. August 1, 2004;*

*Amended Eff. March 1, 2017; December 1, 2009; November 1, 2008; August 1, 2004.*

21 NCAC 36 .0807 is amended, **with changes**, as published in NCR 31:09, pages 834-835, as follows:

**21 NCAC 36 .0807 CONTINUING EDUCATION (CE)**

In order to maintain nurse practitioner approval to practice, the nurse practitioner shall earn 50 contact hours of continuing education each year beginning with the first renewal after initial approval to practice has been granted. At least 20 hours of the required 50 hours must be those hours for which approval has been granted by the American Nurses Credentialing Center (ANCC) or Accreditation Council on Continuing Medical Education (ACCME), other national credentialing **bodies bodies**, or practice relevant courses in an institution of higher learning. Every nurse practitioner who prescribes controlled substances shall complete at least one hour of the total required continuing education (CE) hours annually consisting of CE designed specifically to address controlled substance prescribing practices, signs of the abuse or misuse of controlled substances, and controlled substance prescribing for chronic pain management. Documentation shall be maintained by the nurse practitioner for the previous five calendar years and made available upon request to either Board.

*History Note:* Authority G.S. 90-5.1; 90-8.1; 90-8.2; 90-14(a)(15); 90-18(14); 90-18(c)(14); 90-171.23(b)(14); 90-171.42; **2015 Session Law 12F; S.L. 2015-241, s 12F;**

*Recodified from 21 NCAC 36 .0227(f) Eff. August 1, 2004;*

*Amended Eff. March 1, 2017; December 1, 2009; April 1, 2008; August 1, 2004.*

21 NCAC 36 .0809 is amended, with changes, as published in NCR 31:09, pages 834-836, as follows:

**21 NCAC 36 .0809            PRESCRIBING AUTHORITY**

(a) The prescribing stipulations contained in this Rule apply to writing prescriptions and ordering the administration of medications.

(b) Prescribing and dispensing stipulations are as follows:

(1) Drugs and devices that may be prescribed by the nurse practitioner in each practice site shall be included in the collaborative practice agreement as outlined in Rule .0810(b) Rule .0810(2) of this Section.

(2) Controlled Substances (Schedules II, IIN, III, IIIN, IV, V) defined by the State and Federal Controlled Substances Acts may be procured, prescribed prescribed, or ordered as established in the collaborative practice agreement, providing all of the following requirements are met:

(A) the nurse practitioner has an assigned DEA number which that is entered on each prescription for a controlled substance;

(B) ~~dosage units for schedules II, IIN, III, and IIIN are limited to a 30 day supply;~~ [Refills] refills may be issued consistent with Controlled Substance [Law and Regulation:] laws and regulations; and

(C) the supervising physician(s) must shall possess the same schedule(s) of controlled substances as the nurse practitioner's DEA registration.

(3) The nurse practitioner may prescribe a drug or device not included in the collaborative practice agreement only as follows:

(A) upon a specific written or verbal order obtained from a primary or back-up supervising physician before the prescription or order is issued by the nurse practitioner; and

(B) the written or verbal order as described in Part (b)(3)(A) of this Rule shall be entered into the patient record with a notation that it is issued on the specific order of a primary or back-up supervising physician and signed by the nurse practitioner and the physician.

~~(4) Refills may be issued for a period not to exceed one year.~~

~~(5)~~(4) Each prescription shall be noted on the patient's chart and include the following information:

(A) medication and dosage;

(B) amount prescribed;

(C) directions for use;

(D) number of refills; and

(E) signature of nurse practitioner.

~~(6)~~(5) Prescription Format:

(A) all prescriptions issued by the nurse practitioner shall contain the supervising physician(s) name, the name of the patient, and the nurse practitioner's name, telephone number, and approval number;

(B) the nurse practitioner's assigned DEA number shall be written on the prescription form when a controlled substance is prescribed as defined in Subparagraph (b)(2) of this Rule.

(6) A nurse practitioner shall not prescribe controlled substances, as defined by the State and Federal Controlled Substances Acts, for the following:

(A) nurse practitioner's own use;

(B) or that of a nurse practitioner's supervising physician; or

(C) that of a member of the nurse practitioner's immediate family, which shall mean:

(1) spouse;

(2) parent;

(3) child;

(4) sibling;

(5) parent-in-law;

(6) son or daughter-in-law;

(7) brother or sister-in-law;

(8) step-parent;

(9) step-child; step-sibling; or

(10) step-siblings; or

(D) any other person living in the same residence as the licensee; or

(E) anyone with whom the nurse practitioner is having a sexual relationship or has a significant emotional relationship.

(c) The nurse practitioner may obtain approval to dispense the drugs and devices other than samples included in the collaborative practice agreement for each practice site from the Board of Pharmacy, and dispense in accordance with 21 NCAC 46 .1703 that is hereby incorporated by reference including subsequent amendments of the referenced materials.

*History Note:* Authority G.S. 90-8.1; 90-8.2; 90-18(14); 90-18.2; 90-18(c)(14); 90-171.23(b)(14);

*Recodified from 21 NCAC 36 .0227(h) Eff. August 1, 2004;*

*Amended Eff. March 1, 2017; December 1, 2012; April 1, 2011; November 1, 2008; August 1, 2004.*