

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2025

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HOUSE BILL 746
Committee Substitute Favorable 4/29/25

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.

(a) 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:

(1) The nurse does not owe a separate duty of care to the patient, independent of
the duty of care owed by the health care provider.

(2) The nurse is not engaged in a collaborative process with joint responsibility
as part of a health care team.

(3) The primary duty of a nurse is to diligently execute the orders of a physician.

(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).

(b) No recovery under a medical malpractice action shall be allowed against a nurse upon
the sole grounds that the nurse owed a separate duty of care to the patient if the nurse was acting
upon the direction of a health care provider.

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



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- 1 (1) Acts or omissions which are not in accordance with the standards of practice
2 in G.S. 90-21.12.
3 (2) Acts or omissions that are so obviously negligent as to lead any reasonable
4 person to anticipate that substantial injury would result to the patient by the
5 execution of that act or omission.
6 (3) Acts or omissions constituting gross negligence, wanton conduct, or
7 intentional wrongdoing.
8 (d) This section shall not apply to nurses acting outside of the supervision of a health care
9 provider."

10 **SECTION 2.** This act is effective when it becomes law and applies to acts or
11 omissions occurring on or after that date.