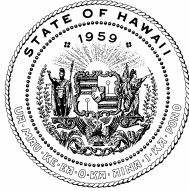


LINDA LINGLE
GOVERNOR

JAMES R. AIONA, JR.
LIEUTENANT GOVERNOR



MARK E. RECKTENWALD
DIRECTOR

NOE NOE TOM
LICENSING ADMINISTRATOR

BOARD OF NURSING

STATE OF HAWAII
PROFESSIONAL AND VOCATIONAL LICENSING DIVISION
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
P.O. BOX 3469
HONOLULU, HAWAII 96801
www.hawaii.gov/dcca/pvl
September 15, 2005

MEMORANDUM:

On November 5, 2004, the Board of Medical Examiners ("BME") approved the Exclusionary Formulary (attached) for Advanced Practice Registered Nurses ("APRN") granted prescriptive authority by the Board of Nursing ("BON").

APRN with prescriptive authority are not authorized to prescribe controlled substances in accordance with the BME approved exclusionary formulary until the BON has amended Hawaii Administrative Rules, Title 16, Chapter 89 to include the requirements relating to prescribing controlled substances (including, but not limited to a BON-approved supervisory working agreement with a physician licensed in Hawaii). The amendments to Title 16, Chapter 89, shall first be adopted in accordance with Act 150, SLH 2004, and Act 30, SLH 2005.

EXCLUSIONARY FORMULARY

Advanced Practice Registered Nurses (APRN) granted recognition for prescriptive authority (Nurse Practitioner, Clinical Nurse Specialist, and Certified Nurse Midwife) in accordance with Chapters 457, Hawaii Revised Statutes, relating to Nurses and 16-89C, relating to Advanced Practice Registered Nurse Prescriptive Authority, may prescribe drugs that are within the APRNs' scope of practice in a collegial or supervisory working relationship with a physician, as defined in section 16-89C-10, and this Exclusionary Formulary.

Subject to this Exclusionary Formulary, APRNs may prescribe: (1) non-controlled substances when in a collegial working relationship with a physician; and (2) controlled substances when in a supervisory relationship with a physician.

The Exclusionary Formulary shall list drugs or categories of drugs that shall not be prescribed by the APRN recognized to prescribe by the Board of Nursing. Subject to all applicable state and federal laws and rules and this Exclusionary Formulary, the receipt of, the signing for, or the dispensing of professional samples to patients is permissible.

The APRN granted recognition for prescriptive authority accepts responsibility, accountability, and obligation to practice in accordance with usual and customary APRN standards and functions as defined by the scope of practice/role definition statements for the APRN category and specialty.

The Exclusionary Formulary shall consist of:

- A. All controlled substances listed in schedule II of Chapter 329, HRS, except:
 - i. in hospitals, extended care facilities or hospice settings; and
 - ii. within a supervisory relationship with a licensed physician;
- B. All controlled substances listed in schedules III through V of Chapter 329, HRS, except within a supervisory relationship with a licensed physician;
- C. Notwithstanding A and B above, the Exclusionary Formulary shall also include all:
 - i. general anesthetics;
 - ii. investigational drugs;
 - iii. narcotics and sedatives for treatment of chronic pain and fatigue;
 - iv. stimulants and hormones for treatment of obesity; and
 - v. human growth hormones, anabolic steroids or hormones for performance enhancement or decreasing the impact of aging.
- D. All other drugs or pharmaceuticals which any party of the collegial working relationship excludes in their collegial or supervisory relationship agreement filed with the Department pursuant to section 16-89C-10.

Degree of Supervision

The supervising physician shall:

- A. Possess a current unrestricted Hawaii license to practice medicine and surgery that is in good standing with the board;
- B. Direct and exercise supervision over the APRN and recognize that the supervising physician retains full professional and legal responsibility for the performance of the APRN and the care and treatment of the patient;
- C. Provide adequate means for direct communication between the APRN and the supervising physician; provided that where the physical presence of the supervising physician is not required, the direct communication may occur through the use of technology which may include but is not limited to, two way radio, telephone, fax machine, modem, or other telecommunication device;
- D. Personally review the records of each patient seen by the APRN within seven working days;
- E. Supervise no more than two APRNs at any one time; and
- F. Be authorized to allow the APRN to prescribe and administer medications and medical devices to the extent delegated by the supervising physician and subject to the following requirements:
 - i. An APRN who has been delegated the authority to prescribe controlled substances shall register with the Drug Enforcement Administration (DEA); and
 - ii. Each prescription written by an APRN shall include the name, address, and phone number of the supervising physician and APRN. An APRN who has been delegated the authority to prescribe shall sign the prescription next to the printed name of the APRN.

Approved by the
Board of Medical Examiners
November 5, 2004