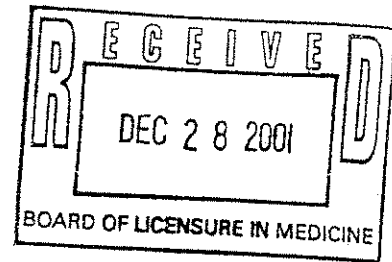


Joint Advisory Opinion  
Board of Licensure in Medicine  
And  
Board of Nursing



Maine Board of Licensure in Medicine (BOLIM) and Maine State Board of Nursing (MSBON)

**Joint Advisory Opinion:** Schedule II Drug Prescriptive Authority by Nurse Practitioners and Certified Nurse Midwives (NP and CNM)

Purpose

To clarify the roles and responsibilities of physicians, nurse practitioners, and nurse midwives regarding the prescription of Schedule II drugs.

History

The statutes and rules of health care regulatory agencies define the parameters of the scope of practice of the licensed practitioner. Respective Boards provide the outside parameters of scope of practice beyond which practice may not be exceeded by their licensees.

32 MRSA § 3270-A (BOLIM) provides the statutory framework for delegation of medical acts by physicians, and Chapter 3 of the BOLIM rules provides that Schedule II drug prescriptive authority may NOT be delegated to nurse practitioners or certified nurse midwives practicing under delegation. The rule provides for petition by the physician for an exception on a case by case basis. *The BOLIM, to date, has not looked at the issue of allowing the delegation of schedule II prescriptive authority based solely on the basis that the nurse practitioner or nurse midwife, if practicing under the MSBON rules' scope of practice, could so prescribe.*

32 MRSA §2102 2-A (MSBON) grants prescriptive authority to nurse practitioners and certified nurse midwives. Chapter 8 of the MSBON rules provides that Schedule II drugs may be prescribed by NPs and CNMs as part of their regular scope of practice.

Joint Agreement

The Boards agree that there are three situations where the question of Schedule II prescriptive authority arises.

Situation 1: The NP or CNM is practicing in "independent" practice according to the statute and rules of the MSBON. The Boards agree that this individual may prescribe Schedule II drugs.

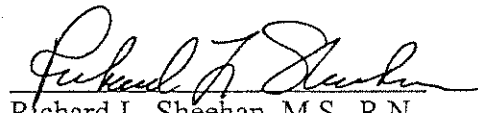
Situation 2: The NP or CNM who chooses to practice under the delegation of a physician, in accordance with 32 MRSA 2205-B (3) may NOT prescribe Schedule II drugs, because of the limitation of delegation placed upon the physician by the BOLIM. The BOLIM's rule provides for petition for an exception on a case by case basis.

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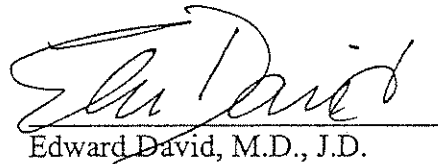
BOARD OF NURSING  
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Situation 3: NPs and CNMs who work under delegation at a health care institution as required by the rules governing membership or employment at the facility whose rules or bylaws prohibit Schedule II prescribing by other than fully licensed physicians or appropriate delegated licensed staff, the scope of practice may be made more restrictive, but not less. That institution may be a clinic, hospital, nursing home, or other health care provider. When the NP or CNM accepts a contract, real or implied, to abide by the rules of the institution, the NP or CNM may NOT prescribe Schedule II substances.

In the instance where a nurse practitioner or a certified nurse midwife works in multiple settings which include multiple categories, the NP/CNM may prescribe Schedule II drugs only when working in "independent" practice settings.



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Dated: December 11, 2001