



## 104TH GENERAL ASSEMBLY

### State of Illinois

2025 and 2026

HB3728

Introduced 2/18/2025, by Rep. Anna Moeller

#### SYNOPSIS AS INTRODUCED:

See Index

Amends the Ambulatory Surgical Treatment Center Act. Removes a provision which provides that, in ambulatory surgical treatment centers, anesthesia service shall be under the direction of a physician who has had specialized preparation or experience in the area or who has completed a residency in anesthesiology. Specifies that, with respect to anesthesia service in an ambulatory surgical treatment center, a certified registered nurse anesthetist shall seek consultation regarding development of an anesthesia plan and treatment of patients as is appropriate to the certified registered nurse anesthetist's level of expertise and scope of practice and as is warranted by the needs of the patient. Removes a requirement that an anesthesiologist participate through discussion of and agreement with the anesthesia plan and remain physically present and be available on the premises. Provides that a certified registered nurse anesthetist with clinical privileges may perform acts of advanced assessment and diagnosis and may provide such functions for which the certified registered nurse anesthetist is educationally and experientially prepared. Makes conforming changes to the Hospital Licensing Act. Amends the Medical Practice Act of 1987. Provides that a written collaborative agreement shall be adequate with respect to collaboration with certified registered nurse anesthetists if all of the following apply: (1) the agreement is written to promote the exercise of professional judgment by the certified registered nurse anesthetist commensurate with his or her education and experience; (2) the certified registered nurse anesthetist provides service based on a written collaborative agreement with the collaborating physician; and (3) methods of communication are available with the collaborating physician in person or through telecommunications for consultation, collaboration, and referral as needed to address patient care needs. Amends the Nurse Practice Act. Provides that an Illinois-licensed advanced practice registered nurse certified as a certified registered nurse anesthetist shall be deemed by law to possess the ability to practice without a written collaborative agreement. Sets forth requirements for a certified registered nurse anesthetist. Makes conforming changes in the Illinois Dental Practice Act. Effective immediately.

LRB104 09997 AAS 20067 b

A BILL FOR

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Ambulatory Surgical Treatment Center Act is  
5 amended by changing Section 6.5 as follows:

6 (210 ILCS 5/6.5)

7 Sec. 6.5. Clinical privileges; advanced practice  
8 registered nurses. All ambulatory surgical treatment centers  
9 (ASTC) licensed under this Act shall comply with the following  
10 requirements:

11 (1) No ASTC policy, rule, regulation, or practice  
12 shall be inconsistent with the provision of adequate  
13 collaboration and consultation in accordance with Section  
14 54.5 of the Medical Practice Act of 1987.

15 (2) Operative surgical procedures shall be performed  
16 only by a physician licensed to practice medicine in all  
17 its branches under the Medical Practice Act of 1987, a  
18 dentist licensed under the Illinois Dental Practice Act,  
19 or a podiatric physician licensed under the Podiatric  
20 Medical Practice Act of 1987, with medical staff  
21 membership and surgical clinical privileges granted by the  
22 consulting committee of the ASTC. A licensed physician,  
23 dentist, or podiatric physician may be assisted by a

1 physician licensed to practice medicine in all its  
2 branches, dentist, dental assistant, podiatric physician,  
3 licensed advanced practice registered nurse, licensed  
4 physician assistant, licensed registered nurse, licensed  
5 practical nurse, surgical assistant, surgical technician,  
6 or other individuals granted clinical privileges to assist  
7 in surgery by the consulting committee of the ASTC.  
8 Payment for services rendered by an assistant in surgery  
9 who is not an ambulatory surgical treatment center  
10 employee shall be paid at the appropriate non-physician  
11 modifier rate if the payor would have made payment had the  
12 same services been provided by a physician.

13 (2.5) A registered nurse licensed under the Nurse  
14 Practice Act and qualified by training and experience in  
15 operating room nursing shall be present in the operating  
16 room and function as the circulating nurse during all  
17 invasive or operative procedures. For purposes of this  
18 paragraph (2.5), "circulating nurse" means a registered  
19 nurse who is responsible for coordinating all nursing  
20 care, patient safety needs, and the needs of the surgical  
21 team in the operating room during an invasive or operative  
22 procedure.

23 (3) An advanced practice registered nurse is not  
24 required to possess prescriptive authority or a written  
25 collaborative agreement meeting the requirements of the  
26 Nurse Practice Act to provide advanced practice registered

1 nursing services in an ambulatory surgical treatment  
2 center. An advanced practice registered nurse must possess  
3 clinical privileges granted by the consulting medical  
4 staff committee and ambulatory surgical treatment center  
5 in order to provide services. Individual advanced practice  
6 registered nurses may also be granted clinical privileges  
7 to order, select, and administer medications, including  
8 controlled substances, to provide delineated care. The  
9 attending physician must determine the advanced practice  
10 registered nurse's role in providing care for his or her  
11 patients, except as otherwise provided in the consulting  
12 staff policies. The consulting medical staff committee  
13 shall periodically review the services of advanced  
14 practice registered nurses granted privileges.

15 (4) (Blank). ~~The anesthesia service shall be under the~~  
16 ~~direction of a physician licensed to practice medicine in~~  
17 ~~all its branches who has had specialized preparation or~~  
18 ~~experience in the area or who has completed a residency in~~  
19 ~~anesthesiology. An anesthesiologist, Board certified or~~  
20 ~~Board eligible, is recommended. Anesthesia services may~~  
21 ~~only be administered pursuant to the order of a physician~~  
22 ~~licensed to practice medicine in all its branches,~~  
23 ~~licensed dentist, or licensed podiatric physician.~~

24 (A) The individuals who, with clinical privileges  
25 granted by the medical staff and ASTC, may administer  
26 anesthesia services are limited to the following:

- 1 (i) an anesthesiologist; or  
2 (ii) a physician licensed to practice medicine  
3 in all its branches; or  
4 (iii) a dentist with authority to administer  
5 anesthesia under Section 8.1 of the Illinois  
6 Dental Practice Act; or  
7 (iv) a licensed certified registered nurse  
8 anesthetist; or  
9 (v) a podiatric physician licensed under the  
10 Podiatric Medical Practice Act of 1987.

11 (B) For anesthesia services, a certified  
12 registered nurse anesthetist shall seek consultation  
13 regarding development of an anesthesia plan and  
14 treatment of patients as is appropriate to the  
15 certified registered nurse anesthetist's level of  
16 expertise and scope of practice and as is warranted by  
17 the needs of the patient ~~an anesthesiologist shall~~  
18 ~~participate through discussion of and agreement with~~  
19 ~~the anesthesia plan and shall remain physically~~  
20 ~~present and be available on the premises during the~~  
21 ~~delivery of anesthesia services for diagnosis,~~  
22 ~~consultation, and treatment of emergency medical~~  
23 ~~conditions. In the absence of 24 hour availability of~~  
24 ~~anesthesiologists with clinical privileges, an~~  
25 ~~alternate policy (requiring participation, presence,~~  
26 ~~and availability of a physician licensed to practice~~

1 ~~medicine in all its branches) shall be developed by~~  
2 ~~the medical staff consulting committee in consultation~~  
3 ~~with the anesthesia service and included in the~~  
4 ~~medical staff consulting committee policies.~~

5 (C) A certified registered nurse anesthetist is  
6 not required to possess prescriptive authority or a  
7 written collaborative agreement meeting the  
8 requirements of Section 65-35 of the Nurse Practice  
9 Act to provide anesthesia and related services ~~ordered~~  
10 ~~by a licensed physician, dentist, or podiatric~~  
11 ~~physician.~~ Licensed certified registered nurse  
12 anesthetists are authorized to select, order, and  
13 administer drugs and apply the appropriate medical  
14 devices in the provision of anesthesia and related  
15 services ~~under the anesthesia plan agreed with by the~~  
16 ~~anesthesiologist or, in the absence of an available~~  
17 ~~anesthesiologist with clinical privileges, agreed with~~  
18 ~~by the operating physician, operating dentist, or~~  
19 ~~operating podiatric physician~~ in accordance with the  
20 medical staff consulting committee policies of a  
21 licensed ambulatory surgical treatment center.

22 (D) In accordance with the medical staff  
23 consulting committee policies of a licensed ambulatory  
24 surgical treatment center, a certified registered  
25 nurse anesthetist with clinical privileges may perform  
26 acts of advanced assessment and diagnosis and may

1           provide such functions for which the certified  
2           registered nurse anesthetist is educationally and  
3           experientially prepared. A certified registered nurse  
4           anesthetist shall practice in accordance with the  
5           scope and all standards of the appropriate national  
6           professional nursing association.

7           (Source: P.A. 99-642, eff. 7-28-16; 100-513, eff. 1-1-18.)

8           Section 10. The Hospital Licensing Act is amended by  
9           changing Section 10.7 as follows:

10           (210 ILCS 85/10.7)

11           Sec. 10.7. Clinical privileges; advanced practice  
12           registered nurses. All hospitals licensed under this Act  
13           shall comply with the following requirements:

14           (1) No hospital policy, rule, regulation, or practice  
15           shall be inconsistent with the provision of adequate  
16           collaboration and consultation in accordance with Section  
17           54.5 of the Medical Practice Act of 1987.

18           (2) Operative surgical procedures shall be performed  
19           only by a physician licensed to practice medicine in all  
20           its branches under the Medical Practice Act of 1987, a  
21           dentist licensed under the Illinois Dental Practice Act,  
22           or a podiatric physician licensed under the Podiatric  
23           Medical Practice Act of 1987, with medical staff  
24           membership and surgical clinical privileges granted at the

1 hospital. A licensed physician, dentist, or podiatric  
2 physician may be assisted by a physician licensed to  
3 practice medicine in all its branches, dentist, dental  
4 assistant, podiatric physician, licensed advanced practice  
5 registered nurse, licensed physician assistant, licensed  
6 registered nurse, licensed practical nurse, surgical  
7 assistant, surgical technician, or other individuals  
8 granted clinical privileges to assist in surgery at the  
9 hospital. Payment for services rendered by an assistant in  
10 surgery who is not a hospital employee shall be paid at the  
11 appropriate non-physician modifier rate if the payor would  
12 have made payment had the same services been provided by a  
13 physician.

14 (2.5) A registered nurse licensed under the Nurse  
15 Practice Act and qualified by training and experience in  
16 operating room nursing shall be present in the operating  
17 room and function as the circulating nurse during all  
18 invasive or operative procedures. For purposes of this  
19 paragraph (2.5), "circulating nurse" means a registered  
20 nurse who is responsible for coordinating all nursing  
21 care, patient safety needs, and the needs of the surgical  
22 team in the operating room during an invasive or operative  
23 procedure.

24 (3) An advanced practice registered nurse is not  
25 required to possess prescriptive authority or a written  
26 collaborative agreement meeting the requirements of the

1 Nurse Practice Act to provide advanced practice registered  
2 nursing services in a hospital. An advanced practice  
3 registered nurse must possess clinical privileges  
4 recommended by the medical staff and granted by the  
5 hospital in order to provide services. Individual advanced  
6 practice registered nurses may also be granted clinical  
7 privileges to order, select, and administer medications,  
8 including controlled substances, to provide delineated  
9 care. The attending physician must determine the advanced  
10 practice registered nurse's role in providing care for his  
11 or her patients, except as otherwise provided in medical  
12 staff bylaws. The medical staff shall periodically review  
13 the services of advanced practice registered nurses  
14 granted privileges. This review shall be conducted in  
15 accordance with item (2) of subsection (a) of Section 10.8  
16 of this Act for advanced practice registered nurses  
17 employed by the hospital.

18 (4) (Blank). ~~The anesthesia service shall be under the~~  
19 ~~direction of a physician licensed to practice medicine in~~  
20 ~~all its branches who has had specialized preparation or~~  
21 ~~experience in the area or who has completed a residency in~~  
22 ~~anesthesiology. An anesthesiologist, Board certified or~~  
23 ~~Board eligible, is recommended. Anesthesia services may~~  
24 ~~only be administered pursuant to the order of a physician~~  
25 ~~licensed to practice medicine in all its branches,~~  
26 ~~licensed dentist, or licensed podiatric physician.~~

1 (A) The individuals who, with clinical privileges  
2 granted at the hospital, may administer anesthesia  
3 services are limited to the following:

4 (i) an anesthesiologist; or

5 (ii) a physician licensed to practice medicine  
6 in all its branches; or

7 (iii) a dentist with authority to administer  
8 anesthesia under Section 8.1 of the Illinois  
9 Dental Practice Act; or

10 (iv) a licensed certified registered nurse  
11 anesthetist; or

12 (v) a podiatric physician licensed under the  
13 Podiatric Medical Practice Act of 1987.

14 (B) For anesthesia services, a certified  
15 registered nurse anesthetist shall seek consultation  
16 regarding development of an anesthesia plan and  
17 treatment of patients as is appropriate to the  
18 certified registered nurse anesthetist's level of  
19 expertise and scope of practice and as is warranted by  
20 the needs of the patient ~~an anesthesiologist shall~~  
21 ~~participate through discussion of and agreement with~~  
22 ~~the anesthesia plan and shall remain physically~~  
23 ~~present and be available on the premises during the~~  
24 ~~delivery of anesthesia services for diagnosis,~~  
25 ~~consultation, and treatment of emergency medical~~  
26 ~~conditions. In the absence of 24 hour availability of~~

1 ~~anesthesiologists with medical staff privileges, an~~  
2 ~~alternate policy (requiring participation, presence,~~  
3 ~~and availability of a physician licensed to practice~~  
4 ~~medicine in all its branches) shall be developed by~~  
5 ~~the medical staff and licensed hospital in~~  
6 ~~consultation with the anesthesia service.~~

7 (C) A certified registered nurse anesthetist is  
8 not required to possess prescriptive authority or a  
9 written collaborative agreement meeting the  
10 requirements of Section 65-35 of the Nurse Practice  
11 Act to provide anesthesia and related services ~~ordered~~  
12 ~~by a licensed physician, dentist, or podiatric~~  
13 ~~physician.~~ Licensed certified registered nurse  
14 anesthetists are authorized to select, order, and  
15 administer drugs and apply the appropriate medical  
16 devices in the provision of anesthesia and related  
17 services ~~under the anesthesia plan agreed with by the~~  
18 ~~anesthesiologist or, in the absence of an available~~  
19 ~~anesthesiologist with clinical privileges, agreed with~~  
20 ~~by the operating physician, operating dentist, or~~  
21 ~~operating podiatric physician~~ in accordance with the  
22 hospital's ~~alternative~~ policy.

23 (D) In accordance with the hospital's policies, a  
24 certified registered nurse anesthetist with clinical  
25 privileges may perform acts of advanced assessment and  
26 diagnosis and may provide such functions for which the

1           CRNA is educationally and experientially prepared. A  
2           certified registered nurse anesthetist shall practice  
3           in accordance with the scope and all standards of the  
4           appropriate national professional nursing association.

5           (Source: P.A. 99-642, eff. 7-28-16; 100-513, eff. 1-1-18.)

6           Section 15. The Illinois Dental Practice Act is amended by  
7           changing Section 8.1 as follows:

8           (225 ILCS 25/8.1) (from Ch. 111, par. 2308.1)

9           (Section scheduled to be repealed on January 1, 2026)

10          Sec. 8.1. Permit for the administration of anesthesia and  
11          sedation.

12          (a) No licensed dentist shall administer general  
13          anesthesia, deep sedation, or moderate sedation without first  
14          applying for and obtaining a permit for such purpose from the  
15          Department. The Department shall issue such permit only after  
16          ascertaining that the applicant possesses the minimum  
17          qualifications necessary to protect public safety. A person  
18          with a dental degree who administers anesthesia, deep  
19          sedation, or moderate sedation in an approved hospital  
20          training program under the supervision of either a licensed  
21          dentist holding such permit or a physician licensed to  
22          practice medicine in all its branches shall not be required to  
23          obtain such permit.

24          (b) The minimum requirements for a permit to administer

1 moderate sedation issued after the effective date of this  
2 amendatory Act of the 103rd General Assembly shall include the  
3 completion of a minimum of 75 hours of didactic and supervised  
4 clinical study in either:

5 (1) an American Dental Association Commission on  
6 Dental Accreditation accredited dental specialty program,  
7 general practice residency, or advanced education in  
8 general dentistry residency that includes training and  
9 documentation in moderate sedation techniques appropriate  
10 for each specialty or an American Dental Association  
11 Commission on Dental Accreditation accredited dental  
12 anesthesiology residency program and proof of completion  
13 of 20 individually managed patients utilizing appropriate  
14 routes of administration, in which the applicant is the  
15 sole provider, which can include, but are not limited to,  
16 intravenous, oral, intranasal, or intramuscular or  
17 combinations thereof; or

18 (2) a structured course of study provided by an  
19 approved continuing education provider that includes  
20 training and documentation in moderate sedation, physical  
21 evaluation, venipuncture, advanced airway management,  
22 technical administration, recognition and management of  
23 complications and emergencies and monitoring with  
24 additional supervised experience and documentation  
25 demonstrating competence in providing moderate sedation  
26 utilizing enteral and parenteral routes of administration

1 of medications to competency to 20 individual patient  
2 experiences on a 1 to 1 ratio with an instructor, in which  
3 the applicant is the sole provider of sedation over a  
4 continuous time frame as set by the Department and as  
5 provided in the American Dental Association's Guidelines  
6 for Teaching Pain Control and Sedation to Dentists and  
7 Dental Students.

8 (b-5) The minimum requirements for a permit to administer  
9 deep sedation and general anesthesia issued after the  
10 effective date of this amendatory Act of the 103rd General  
11 Assembly shall include:

12 (1) the completion of a minimum of 2 years of advanced  
13 training in anesthesiology beyond the pre-doctoral level  
14 in a training program approved by the American Dental  
15 Association's Council on Dental Education and Licensure,  
16 as outlined in Guidelines for Teaching Pain Control and  
17 Sedation to Dentists and Dental Students, as published by  
18 the American Dental Association's Council on Dental  
19 Education and Licensure;

20 (2) a specialty license in oral and maxillofacial  
21 surgery;

22 (3) completion of an accredited oral or maxillofacial  
23 surgery residency program; or

24 (4) the completion of an American Dental Association  
25 Commission on Dental Accreditation accredited dental  
26 anesthesiology residency program.

1 (b-10) The Department may establish, by rule, additional  
2 training programs and training requirements consistent with  
3 this Section to ensure patient safety in dental offices  
4 administering anesthesia, which shall include, but not be  
5 limited to the following:

6 (1) (blank);

7 (2) establish the standards for properly equipped  
8 dental facilities (other than licensed hospitals and  
9 ambulatory surgical treatment centers) in which general  
10 anesthesia, deep sedation, or moderate sedation is  
11 administered, as necessary to protect public safety;

12 (3) establish minimum requirements for all persons who  
13 assist the dentist in the administration of general  
14 anesthesia, deep sedation, or moderate sedation, including  
15 minimum training requirements for each member of the  
16 dental team, monitoring requirements, recordkeeping  
17 requirements, and emergency procedures;

18 (4) ensure that the dentist has completed and  
19 maintains current certification in advanced cardiac life  
20 support or pediatric advanced life support and all persons  
21 assisting the dentist or monitoring the administration of  
22 general anesthesia, deep sedation, or moderate sedation  
23 maintain current certification in Basic Life Support  
24 (BLS); and

25 (5) establish continuing education requirements in  
26 sedation techniques and airway management for dentists who

1 possess a permit under this Section.

2 The Department shall adopt rules that ensure that a  
3 continuing education course designed to meet the permit  
4 requirements for moderate sedation training is reviewed and  
5 certified by the Department if the course is not accredited by  
6 the American Dental Association Commission on Dental  
7 Accreditation.

8 When establishing requirements under this Section, the  
9 Department shall consider the current American Dental  
10 Association guidelines on sedation and general anesthesia, the  
11 current "Guidelines for Monitoring and Management of Pediatric  
12 Patients During and After Sedation for Diagnostic and  
13 Therapeutic Procedures" established by the American Academy of  
14 Pediatrics and the American Academy of Pediatric Dentistry,  
15 and the current parameters of care and Office Anesthesia  
16 Evaluation (OAE) Manual established by the American  
17 Association of Oral and Maxillofacial Surgeons.

18 (c) A licensed dentist must hold an appropriate permit  
19 issued under this Section in order to perform dentistry while  
20 a nurse anesthetist administers moderate sedation, and a valid  
21 written collaborative agreement must exist between the dentist  
22 and the nurse anesthetist, in accordance with the Nurse  
23 Practice Act, unless the nurse anesthetist has full practice  
24 authority under the requirements of Section 65-70.

25 A licensed dentist must hold an appropriate permit issued  
26 under this Section in order to perform dentistry while a nurse

1 anesthetist administers deep sedation or general anesthesia,  
2 and a valid written collaborative agreement must exist between  
3 the dentist and the nurse anesthetist, in accordance with the  
4 Nurse Practice Act, unless the nurse anesthetist has full  
5 practice authority under the requirements of Section 65-70.

6 For the purposes of this subsection (c), "nurse  
7 anesthetist" means a licensed certified registered nurse  
8 anesthetist who holds a license as an advanced practice  
9 registered nurse.

10 (Source: P.A. 103-628, eff. 7-1-24.)

11 Section 20. The Medical Practice Act of 1987 is amended by  
12 changing Section 54.5 as follows:

13 (225 ILCS 60/54.5)

14 (Section scheduled to be repealed on January 1, 2027)

15 Sec. 54.5. Physician delegation of authority to physician  
16 assistants, advanced practice registered nurses without full  
17 practice authority, and prescribing psychologists.

18 (a) Physicians licensed to practice medicine in all its  
19 branches may delegate care and treatment responsibilities to a  
20 physician assistant under guidelines in accordance with the  
21 requirements of the Physician Assistant Practice Act of 1987.  
22 A physician licensed to practice medicine in all its branches  
23 may enter into collaborative agreements with no more than 7  
24 full-time equivalent physician assistants, except in a

1 hospital, hospital affiliate, or ambulatory surgical treatment  
2 center as set forth by Section 7.7 of the Physician Assistant  
3 Practice Act of 1987 and as provided in subsection (a-5).

4 (a-5) A physician licensed to practice medicine in all its  
5 branches may collaborate with more than 7 physician assistants  
6 when the services are provided in a federal primary care  
7 health professional shortage area with a Health Professional  
8 Shortage Area score greater than or equal to 12, as determined  
9 by the United States Department of Health and Human Services.

10 The collaborating physician must keep appropriate  
11 documentation of meeting this exemption and make it available  
12 to the Department upon request.

13 (b) A physician licensed to practice medicine in all its  
14 branches in active clinical practice may collaborate with an  
15 advanced practice registered nurse in accordance with the  
16 requirements of the Nurse Practice Act. Collaboration is for  
17 the purpose of providing medical consultation, and no  
18 employment relationship is required. A written collaborative  
19 agreement shall conform to the requirements of Section 65-35  
20 of the Nurse Practice Act. The written collaborative agreement  
21 shall be for services for which the collaborating physician  
22 can provide adequate collaboration. A written collaborative  
23 agreement shall be adequate with respect to collaboration with  
24 advanced practice registered nurses if all of the following  
25 apply:

26 (1) The agreement is written to promote the exercise

1 of professional judgment by the advanced practice  
2 registered nurse commensurate with his or her education  
3 and experience.

4 (2) The advanced practice registered nurse provides  
5 services based upon a written collaborative agreement with  
6 the collaborating physician, ~~except as set forth in~~  
7 ~~subsection (b 5) of this Section.~~ With respect to labor  
8 and delivery, the collaborating physician must provide  
9 delivery services in order to participate with a certified  
10 nurse midwife.

11 (3) Methods of communication are available with the  
12 collaborating physician in person or through  
13 telecommunications for consultation, collaboration, and  
14 referral as needed to address patient care needs.

15 (b-5) An anesthesiologist or physician licensed to  
16 practice medicine in all its branches may collaborate with a  
17 certified registered nurse anesthetist in accordance with  
18 Section 65-35 of the Nurse Practice Act for the provision of  
19 anesthesia and related services. A written collaborative  
20 agreement shall be adequate with respect to collaboration with  
21 certified registered nurse anesthetists if all of the  
22 following apply:

23 (1) The agreement is written to promote exercise of  
24 professional judgment by the certified registered nurse  
25 anesthetist commensurate with his or her education and  
26 experience.

1           (2) The certified registered nurse anesthetist  
2           provides service based on a written collaborative  
3           agreement with the collaborating physician.

4           (3) Methods of communication are available with the  
5           collaborating physician in person or through  
6           telecommunications for consultation, collaboration, and  
7           referral as needed to address patient care needs. With  
8           ~~respect to the provision of anesthesia services, the~~  
9           ~~collaborating anesthesiologist or physician shall have~~  
10           ~~training and experience in the delivery of anesthesia~~  
11           ~~services consistent with Department rules. Collaboration~~  
12           ~~shall be adequate if:~~

13           ~~(1) an anesthesiologist or a physician participates in~~  
14           ~~the joint formulation and joint approval of orders or~~  
15           ~~guidelines and periodically reviews such orders and the~~  
16           ~~services provided patients under such orders; and~~

17           ~~(2) for anesthesia services, the anesthesiologist or~~  
18           ~~physician participates through discussion of and agreement~~  
19           ~~with the anesthesia plan and is physically present and~~  
20           ~~available on the premises during the delivery of~~  
21           ~~anesthesia services for diagnosis, consultation, and~~  
22           ~~treatment of emergency medical conditions. Collaboration~~  
23           with respect to an anesthesia and related Anesthesia  
24           services in a hospital shall be conducted in accordance  
25           with Section 10.7 of the Hospital Licensing Act and in an  
26           ambulatory surgical treatment center in accordance with

1 Section 6.5 of the Ambulatory Surgical Treatment Center  
2 Act.

3 (b-10) For anesthesia services, a certified registered  
4 nurse anesthetist shall consult with the collaborating  
5 physician or other appropriate health care professionals  
6 regarding development of an anesthesia plan and treatment of a  
7 patient as is appropriate to the certified registered nurse  
8 anesthetist's level of expertise and scope of practice and as  
9 is warranted by the needs of the patient ~~The anesthesiologist~~  
10 ~~or operating physician must agree with the anesthesia plan~~  
11 ~~prior to the delivery of services.~~

12 (c) The collaborating physician shall have access to the  
13 medical records of all patients attended by a physician  
14 assistant. The collaborating physician shall have access to  
15 the medical records of all patients attended to by an advanced  
16 practice registered nurse.

17 (d) (Blank).

18 (e) A physician shall not be liable for the acts or  
19 omissions of a prescribing psychologist, physician assistant,  
20 or advanced practice registered nurse solely on the basis of  
21 having signed a supervision agreement or guidelines or a  
22 collaborative agreement, an order, a standing medical order, a  
23 standing delegation order, or other order or guideline  
24 authorizing a prescribing psychologist, physician assistant,  
25 or advanced practice registered nurse to perform acts, unless  
26 the physician has reason to believe the prescribing

1 psychologist, physician assistant, or advanced practice  
2 registered nurse lacked the competency to perform the act or  
3 acts or commits willful and wanton misconduct.

4 (f) A collaborating physician may, but is not required to,  
5 delegate prescriptive authority to an advanced practice  
6 registered nurse as part of a written collaborative agreement,  
7 and the delegation of prescriptive authority shall conform to  
8 the requirements of Section 65-40 of the Nurse Practice Act.

9 (g) A collaborating physician may, but is not required to,  
10 delegate prescriptive authority to a physician assistant as  
11 part of a written collaborative agreement, and the delegation  
12 of prescriptive authority shall conform to the requirements of  
13 Section 7.5 of the Physician Assistant Practice Act of 1987.

14 (h) (Blank).

15 (i) A collaborating physician shall delegate prescriptive  
16 authority to a prescribing psychologist as part of a written  
17 collaborative agreement, and the delegation of prescriptive  
18 authority shall conform to the requirements of Section 4.3 of  
19 the Clinical Psychologist Licensing Act.

20 (j) As set forth in Section 22.2 of this Act, a licensee  
21 under this Act may not directly or indirectly divide, share,  
22 or split any professional fee or other form of compensation  
23 for professional services with anyone in exchange for a  
24 referral or otherwise, other than as provided in Section 22.2.

25 (Source: P.A. 103-228, eff. 1-1-24.)

1           Section 25. The Nurse Practice Act is amended by changing  
2 Sections 65-35 and 65-45 and by adding Section 65-70 as  
3 follows:

4           (225 ILCS 65/65-35) (was 225 ILCS 65/15-15)

5           (Section scheduled to be repealed on January 1, 2028)

6           Sec. 65-35. Written collaborative agreements.

7           (a) A written collaborative agreement is required for all  
8 advanced practice registered nurses engaged in clinical  
9 practice prior to meeting the requirements of Section 65-43,  
10 except for advanced practice registered nurses who are  
11 privileged to practice in a hospital, hospital affiliate, or  
12 ambulatory surgical treatment center.

13           (a-5) If an advanced practice registered nurse engages in  
14 clinical practice outside of a hospital, hospital affiliate,  
15 or ambulatory surgical treatment center in which he or she is  
16 privileged to practice, the advanced practice registered nurse  
17 must have a written collaborative agreement, except as set  
18 forth in Section 65-43 and 65-70.

19           (b) A written collaborative agreement shall describe the  
20 relationship of the advanced practice registered nurse with  
21 the collaborating physician and shall describe the categories  
22 of care, treatment, or procedures to be provided by the  
23 advanced practice registered nurse. A collaborative agreement  
24 with a podiatric physician must be in accordance with  
25 subsection (c-5) or (c-15) of this Section. A collaborative

1 agreement with a dentist must be in accordance with subsection  
2 (c-10) of this Section. A collaborative agreement with a  
3 podiatric physician must be in accordance with subsection  
4 (c-5) of this Section. Collaboration does not require an  
5 employment relationship between the collaborating physician  
6 and the advanced practice registered nurse.

7 The collaborative relationship under an agreement shall  
8 not be construed to require the personal presence of a  
9 collaborating physician at the place where services are  
10 rendered. Methods of communication shall be available for  
11 consultation with the collaborating physician in person or by  
12 telecommunications or electronic communications as set forth  
13 in the written agreement.

14 (b-5) Absent an employment relationship, a written  
15 collaborative agreement may not (1) restrict the categories of  
16 patients of an advanced practice registered nurse within the  
17 scope of the advanced practice registered nurses training and  
18 experience, (2) limit third party payors or government health  
19 programs, such as the medical assistance program or Medicare  
20 with which the advanced practice registered nurse contracts,  
21 or (3) limit the geographic area or practice location of the  
22 advanced practice registered nurse in this State.

23 (c) In the case of anesthesia services provided by a  
24 certified registered nurse anesthetist, a certified registered  
25 nurse anesthetist shall seek consultation regarding  
26 development of an anesthesia plan and treatment of patients as

1 is appropriate to the certified registered nurse anesthetist's  
2 level of expertise and scope of practice and as is warranted by  
3 the needs of the patient ~~an anesthesiologist, a physician, a~~  
4 ~~dentist, or a podiatric physician must participate through~~  
5 ~~discussion of and agreement with the anesthesia plan and~~  
6 ~~remain physically present and available on the premises during~~  
7 ~~the delivery of anesthesia services for diagnosis,~~  
8 ~~consultation, and treatment of emergency medical conditions.~~

9 (c-5) A certified registered nurse anesthetist, who  
10 provides anesthesia and related services outside of a hospital  
11 or ambulatory surgical treatment center shall enter into a  
12 written collaborative agreement with an anesthesiologist or  
13 the physician licensed to practice medicine in all its  
14 branches or the podiatric physician performing the procedure.  
15 The collaborative agreement may, but is not required to,  
16 include the following terms: (i) that the certified registered  
17 nurse anesthetist providing anesthesia services and the  
18 anesthesiologist, physician, or podiatric physician  
19 participate through discussion of and reach agreement on the  
20 anesthesia plan or (ii) that anesthesia services shall only be  
21 delivered when the anesthesiologist, physician, or podiatric  
22 physician is present and available on the premises for  
23 diagnosis, consultation, and treatment of emergency medical  
24 conditions. Outside of a hospital or ambulatory surgical  
25 treatment center, the certified registered nurse anesthetist  
26 may provide only those services that the collaborating

1 podiatric physician is authorized to provide pursuant to the  
2 Podiatric Medical Practice Act of 1987 and rules adopted  
3 thereunder. A certified registered nurse anesthetist may  
4 select, order, and administer medication, including controlled  
5 substances, and apply appropriate medical devices for delivery  
6 of anesthesia and related services ~~under the anesthesia plan~~  
7 ~~agreed with by the anesthesiologist or the operating physician~~  
8 ~~or operating podiatric physician.~~

9 (c-10) A certified registered nurse anesthetist who  
10 provides anesthesia services in a dental office shall enter  
11 into a written collaborative agreement with an  
12 anesthesiologist or the physician licensed to practice  
13 medicine in all its branches or the operating dentist  
14 performing the procedure. The agreement shall describe the  
15 working relationship of the certified registered nurse  
16 anesthetist and dentist and shall authorize the categories of  
17 care, treatment, or procedures to be performed by the  
18 certified registered nurse anesthetist. The collaborative  
19 agreement may, but is not required to, include the following  
20 terms: (i) that the certified registered nurse anesthetist  
21 providing anesthesia services and the anesthesiologist,  
22 physician, or podiatric physician participate through  
23 discussion of and reach agreement on the anesthesia plan or  
24 (ii) that anesthesia services shall only be delivered when the  
25 anesthesiologist, physician, or podiatric physician is present  
26 and available on the premises for diagnosis, consultation, and

1 treatment of emergency medical conditions. In a collaborating  
2 dentist's office, the certified registered nurse anesthetist  
3 may only provide those services that the operating dentist  
4 with the appropriate permit is authorized to provide pursuant  
5 to the Illinois Dental Practice Act and rules adopted  
6 thereunder. For anesthesia services, a certified registered  
7 nurse anesthetist shall seek consultation regarding  
8 development of an anesthesia plan and treatment of patients as  
9 is appropriate to the certified registered nurse anesthetist's  
10 level of expertise and scope of practice and as is warranted by  
11 the needs of the patient ~~an anesthesiologist, physician, or~~  
12 ~~operating dentist shall participate through discussion of and~~  
13 ~~agreement with the anesthesia plan and shall remain physically~~  
14 ~~present and be available on the premises during the delivery~~  
15 ~~of anesthesia services for diagnosis, consultation, and~~  
16 ~~treatment of emergency medical conditions.~~ A certified  
17 registered nurse anesthetist may select, order, and administer  
18 medication, including controlled substances, and apply  
19 appropriate medical devices for delivery of anesthesia and  
20 related services ~~under the anesthesia plan agreed with by the~~  
21 ~~operating dentist.~~

22 (c-15) An advanced practice registered nurse who had a  
23 written collaborative agreement with a podiatric physician  
24 immediately before the effective date of Public Act 100-513  
25 may continue in that collaborative relationship or enter into  
26 a new written collaborative relationship with a podiatric

1 physician under the requirements of this Section and Section  
2 65-40, as those Sections existed immediately before the  
3 amendment of those Sections by Public Act 100-513 with regard  
4 to a written collaborative agreement between an advanced  
5 practice registered nurse and a podiatric physician.

6 (d) A copy of the signed, written collaborative agreement  
7 must be available to the Department upon request from both the  
8 advanced practice registered nurse and the collaborating  
9 physician, dentist, or podiatric physician.

10 (e) Nothing in this Act shall be construed to limit the  
11 delegation of tasks or duties by a physician to a licensed  
12 practical nurse, a registered professional nurse, or other  
13 persons in accordance with Section 54.2 of the Medical  
14 Practice Act of 1987. Nothing in this Act shall be construed to  
15 limit the method of delegation that may be authorized by any  
16 means, including, but not limited to, oral, written,  
17 electronic, standing orders, protocols, guidelines, or verbal  
18 orders.

19 (e-5) Nothing in this Act shall be construed to authorize  
20 an advanced practice registered nurse to provide health care  
21 services required by law or rule to be performed by a  
22 physician. The scope of practice of an advanced practice  
23 registered nurse does not include operative surgery. Nothing  
24 in this Section shall be construed to preclude an advanced  
25 practice registered nurse from assisting in surgery.

26 (f) An advanced practice registered nurse shall inform

1 each collaborating physician, dentist, or podiatric physician  
2 of all collaborative agreements he or she has signed and  
3 provide a copy of these to any collaborating physician,  
4 dentist, or podiatric physician upon request.

5 (g) (Blank).

6 (Source: P.A. 100-513, eff. 1-1-18; 100-577, eff. 1-26-18;  
7 100-1096, eff. 8-26-18; 101-13, eff. 6-12-19.)

8 (225 ILCS 65/65-45) (was 225 ILCS 65/15-25)

9 (Section scheduled to be repealed on January 1, 2028)

10 Sec. 65-45. Advanced practice registered nursing in  
11 hospitals, hospital affiliates, or ambulatory surgical  
12 treatment centers.

13 (a) An advanced practice registered nurse may provide  
14 services in a hospital or a hospital affiliate as those terms  
15 are defined in the Hospital Licensing Act or the University of  
16 Illinois Hospital Act or a licensed ambulatory surgical  
17 treatment center without a written collaborative agreement  
18 pursuant to Section 65-35 of this Act. An advanced practice  
19 registered nurse must possess clinical privileges recommended  
20 by the hospital medical staff and granted by the hospital or  
21 the consulting medical staff committee and ambulatory surgical  
22 treatment center in order to provide services. The medical  
23 staff or consulting medical staff committee shall periodically  
24 review the services of all advanced practice registered nurses  
25 granted clinical privileges, including any care provided in a

1 hospital affiliate. Authority may also be granted when  
2 recommended by the hospital medical staff and granted by the  
3 hospital or recommended by the consulting medical staff  
4 committee and ambulatory surgical treatment center to  
5 individual advanced practice registered nurses to select,  
6 order, and administer medications, including controlled  
7 substances, to provide delineated care. In a hospital,  
8 hospital affiliate, or ambulatory surgical treatment center,  
9 the attending physician shall determine an advanced practice  
10 registered nurse's role in providing care for his or her  
11 patients, except as otherwise provided in the medical staff  
12 bylaws or consulting committee policies.

13 (a-2) An advanced practice registered nurse privileged to  
14 order medications, including controlled substances, may  
15 complete discharge prescriptions provided the prescription is  
16 in the name of the advanced practice registered nurse and the  
17 attending or discharging physician.

18 (a-3) Advanced practice registered nurses practicing in a  
19 hospital or an ambulatory surgical treatment center are not  
20 required to obtain a mid-level controlled substance license to  
21 order controlled substances under Section 303.05 of the  
22 Illinois Controlled Substances Act.

23 (a-4) An advanced practice registered nurse meeting the  
24 requirements of Section 65-43 or 65-70 may be privileged to  
25 complete discharge orders and prescriptions under the advanced  
26 practice registered nurse's name.

1 (a-5) For anesthesia services provided by a certified  
2 registered nurse anesthetist, certified registered nurse  
3 anesthetist shall seek consultation regarding development of  
4 an anesthesia plan and treatment of patients as is appropriate  
5 to the certified registered nurse anesthetist's level of  
6 expertise and scope of practice and as is warranted by the  
7 needs of the patient ~~an anesthesiologist, physician, dentist,~~  
8 ~~or podiatric physician shall participate through discussion of~~  
9 ~~and agreement with the anesthesia plan and shall remain~~  
10 ~~physically present and be available on the premises during the~~  
11 ~~delivery of anesthesia services for diagnosis, consultation,~~  
12 ~~and treatment of emergency medical conditions, unless hospital~~  
13 ~~policy adopted pursuant to clause (B) of subdivision (3) of~~  
14 ~~Section 10.7 of the Hospital Licensing Act or ambulatory~~  
15 ~~surgical treatment center policy adopted pursuant to clause~~  
16 ~~(B) of subdivision (3) of Section 6.5 of the Ambulatory~~  
17 ~~Surgical Treatment Center Act provides otherwise. A certified~~  
18 registered nurse anesthetist may select, order, and administer  
19 medication for anesthesia and related services ~~under the~~  
20 ~~anesthesia plan agreed to by the anesthesiologist or the~~  
21 ~~physician,~~ in accordance with hospital ~~alternative~~ policy or  
22 the medical staff consulting committee policies of a licensed  
23 ambulatory surgical treatment center.

24 (b) An advanced practice registered nurse who provides  
25 services in a hospital shall do so in accordance with Section  
26 10.7 of the Hospital Licensing Act and, in an ambulatory

1 surgical treatment center, in accordance with Section 6.5 of  
2 the Ambulatory Surgical Treatment Center Act. Nothing in this  
3 Act shall be construed to require an advanced practice  
4 registered nurse to have a collaborative agreement to practice  
5 in a hospital, hospital affiliate, or ambulatory surgical  
6 treatment center.

7 (c) Advanced practice registered nurses certified as nurse  
8 practitioners, nurse midwives, or clinical nurse specialists  
9 practicing in a hospital affiliate may be, but are not  
10 required to be, privileged to prescribe Schedule II through V  
11 controlled substances when such authority is recommended by  
12 the appropriate physician committee of the hospital affiliate  
13 and granted by the hospital affiliate. This authority may, but  
14 is not required to, include prescription of, selection of,  
15 orders for, administration of, storage of, acceptance of  
16 samples of, and dispensing over-the-counter medications,  
17 legend drugs, medical gases, and controlled substances  
18 categorized as Schedule II through V controlled substances, as  
19 defined in Article II of the Illinois Controlled Substances  
20 Act, and other preparations, including, but not limited to,  
21 botanical and herbal remedies.

22 To prescribe controlled substances under this subsection  
23 (c), an advanced practice registered nurse certified as a  
24 nurse practitioner, nurse midwife, or clinical nurse  
25 specialist must obtain a controlled substance license.  
26 Medication orders shall be reviewed periodically by the

1 appropriate hospital affiliate physicians committee or its  
2 physician designee.

3 The hospital affiliate shall file with the Department  
4 notice of a grant of prescriptive authority consistent with  
5 this subsection (c) and termination of such a grant of  
6 authority, in accordance with rules of the Department. Upon  
7 receipt of this notice of grant of authority to prescribe any  
8 Schedule II through V controlled substances, the licensed  
9 advanced practice registered nurse certified as a nurse  
10 practitioner, nurse midwife, or clinical nurse specialist may  
11 register for a mid-level practitioner controlled substance  
12 license under Section 303.05 of the Illinois Controlled  
13 Substances Act.

14 In addition, a hospital affiliate may, but is not required  
15 to, privilege an advanced practice registered nurse certified  
16 as a nurse practitioner, nurse midwife, or clinical nurse  
17 specialist to prescribe any Schedule II controlled substances,  
18 if all of the following conditions apply:

19 (1) specific Schedule II controlled substances by oral  
20 dosage or topical or transdermal application may be  
21 designated, provided that the designated Schedule II  
22 controlled substances are routinely prescribed by advanced  
23 practice registered nurses in their area of certification;  
24 the privileging documents must identify the specific  
25 Schedule II controlled substances by either brand name or  
26 generic name; privileges to prescribe or dispense Schedule

1 II controlled substances to be delivered by injection or  
2 other route of administration may not be granted;

3 (2) any privileges must be controlled substances  
4 limited to the practice of the advanced practice  
5 registered nurse;

6 (3) any prescription must be limited to no more than a  
7 30-day supply;

8 (4) the advanced practice registered nurse must  
9 discuss the condition of any patients for whom a  
10 controlled substance is prescribed monthly with the  
11 appropriate physician committee of the hospital affiliate  
12 or its physician designee; and

13 (5) the advanced practice registered nurse must meet  
14 the education requirements of Section 303.05 of the  
15 Illinois Controlled Substances Act.

16 (d) An advanced practice registered nurse meeting the  
17 requirements of Section 65-43 may be privileged to prescribe  
18 controlled substances categorized as Schedule II through V in  
19 accordance with Section 65-43.

20 (Source: P.A. 99-173, eff. 7-29-15; 100-513, eff. 1-1-18.)

21 (225 ILCS 65/65-70 new)

22 Sec. 65-70. Conditions under which a written collaborative  
23 agreement not required.

24 (a) An Illinois-licensed advanced practice registered  
25 nurse certified as a certified registered nurse anesthetist

1 shall be deemed by law to possess the ability to practice  
2 without a written collaborative agreement as set forth in this  
3 Act.

4 (b) An advanced practice registered nurse certified as a  
5 certified registered nurse anesthetist who (i) has attained  
6 national certification and completed a professional practice  
7 doctorate or (ii) files with the Department a notarized  
8 attestation of completion of at least 250 hours of continuing  
9 education or training and at least 4,000 hours of clinical  
10 experience after first attaining national certification, shall  
11 not require a written collaborative agreement. Documentation  
12 of successful completion shall be provided to the Department  
13 upon request. Continuing education or training hours required  
14 by this subsection shall be in the certified registered nurse  
15 anesthetist's area of certification as set forth by Department  
16 rule.

17 The clinical experience must be in the certified  
18 registered nurse anesthetist's area of certification. The  
19 clinical experience shall be in collaboration with a physician  
20 or physicians or a certified registered nurse anesthetist with  
21 full practice authority. Completion of the clinical experience  
22 must be attested to by the collaborating physician or  
23 physicians or employer, collaborating certified registered  
24 nurse anesthetist and the certified registered nurse  
25 anesthetist. If the collaborating physician or physicians  
26 collaborating certified nurse anesthetist, or employer is

1 unable to attest to the completion of the clinical experience,  
2 the Department may accept other evidence of clinical  
3 experience as established by rule.

4 (c) The scope of practice of a certified registered nurse  
5 anesthetist with full practice authority includes:

6 (1) all matters included in subsection (c) of Section  
7 65-30 of this Act;

8 (2) practicing without a written collaborative  
9 agreement in all practice settings consistent with  
10 national certification;

11 (3) authority to prescribe both legend drugs and  
12 Schedule II through V controlled substances; this  
13 authority includes prescription of, selection of, orders  
14 for, administration of, storage of, acceptance of samples  
15 of, and dispensing over the counter medications, legend  
16 drugs, and controlled substances categorized as any  
17 Schedule II through V controlled substances, as defined in  
18 Article II of the Illinois Controlled Substances Act, and  
19 other preparations, including, but not limited to,  
20 botanical and herbal remedies;

21 (4) prescribing benzodiazepines or Schedule II  
22 narcotic drugs, such as opioids; and

23 (5) authority to obtain an Illinois controlled  
24 substance license and a federal Drug Enforcement  
25 Administration number.

26 (d) The Department may adopt rules necessary to administer

1 this Section, including, but not limited to, requiring the  
2 completion of forms and the payment of fees.

3 (e) Nothing in this Act shall be construed to authorize a  
4 certified registered nurse anesthetist with full practice  
5 authority to provide health care services required by law or  
6 rule to be performed by a physician.

7 Section 30. The Podiatric Medical Practice Act of 1987 is  
8 amended by changing Section 20.5 as follows:

9 (225 ILCS 100/20.5)

10 (Section scheduled to be repealed on January 1, 2028)

11 Sec. 20.5. Delegation of authority to advanced practice  
12 registered nurses.

13 (a) A podiatric physician in active clinical practice may  
14 collaborate with an advanced practice registered nurse in  
15 accordance with the requirements of the Nurse Practice Act.  
16 Collaboration shall be for the purpose of providing podiatric  
17 care and no employment relationship shall be required. A  
18 written collaborative agreement shall conform to the  
19 requirements of Section 65-35 of the Nurse Practice Act. A  
20 written collaborative agreement and podiatric physician  
21 collaboration and consultation shall be adequate with respect  
22 to advanced practice registered nurses if all of the following  
23 apply:

24 (1) With respect to the provision of anesthesia

1 services by a certified registered nurse anesthetist, the  
2 collaborating podiatric physician must have training and  
3 experience in the delivery of anesthesia consistent with  
4 Department rules unless the certified registered nurse  
5 anesthetist has full practice authority under the  
6 requirements of Section 65-70.

7 (2) Methods of communication are available with the  
8 collaborating podiatric physician in person or through  
9 telecommunications or electronic communications for  
10 consultation, collaboration, and referral as needed to  
11 address patient care needs.

12 (3) With respect to the provision of anesthesia  
13 services by a certified registered nurse anesthetist,  
14 certified registered nurse anesthetist shall seek  
15 consultation regarding development of an anesthesia plan  
16 and treatment of patients as is appropriate to the  
17 certified registered nurse anesthetist's level of  
18 expertise and scope of practice and as is warranted by the  
19 needs of the patient ~~an anesthesiologist, physician, or~~  
20 ~~podiatric physician shall participate through discussion~~  
21 ~~of and agreement with the anesthesia plan and shall remain~~  
22 ~~physically present and be available on the premises during~~  
23 ~~the delivery of anesthesia services for diagnosis,~~  
24 ~~consultation, and treatment of emergency medical~~  
25 ~~conditions. The anesthesiologist or operating podiatric~~  
26 ~~physician must agree with the anesthesia plan prior to the~~

1       ~~delivery of services.~~

2       (b) The collaborating podiatric physician shall have  
3 access to the records of all patients attended to by an  
4 advanced practice registered nurse.

5       (c) Nothing in this Section shall be construed to limit  
6 the delegation of tasks or duties by a podiatric physician to a  
7 licensed practical nurse, a registered professional nurse, or  
8 other appropriately trained persons.

9       (d) A podiatric physician shall not be liable for the acts  
10 or omissions of an advanced practice registered nurse solely  
11 on the basis of having signed guidelines or a collaborative  
12 agreement, an order, a standing order, a standing delegation  
13 order, or other order or guideline authorizing an advanced  
14 practice registered nurse to perform acts, unless the  
15 podiatric physician has reason to believe the advanced  
16 practice registered nurse lacked the competency to perform the  
17 act or acts or commits willful or wanton misconduct.

18       (e) A podiatric physician, may, but is not required to  
19 delegate prescriptive authority to an advanced practice  
20 registered nurse as part of a written collaborative agreement  
21 and the delegation of prescriptive authority shall conform to  
22 the requirements of Section 65-40 of the Nurse Practice Act.

23       (Source: P.A. 99-173, eff. 7-29-15; 100-513, eff. 1-1-18.)

24       Section 99. Effective date. This Act takes effect upon  
25 becoming law.

1 INDEX

2 Statutes amended in order of appearance

3 210 ILCS 5/6.5

4 210 ILCS 85/10.7

5 225 ILCS 25/8.1 from Ch. 111, par. 2308.1

6 225 ILCS 60/54.5

7 225 ILCS 65/65-35 was 225 ILCS 65/15-15

8 225 ILCS 65/65-45 was 225 ILCS 65/15-25

9 225 ILCS 65/65-70 new

10 225 ILCS 100/20.5