## GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2025

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## HOUSE BILL 746 PROPOSED COMMITTEE SUBSTITUTE H746-PCS10475-BP-12

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upon the direction of a health care provider.

**Short Title:** Limited Immunity/Nurses. (Public) Sponsors: Referred to: April 3, 2025 A BILL TO BE ENTITLED AN ACT TO PROVIDE LIMITED IMMUNITY AGAINST MEDICAL MALPRACTICE FOR REGISTERED NURSES ACTING UNDER THE SUPERVISION OF A HEALTH CARE PROVIDER AS ARTICULATED IN BYRD V. MARION GENERAL HOSPITAL, 202 N.C. 337 (1932). Whereas, Byrd v. Marion General Hospital, 202 N.C. 337 (1932) established case law in North Carolina, enduring for 90 years, that prevented a registered nurse from being liable when acting under the orders of a physician; and Whereas, that case law was overturned in Connette ex rel. Gullatte v. Charlotte Mecklenburg Hospital Authority, 2022-NCSC-95; and Whereas, both the majority of the court and the dissent in that decision pointed out that the authority to prevent this liability is a function of the North Carolina General Assembly. but the General Assembly has been silent; and Whereas, this General Assembly establishes the prevention from this liability with the enactment of this general law; Now, therefore, The General Assembly of North Carolina enacts: **SECTION 1.** Article 1B of Chapter 90 of the General Statutes is amended by adding a new section to read: "§ 90-21.15B. Registered nurses; limited immunity. If a nurse acts at the direction of a supervising health care provider during the course of health care treatment, then the following standards apply: The nurse does not owe a separate duty of care to the patient, independent of (1) the duty of care owed by the health care provider. The nurse is not engaged in a collaborative process with joint responsibility (2) as part of a health care team. The primary duty of a nurse is to diligently execute the orders of a physician. (3) (4) The collaboration of a registered nurse with other supervising health care providers under G.S. 90-18.2 does not create an independent separate duty of care to the patient, unless the registered nurse acts independently of or departs from the supervision of a health care provider as required by G.S. 90-171.20(7) and G.S. 90-18(c)(14). No recovery under a medical malpractice action shall be allowed against a nurse upon (b) the sole grounds that the nurse owed a separate duty of care to the patient if the nurse was acting



Nothing in this section shall be construed to exempt nurses from any of the following:

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1		<u>(1)</u>	Acts or omissions which are not in accordance with the stand	lards of practice
2			<u>in G.S. 90-21.12.</u>	_
3		<u>(2)</u>	Acts or omissions that are so obviously negligent as to lead	any reasonable
4			person to anticipate that substantial injury would result to th	e patient by the
5			execution of that act or omission.	
6		<u>(3)</u>	Acts or omissions constituting gross negligence, wanto	on conduct, or
7			intentional wrongdoing.	
8	<u>(d)</u>	This se	ection shall not apply to nurses acting outside of the supervision	of a health care
9	provider."			
10		SECT	TION 2. This act is effective when it becomes law and ap	plies to acts or
11	omissions occurring on or after that date.			

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