



# Ohio Legislative Service Commission

## Bill Analysis

Brian D. Malachowsky

### H.B. 359

130th General Assembly  
(As Introduced)

**Reps.** Sprague, Antonio, Baker, Buchy, Sheehy, Smith

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## BILL SUMMARY

- Requires the Director of Health to develop a one-page information sheet explaining the addictive nature of a controlled substance that is a schedule II drug or contains an opioid.
- Requires a health care professional who prescribes or personally furnishes a controlled substance that contains an opioid to give the patient a copy of the information sheet developed by the Director.

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## CONTENT AND OPERATION

### Information sheet on addictive drugs

The bill requires the Director of Health to develop a one-page information sheet explaining the addictive nature of a controlled substance that is a schedule II drug or contains an opioid. To the extent possible, the form is to reflect the particular nature of each drug for which the information is provided.<sup>1</sup>

### Prescribers to provide information sheet to patients

The bill requires a health care professional who prescribes or personally furnishes a controlled substance that contains an opioid to give the patient a copy of the information sheet developed by the Director. If the patient is a minor or not competent, the health care professional must give the information sheet to the patient's parent or guardian, or another person who is responsible for the patient.<sup>2</sup>

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<sup>1</sup> R.C. 3701.142.

<sup>2</sup> R.C. 4715.303, 4723.283, 4725.191, 4730.252, and 4731.229.

The health care professionals who are subject to the bill are those with authority under current law to prescribe, or prescribe and personally furnish, prescription drugs. These professionals and the actions when the bill requires the information sheet to be provided are as follows:

- Physicians – when prescribing or personally furnishing the drugs;
- Dentists – when prescribing or personally furnishing the drugs;
- Clinical nurse specialists, certified nurse-midwives, and certified nurse practitioners holding certificates to prescribe – when prescribing the drugs;
- Physician assistants holding certificates to prescribe – when prescribing the drugs;
- Optometrists holding therapeutic pharmaceutical agents certificates – when prescribing the drugs.

Physicians and dentists are authorized to prescribe and personally furnish drugs. The Revised Code does not define "personally furnish," but it is a term that is used to describe the action of directly providing a patient with a complete or partial supply of a drug in a manner that is similar to the action of a pharmacist dispensing a drug pursuant to a prescription.<sup>3</sup>

In the case of clinical nurse specialists, certified nurse-midwives, certified nurse practitioners, and physician assistants, the drugs for which the bill requires an information sheet to be provided may be included in the professionals' prescriptive authority, but the drugs are not included in the professionals' authority to personally furnish drugs.<sup>4</sup>

In the case of optometrists, the bill applies when the drugs are prescribed, but does not apply when they are personally furnished. Optometrists are permitted to prescribe limited amounts of schedule III controlled substances and may personally furnish, without charge, limited supplies of therapeutic pharmaceutical agents, which include those schedule III controlled substances.<sup>5</sup>

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<sup>3</sup> R.C. 4729.29 and 4729.291, not in the bill.

<sup>4</sup> R.C. 4723.481 and 4730.43, not in the bill.

<sup>5</sup> R.C. 4725.01(C)(1)(d), 4725.02(D), and 4725.091, not in the bill; Ohio Administrative Code 4725-16-05.



## Controlled substances and opioids

Controlled substances are drugs that have a greater potential for abuse or dependency than other drugs. They are "scheduled" in federal and state law according to their level of risk. Schedule I controlled substances are drugs with no currently accepted medical use, have a high potential for abuse and dependence, and cannot be prescribed. Schedule II controlled substances include strong analgesics such as opium, morphine, and oxycodone; certain depressants, including pentobarbital; and certain amphetamines. Schedule III and IV controlled substances have respectively lower risks of abuse and dependence. Schedule II, III, and IV controlled substances are available only by prescription. Schedule V controlled substances, which consist of preparations containing limited quantities of certain narcotics, have the least risk of the scheduled drugs.<sup>6</sup>

Opioids, also known as narcotics, are drugs that include opium or opium derivatives and their synthetic equivalents. Examples are heroin, OxyContin, Vicodin, morphine, and methadone. The poppy plant (*Papaver somniferum*) is the source for all natural opioids, whereas synthetic opioids are made entirely in laboratories. Semi-synthetic opioids are synthesized from naturally occurring opium products such as morphine and codeine.<sup>7</sup>

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## HISTORY

ACTION	DATE
Introduced	11-21-13

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<sup>6</sup> U.S. Drug Enforcement Administration, *Drug Schedules* (last visited January 4, 2014), available at <<http://www.justice.gov/dea/druginfo/ds.shtml>>.

<sup>7</sup> U.S. Drug Enforcement Administration, *Drugs of Abuse: A DEA Resource Guide*, 2011 ed. (last visited January 4, 2014), available at: <<http://www.justice.gov/dea/pr/publications.shtml>>.

