

FILED WITH LRC
TIME: 9:50 AM
JUN 22 2022
Emily B Caudill
REGULATIONS COMPILER

1 GENERAL GOVERNMENT CABINET

2 Board of Nursing

3 (Amendment)

4 201 KAR 20:650. Licensed certified professional midwives permitted medical tests and
5 formulary.

6 RELATES TO: KRS 314.404 – 314.416

7 STATUTORY AUTHORITY: KRS 314.131(1), 314.404

8 NECESSITY, FUNCTION, AND CONFORMITY: KRS 314.131(1) authorizes the Board of Nursing
9 to promulgate administrative regulations as may be necessary to enable it to carry into effect the
10 provisions of KRS Chapter 314. KRS 314.404(7) authorizes the board to promulgate an
11 administrative regulation to establish a list of medical tests that a licensed certified professional
12 midwife may order when providing certified professional midwifery services that is limited to
13 only those tests that are indicated and approved for the safe conduct of pregnancy, labor or birth,
14 and care of a client and not intended for the diagnosis or management of any acute condition
15 unrelated to pregnancy.

16 Section 1. An LCPM may independently order the following medical tests:

17 (1) Complete blood count (CBC);

18 (2) Blood type, Rh, and antibody screen;

19 (3) Screening for gestational diabetes;

20 (4) Hepatitis B and C panels for immunity or infection;

- 1 (5) HIV test;
- 2 (6) HPV test;
- 3 (7) Pap smear;
- 4 (8) Screen tests for syphilis, chlamydia, gonorrhea, and herpes;
- 5 (9) Rubella titers;
- 6 (10) Urine or serum HCG;
- 7 (11) Urinalysis;
- 8 (12) Urine culture including Group B strep;
- 9 (13) Vaginal culture for Group B strep;
- 10 (14) Varicella titers;
- 11 (15) Ultrasound for fetal viability, confirmation of singleton intrauterine pregnancy,
- 12 gestational age, fetal position, placental localization, anatomy scan, amniotic fluid index, or
- 13 nuchal translucency;
- 14 (16) Standard state newborn screening for metabolic disorders;
- 15 (17) Newborn hearing screening;
- 16 (18) Critical congenital heart disease screening (pulse oximetry);
- 17 (19) Maternal prenatal genetic screening for errors of metabolism;
- 18 (20) Hemoglobin A1C;
- 19 (21) Standard screening tests for fetal genetic abnormalities including Quad Screen and
- 20 cell-free DNA testing;
- 21 (22) TSH screening; ~~and~~
- 22 (23) Non-stress tests;

1 **(24) Neo-Bilirubin or Total-Bilirubin;**

2 **(25) Coombs and blood type test of the newborn; and**

3 **(26) The fetal screen and Rhogam tests of the client.**

4 Section 2. An LCPM may order any other test which is deemed necessary after
5 consultation with a physician or other appropriate licensed healthcare provider.

6 Section 3. (1) An LCPM may obtain, transport, and administer the following legend
7 medications:

8 (a) Vitamin K;

9 (b) Rho D immune globulin;

10 (c) Erythromycin ophthalmic ointment USP (0.5%);

11 (d) Oxygen;

12 (e) Hepatitis B vaccine;

13 (f) Antibiotics which shall be administered pursuant to United States Centers for Disease

14 Control (CDC) Guidelines for Prophylaxis:

15 1. Penicillin;

16 2. Ampicillin;

17 3. Cefazolin;

18 4. Clindamycin; and

19 5. Vancomycin;

20 (g) Topical anesthetics:

21 1. Procaine HCl;

22 2. Novacaine;

- 1 3. Benzocaine;
- 2 4. Cetacaine; and
- 3 5. Generic equivalents;
- 4 (h) Lidocaine, 1% up to twenty (20) milliliters per patient;
- 5 (i) Epinephrine;
- 6 (j) Glucose gel to be administered orally for neonatal hypoglycemia;
- 7 (k) Tranexamic acid;
- 8 (l) Oxytocin;
- 9 (m) Lactated ringer's;
- 10 (n) Normal saline; and
- 11 (o) Medical supplies needed to administer the medications listed in this administrative
- 12 regulation.

13 (2)(a) An LCPM shall obtain and transport for emergencies Oxytocin ~~((Pitocin))~~ for
14 prevention of postpartum hemorrhage and Lactated Ringer's or Normal Saline for intravenous
15 infusion.

16 (b) The LCPM shall obtain and transport at least one of the following to be used in the
17 event of postpartum hemorrhage and if Oxytocin is not successful:

- 18 1. Methylergonovine (Methergine);
- 19 2. Hemabate; or
- 20 3. Misoprostal (Cytotec).

Amended Administrative Regulation

201 KAR 20:650.

Adopted: June 16, 2022.

Jessica Wilson

**Jessica Wilson, President
Kentucky Board of Nursing**

June 16, 2022

Date

PUBLIC HEARING AND PUBLIC COMMENT PERIOD

A public hearing on this administrative regulation shall be held on September 26, 2022 at 10:00 AM at Kentucky Board of Nursing, 312 Whittington Parkway, Ste 300, Louisville, KY 40222. Individuals interested in being heard at this hearing shall notify this agency in writing by September 19, 2022, five workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing was received by that date, the hearing may be cancelled. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted through September 30, 2022. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

CONTACT PERSON:

Jeffrey R. Prather, General Counsel
Kentucky Board of Nursing
312 Whittington Parkway, Suite 300
Louisville, KY 40222
Cell: (502) 338-2851
Email: Jeffrey.Prather@ky.gov

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

201 KAR 20:650

Contact Person: Jeffrey Prather

Phone: (502) 338-2851

Email: Jeffrey.prather@ky.gov

- (1) Provide a brief summary of:
 - (a) What this administrative regulation does: It sets the formulary and tests permitted to a Licensed Certified Professional Midwife (LCPM).
 - (b) The necessity of this administrative regulation: It is required by statute.
 - (c) How this administrative regulation conforms to the content of the authorizing statutes: By creating the formulary and tests permitted.
 - (d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: By creating the formulary and tests permitted.

- (2) If this is an amendment to an existing administrative regulation, provide a brief summary of:
 - (a) How the amendment will change this existing administrative regulation: It adds several tests to the list and several new medications to the formulary.
 - (b) The necessity of the amendment to this administrative regulation: It was recommended by the LCPM Advisory Council and approved by the Board that these changes should be made.
 - (c) How the amendment conforms to the content of the authorizing statutes: The Board has the authority to set the formulary and tests permitted.
 - (d) How the amendment will assist in the effective administration of the statutes: By allowing these new tests and medications.

- (3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: LCPMs, approximately 30.

- (4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:
 - (a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment: No actions are necessary.
 - (b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3): There is no cost.
 - (c) As a result of compliance, what benefits will accrue to the entities identified in question (3): They will be able to use the new tests and medications.

- (5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:
 - (a) Initially: There is no cost.
 - (b) On a continuing basis: There is no cost.

- (6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: Agency funds.

- (7) Provide an assessment of whether an increase in fees or funding will be necessary to implement

this administrative regulation, if new, or by the change if it is an amendment: No increase is needed.

(8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees: It does not.

(9) TIERING: Is tiering applied?
Tiering is not applicable.

FISCAL NOTE

201 KAR 20:650

Contact Person: Jeffrey Prather

Phone: (502) 338-2851

Email: Jeffrey.prather@ky.gov

(1) What units, parts, or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation? Board of Nursing

(2) Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation. KRS 314.131, 314.410

(3) Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect.

(a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year? None

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years? None

(c) How much will it cost to administer this program for the first year? There is no additional cost.

(d) How much will it cost to administer this program for subsequent years? There is no additional cost.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):

Expenditures (+/-):

Other Explanation:

(4) Estimate the effect of this administrative regulation on the expenditures and cost savings of regulated entities for the first full year the administrative regulation is to be in effect.

(a) How much cost savings will this administrative regulation generate for the regulated entities for the first year? No cost.

(b) How much cost savings will this administrative regulation generate for the regulated entities for subsequent years? None.

(c) How much will it cost the regulated entities for the first year? There is no cost.

(d) How much will it cost the regulated entities for subsequent years? There is no cost.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Cost Savings (+/-):

Expenditures (+/-):

Other Explanation:

(5) Explain whether this administrative regulation will have a major economic impact, as defined below. "Major economic impact" means an overall negative or adverse economic impact from an administrative regulation of five hundred thousand dollars (\$500,000) or more on state or local

government or regulated entities, in aggregate, as determined by the promulgating administrative bodies. [KRS 13A.010(13)] It does not.