(mirrors MA law)

Section 12DD. (a) As used in this section, the following words shall have the following meanings unless the context clearly requires otherwise:

“Long-term antibiotic therapy”, the administration of oral, intramuscular or intravenous antibiotics singly or in combination, for periods of time in excess of 4 weeks.

“Lyme disease”, the clinical diagnosis of a patient by a physician licensed under section 2 of the presence of signs or symptoms compatible with acute infection with Borrelia burgdorferi; late stage, persistent or chronic infection with Borrelia burgdorferi; complications related to such infection; or with such other strains of Borrelia that become identified or recognized by the National Centers for Disease Control and Prevention as a cause of Lyme disease; provided, however, that “Lyme disease” shall also include an infection that meets the surveillance criteria set forth by the National Centers for Disease Control and Prevention and a clinical diagnosis of Lyme disease that does not meet the National Centers for Disease Control and Prevention surveillance criteria but presents other acute and chronic signs or symptoms of Lyme disease as determined by the treating physician; and provided further, that clinical diagnosis shall be based on knowledge obtained through medical history and physical examination only or in conjunction with testing that provides supportive data for such clinical diagnosis.

(b) A licensed physician may prescribe, administer or dispense long-term antibiotic therapy for a therapeutic purpose to eliminate infection or to control a patient’s symptoms upon making a clinical diagnosis that the patient has Lyme disease or displays symptoms consistent with a clinical diagnosis of Lyme disease, if such clinical diagnosis and treatment are documented in the patient’s medical record by the prescribing licensed physician.
Rep. Herbig Proposed amendment to LD 422, *An Act to Improve Access to Treatments for Lyme Disease*

Change the bill title to: *Resolve, Directing Certain Health Care Practitioner Licensing Boards to Notify Licensees of Consequences of Using Non-traditional Treatment Methods.*

Further amend the bill to replace the bill with the following:

**Sec. 1. Lyme Disease, Notification to Licensees.** Resolved: That the Board of Licensure in Medicine, Board of Osteopathic Licensure, and Board of Nursing shall each notify their respective licensees that using non-traditional treatments for diseases, including Lyme disease, will not result in disciplinary action based solely upon the use of non-traditional treatment so long as the medical decision-making, monitoring of the patient’s reaction to the specific treatment, and the patient’s informed consent to the specific treatment are documented in the patient medical record.