



Substitute House Bill No. 6200

Public Act No. 09-128

**AN ACT CONCERNING THE USE OF LONG-TERM ANTIBIOTICS
FOR THE TREATMENT OF LYME DISEASE.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (*Effective July 1, 2009*) (a) As used in this section, (1) "long-term antibiotic therapy" means the administration of oral, intramuscular or intravenous antibiotics, singly or in combination, for periods of time in excess of four weeks; and (2) "Lyme disease" means the clinical diagnosis by a physician, licensed in accordance with chapter 370 of the general statutes, of the presence in a patient of signs or symptoms compatible with acute infection with *borrelia burgdorferi*; or with late stage or persistent or chronic infection with *borrelia burgdorferi*, or with complications related to such an infection; or such other strains of *borrelia* that, on and after July 1, 2009, are recognized by the National Centers for Disease Control and Prevention as a cause of Lyme disease. Lyme disease includes an infection that meets the surveillance criteria set forth by the National Centers for Disease Control and Prevention, and other acute and chronic manifestations of such an infection as determined by a physician, licensed in accordance with the provisions of chapter 370 of the general statutes, pursuant to a clinical diagnosis that is based on knowledge obtained through medical history and physical examination alone, or in conjunction with testing that provides

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supportive data for such clinical diagnosis.

(b) On and after July 1, 2009, a licensed physician may prescribe, administer or dispense long-term antibiotic therapy to a patient for a therapeutic purpose that eliminates such infection or controls a patient's symptoms upon making a clinical diagnosis that such patient has Lyme disease or displays symptoms consistent with a clinical diagnosis of Lyme disease, provided such clinical diagnosis and treatment are documented in the patient's medical record by such licensed physician. Notwithstanding the provisions of sections 20-8a and 20-13e of the general statutes, on and after said date, the Department of Public Health shall not initiate a disciplinary action against a licensed physician and such physician shall not be subject to disciplinary action by the Connecticut Medical Examining Board solely for prescribing, administering or dispensing long-term antibiotic therapy to a patient clinically diagnosed with Lyme disease, provided such clinical diagnosis and treatment has been documented in the patient's medical record by such licensed physician.

(c) Nothing in this section shall prevent the Connecticut Medical Examining Board from taking disciplinary action for other reasons against a licensed physician, pursuant to section 19a-17 of the general statutes, or from entering into a consent order with such physician pursuant to subsection (c) of section 4-177 of the general statutes. Subject to the limitation set forth in subsection (b) of this section, for purposes of this section, the Connecticut Medical Examining Board may take disciplinary action against a licensed physician if there is any violation of the provisions of section 20-13c of the general statutes.

Approved June 18, 2009