JOE LOMBARDO
Governor

HELEN PARK
President

J. DAVID WUEST
Executive Secretary

STATE OF NEVADA

BOARD OF PHARMACY

985 Damonte Ranch Pkwy, Ste 206
Reno, NV 89521

Posted: October 28, 2025

NOTICE OF INTENT TO ACT UPON A REGULATION

Notice of Hearing for the Adoption and Amendment of
Regulations of the Nevada State Board of Pharmacy

The Nevada State Board of Pharmacy will hold a Public Hearing at 9:00 a.m. on Thursday, December 4, 2025.

Pursuant to NRS 241.023(1)(c) the meeting is being conducted by means of remote technology. The public may attend the meeting via live stream remotely or at the following location:

Hilton Garden Inn
7830 S. Las Vegas Boulevard
Las Vegas, NV

Via Videoconference at Zoom: https://zoom.us/j/5886256671
or
Via Teleconference at 1 (669) 900-6833
Meeting ID: 588 625 6671

The purpose of the hearing is to receive comments from all interested persons regarding the adoption and amendment of regulations that pertain to Chapter 639 and/or 453 of the Nevada Administrative Code.

The following information is provided pursuant to the requirements of NRS 233B.060:

A related to pharmacy; revising the licensing requirements for facilities for treatment with narcotics; and providing other matters properly relating thereto. (LCB File No. R197-24)

1. The need for and the purpose of the proposed regulation or amendment.

The need for this regulation is so that we can help patients with substance use disorders. The regulation will require narcotic treatment programs to have their facilities licensed with the Board of Pharmacy.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no economic impact from this regulation amendment on the regulated entities or on the public. The regulation amendment will have a beneficial effect on the regulated entities and on the public by helping people with substance use disorders.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be beneficial by helping people with substance use disorders.

4. The estimated cost to the agency for enforcement of the proposed regulation.

The cost to the Board for enforcement of the proposed regulation cannot be determined at this time since it will be dependent upon the number of applicants for registration/licensure.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any other state or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

The regulation amendment increases the fees for the investigation or issuance or renewal of a license for insert license type. The revenue generated from the fee increase will partially offset the costs of regulatory enforcement of this regulation incurred by the Board of Pharmacy.

Persons wishing to comment upon the proposed action of the Board may appear at the scheduled public hearing or may address their comments, data, views, or arguments, in written form, to the Board at teambc@pharmacy.nv.gov or to the Nevada State Board of Pharmacy, 985 Damonte Ranch Parkway, Suite 206 – Reno, NV 89521. Written submissions must be received by the Board on or before December 4, 2025. If no person who is directly affected by the proposed action appears to request time to make an oral presentation, the Board may proceed immediately to act upon any written submissions.

Members of the public who are disabled and require special accommodations or assistance at the meeting are requested to notify the Nevada State Board of Pharmacy in writing at 985 Damonte Ranch Pkwy., #206, Reno, Nevada 89521, or by calling (775) 850-1440. Please notify us at least one (1) week prior to the scheduled meeting date to allow time to secure any necessary equipment or provisions prior to the meeting.

This notice and the text of the proposed regulation are also available in the State of Nevada Register of Administrative Regulations which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653, and on the Internet at http://www.leg.state.nv.us. Copies of this notice and the proposed regulation will also be mailed to members of the public upon request.

Pursuant to NRS 233B.064(1), upon adoption of any regulation, the Board, if requested to do so by an interested person, either before adoption or within 30 days thereafter, will issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

This notice of hearing has been posted at:

www.notice.nv.gov
www.bop.nv.gov
www.leg.state.nv.us.

Nevada State Board of Pharmacy
Reno, Nevada

Nevada State Board of Pharmacy
Las Vegas, Nevada

Nevada State Library
100 N. Stewart St.
Carson City, NV 89701

PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R197-24

July 21, 2025

EXPLANATION – Matter in ***italics*** is new; matter in brackets **[**~~omitted material~~**]** is material to be omitted.

AUTHORITY: §§ 1, 4 and 5, NRS 453.221, 639.070 and 639.2177; § 2, NRS 639.070 and 639.170; § 3, NRS 639.070 and 639.0727.

A REGULATION relating to pharmacy; eliminating certain definitions; revising certain terminology; imposing certain requirements on a facility for treatment with narcotics; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes the State Board of Pharmacy to adopt regulations relating to the registration and control of the dispensing of controlled substances in Nevada. (NRS 453.221) Existing law further authorizes the Board to adopt regulations that: (1) are necessary for the protection of the public relating to the practice of pharmacy; (2) authorize the Executive Secretary of the Board to issue certificates, licenses and permits required for the practice of pharmacy or for the dispensing of controlled substances; and (3) govern the dispensing of poisons, drugs, chemicals and medicines. (NRS 639.070) Existing regulations require a facility for treatment with narcotics to: (1) be licensed by the Division of Public and Behavioral Health of the Department of Health and Human Services; and (2) obtain a license from the Board to administer opioid agonist treatment medication. (NAC 449.15445, section 1 of LCB File No. R196-22) **Sections 2 and 4** of this regulation make nonsubstantive revisions to provide that the license issued by the Board is to administer a facility for treatment with narcotics rather than to administer opioid agonist treatment medication. **Section 4** requires an applicant for a license to administer a facility for treatment with narcotics to be registered with the Drug Enforcement Administration of the United States Department of Justice as a narcotic treatment program. **Section 4** authorizes a facility for treatment with narcotics to administer or dispense certain controlled substances to a person who is dependent on opioids, but prohibits a facility for treatment with narcotics from prescribing controlled substances or dangerous drugs. **Section 4** requires a facility for treatment with narcotics to employ a medical director and requires the medical director to possess certain qualifications. **Section 4** requires a facility for treatment with narcotics to comply with all applicable federal and state laws and regulations. **Section 1** of this regulation: (1) removes a reference to a definition in federal regulations that no longer exists; and (2) updates an internal reference to a section of the Nevada Revised Statutes that was amended during the 2025 Legislative Session. **Section 3** of this regulation eliminates a duplicative definition.

Section 1. NAC 639.010 is hereby amended to read as follows:

639.010 As used in this chapter, unless the context otherwise requires:

1. "Automated drug dispensing system" means a system that performs operations, other than compounding or administration, related to the storage and dispensing of drugs.

2. "Board" means the State Board of Pharmacy.

3. "Controlled substance" has the meaning ascribed to it in NRS 0.031.

4. "Dangerous drug" has the meaning ascribed to it in NRS 454.201.

5. "Direct supervision" means the direction given by a supervising pharmacist or dispensing practitioner who is:

(a) On the premises of the pharmacy or telepharmacy at all times when the person he or she is supervising is working at the pharmacy or telepharmacy or at a remote site or satellite consultation site; and

(b) Aware of the activities of that person related to the preparation and dispensing of medications, including the maintenance of appropriate records.

6. "Dispensing practitioner" means:

(a) A practitioner to whom the Board has issued a certificate of registration pursuant to NAC 639.742 to dispense controlled substances or dangerous drugs, or both, for human consumption;

(b) A licensed veterinarian to whom the Board has issued a certificate of registration pursuant to NAC 639.7423 to dispense controlled substances or dangerous drugs, or both, not for human consumption; or

(c) A registered nurse to whom the Board has issued a certificate of registration pursuant to section 1 of LCB File No. R013-24 to dispense dangerous drugs for human consumption.

7. “Dispensing technician” means a person who performs technical services in a pharmacy under the direct supervision of a dispensing practitioner and is registered with the Board pursuant to NAC 639.7425.

8. “Dispensing technician in training” means a person who is registered with the Board pursuant to NAC 639.7424 in order to obtain the training and experience required to be a dispensing technician pursuant to subparagraph (1) of paragraph (c) of subsection 2 of NAC 639.7425.

9. “Executive Secretary” means the Executive Secretary employed by the Board pursuant to NRS 639.040.

10. “Facility for treatment with narcotics” has the meaning ascribed to it in NAC 449.1542.

11. “Federally-qualified health center” has the meaning ascribed to it in 42 U.S.C. § 1396d(l)(2)(B).

12. “Federally-qualified health center vehicle” means a vehicle that meets the requirements of paragraph (c) of subsection 1 of NAC 639.7422.

13. “Licensed veterinarian” has the meaning ascribed to it in NRS 638.007.

14. “Oncology group practice” means two or more dispensing practitioners who practice oncology in a group practice.

15. ~~[“Opioid agonist treatment medication” has the meaning ascribed to it in 42 C.F.R. § 8.2.~~

~~16.]~~ “Pharmaceutical technician” means a person who performs technical services in a pharmacy under the direct supervision of a pharmacist and is registered with the Board pursuant to NAC 639.240.

~~[17.]~~ ***16.*** "Pharmaceutical technician in training" means a person who is registered with the Board pursuant to NAC 639.242 in order to obtain the training and experience required to be a pharmaceutical technician pursuant to subparagraph (3) of paragraph (d) of subsection 2 of NAC 639.240, or who is enrolled in a program of training for pharmaceutical technicians that is approved by the Board.

~~[18.]~~ ***17.*** "Practitioner" has the meaning ascribed to it in NRS 639.0125.

~~[19.]~~ ***18.*** "Prescription drug" means a drug or medicine as defined in NRS 639.007 which:

(a) May be dispensed only upon a prescription order that is issued by a practitioner; and

(b) Is labeled with the symbol "Rx only" pursuant to federal law or regulation.

~~[20.]~~ ***19.*** "Public or nonprofit agency" means a health center as defined in 42 U.S.C. § 254b(a) which:

(a) Provides health care primarily to medically underserved persons in a community;

(b) Is receiving a grant issued pursuant to 42 U.S.C. § 254b or, although qualified to receive such a grant directly from the Federal Government, is receiving money from such a grant under a contract with the recipient of that grant; and

(c) Is not a medical facility as defined in NRS 449.0151.

~~[21.]~~ ***20.*** "Reproductive healthcare center" means a health facility owned and operated by a nonprofit corporation or a public health center, as defined in subsection ~~[8]~~ ***9*** of NRS 449.260, ***as amended by section 225 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3718,*** principally engaged in providing family planning services and reproductive healthcare, including, without limitation, the testing, diagnosis and treatment of, or providing of medication to prevent, a sexually transmitted infection or other infection of the urogenital system.

~~[22.]~~ ***21.*** "Surgical center for ambulatory patients" has the meaning ascribed to it in NRS 449.019.

~~[23.]~~ ***22.*** "User-based access technology" means software or hardware that restricts access to an automated drug dispensing system to authorized users by requiring two-factor authentication. Authentication factors may include, without limitation, knowledge, hardware tokens or biometric information.

Sec. 2. NAC 639.220 is hereby amended to read as follows:

639.220 1. The Board hereby adopts the following schedule of fees:

For the examination of an applicant for registration as a pharmacist ..... Actual cost of the examination

For the investigation or registration of an applicant as a registered pharmacist.....$200

For the investigation, examination or registration of an applicant as a registered pharmacist by reciprocity.....200

For the investigation or issuance of an original license to conduct a retail pharmacy 500

For the biennial renewal of a license to conduct a retail pharmacy 500

For the investigation or issuance of an original license to conduct an institutional pharmacy 500

For the biennial renewal of a license to conduct an institutional pharmacy 500

For the investigation or issuance of an original license to conduct a pharmacy in a correctional institution 500

For the biennial renewal of a license to conduct a pharmacy in a correctional institution 500

For the investigation or issuance of an original license to conduct a pharmacy in a recovery center or ambulatory surgical center licensed pursuant to chapter 449 of NRS 500

For the biennial renewal of a license to conduct a pharmacy in a recovery center or ambulatory surgical center licensed pursuant to chapter 449 of NRS 500

For the issuance of an original or duplicate certificate of registration as a registered pharmacist 50

For the biennial renewal of registration as a registered pharmacist 200

For the reinstatement of a lapsed registration (in addition to the fees for renewal for the period of lapse) 100

For the initial registration of a pharmaceutical technician, pharmaceutical technician in training, dispensing technician or dispensing technician in training 50

For the biennial renewal of registration of a pharmaceutical technician, pharmaceutical technician in training, dispensing technician or dispensing technician in training 50

For the investigation or registration of an intern pharmacist 40

For the biennial renewal of registration as an intern pharmacist 40

For the investigation or registration of an advanced practice registered nurse or a physician assistant to prescribe drugs that are not controlled substances 80

For the biennial renewal of registration of an advanced practice registered nurse or a physician assistant to prescribe drugs that are not controlled substances 80

For authorization of a physician, advanced practice registered nurse, physician assistant, euthanasia technician, researcher, instructional user or any other authorized person, except a practitioner who is a medical intern or resident physician, to prescribe or possess controlled substances 200

For the biennial renewal of authorization of a physician, advanced practice registered nurse, physician assistant, euthanasia technician, researcher, instructional user or any other authorized person, except a practitioner who is a medical intern or resident physician, to prescribe or possess controlled substances 200

For authorization of a certified registered nurse anesthetist to order, prescribe, possess and administer controlled substances, poisons, dangerous drugs and devices in accordance with paragraph (a) of subsection 1 of NRS 632.2397 200

For biennial renewal of authorization of a certified registered nurse anesthetist to order, prescribe, possess and administer controlled substances, poisons, dangerous drugs and devices in accordance with paragraph (a) of subsection 1 of NRS 632.2397 200

For authorization of a practitioner who is a medical intern or resident physician to prescribe or possess controlled substances 80

For the biennial renewal of authorization of a practitioner who is a medical intern or resident physician to prescribe or possess controlled substances 80

For the investigation or issuance of an original license to engage in business as an authorized warehouse or medical products provider 500

For the biennial renewal of a license to engage in business as an authorized warehouse or medical products provider.....500

For the investigation or issuance of an original license to a manufacturer or wholesaler.....1,000

For the biennial renewal of a license for a manufacturer or wholesaler 1,000

For the reissuance of a license issued to a pharmacy, when no change of ownership is involved, but the license must be reissued because of a change in the information required thereon.....50

For authorization of a practitioner, other than a licensed veterinarian, to dispense controlled substances or dangerous drugs, or both, for human consumption for each location where the practitioner will dispense controlled substances or dangerous drugs, or both, for human consumption.....300

For the biennial renewal of authorization of a practitioner, other than a licensed veterinarian, to dispense controlled substances or dangerous drugs, or both, for human consumption for each location where the practitioner will dispense controlled substances or dangerous drugs, or both, for human consumption.....300

For authorization of a licensed veterinarian to dispense controlled substances or dangerous drugs, or both, not for human consumption.....150

For the biennial renewal of authorization of a licensed veterinarian to dispense controlled substances or dangerous drugs, or both, not for human consumption.....150

For authorization of a registered nurse to dispense dangerous drugs for human consumption while engaged in the performance of a public health program approved by the Board 300

For the biennial renewal of authorization of a registered nurse to dispense dangerous drugs for human consumption while engaged in the performance of a public health program approved by the Board.....300

For the investigation or issuance of an original license for an automated drug dispensing system.....500

For the biennial renewal of a license for an automated drug dispensing system 500

For the investigation or issuance of an original license to a pharmacy authorizing the use of a mechanical device to furnish drugs and medications for administration to patients at a medical facility 250

For the biennial renewal of a license to a pharmacy authorizing the use of a mechanical device to furnish drugs and medications for administration to patients at a medical facility 250

For the investigation or issuance of an original license for a facility for treatment with narcotics ~~[to administer opioid agonist treatment medication]~~ 80

For the biennial renewal of a license for a facility for treatment with narcotics ~~[to administer opioid agonist treatment medication]~~ 80

2. The penalty for failure to pay the renewal fee for any license, permit or certificate within the statutory period, as provided in subsection 6 of NRS 639.170, is 50 percent of the renewal fee for each period of delinquency in addition to the renewal fee for each period of delinquency.

3. Any person who has been registered as a pharmacist in this State for at least 50 years is not required to pay the fee for the biennial renewal of a certificate of registration as a registered pharmacist.

4. The provisions of this section concerning the fee for the biennial renewal of the authorization to dispense controlled substances or dangerous drugs do not apply to an advanced practice registered nurse who is required to pay a fee pursuant to NAC 639.870.

5. A practitioner employed by or serving as an independent contractor of a health center:

(a) Which is a federally-qualified health center that provides health care primarily to medically underserved persons in a community; and

(b) Which is not a medical facility as defined in NRS 449.0151,

➥ is not required to pay a fee to the Board for a change of address or for an additional address at which the practitioner dispenses drugs.

6. A practitioner who is exempt from the payment of a fee pursuant to subsection 5 shall notify the Board in writing of each change of address or additional address, or both.

7. In addition to any other fees paid by an applicant for a certificate, license or permit issued pursuant to chapter 639 of NRS, the Board may require that the applicant pay the actual costs of inspection incurred by the Board.

Sec. 3. NAC 639.719 is hereby amended to read as follows:

639.719 1. Except as otherwise provided in this section, one or more dispensing practitioners practicing at a reproductive healthcare center may use an automated drug dispensing system and maintain a shared inventory in the automated drug dispensing system to dispense a prescription drug to a patient if the reproductive healthcare center obtains a license from the Board for the automated drug dispensing system pursuant to subsection 2.

2. The Board will provide an application for a license for an automated drug dispensing system to a reproductive healthcare center upon request. The Board will issue a license for an automated drug dispensing system if the Board determines that the system dispenses prescription drugs accurately and otherwise meets the requirements of this section and the fee prescribed by NAC 639.220 is paid. A license must be:

(a) Issued for each automated drug dispensing system at a reproductive healthcare center; and

(b) Posted on the system so that the license is visible to the public.

3. The automated drug dispensing system must conform to all the following provisions:

(a) Except as otherwise provided in subsection 8, the system must contain only dangerous drugs, excluding compound drug products, for treatment in reproductive health care:

(1) Approved for use in the system by a dispensing practitioner; and

(2) For which the prescription has been processed, verified and completed in the same manner as a prescription for drugs that are delivered manually by a dispensing practitioner pursuant to NAC 639.742 and 639.745, except that the requirements of paragraph (e) of subsection 3 of NAC 639.742 do not apply.

(b) The system must:

(1) Control and track access to the system for stocking, cleaning, maintenance or any other purpose to ensure that access to the system can be obtained only by a dispensing practitioner practicing at the reproductive healthcare center.

(2) Be secure from unauthorized access to and removal of prescription drugs.

(3) Be owned or leased by the reproductive healthcare center that obtained the license for the system and operated under the supervision and control of that reproductive healthcare center.

(4) Monitor the temperature of the system or be able to have a device installed to monitor the temperature of the system. Such monitoring must include, without limitation, an alarm that records when the temperature of the system reaches a level outside the range compatible with the proper storage of a prescription drug and a method to notify the reproductive healthcare center of the temperature change.

(5) Create and maintain a complete, accurate and readily retrievable record of all transactions. The record must include, without limitation:

(I) The name, strength, quantity and form of dosage of each prescription drug stocked, inventoried, removed or dispensed from the system;

(II) Each day and time the system is accessed;

(III) An inventory of the prescription drugs stored in the system; and

(IV) The identity of each person who accesses the system.

(6) Authorize access only to patients who have previously indicated to the dispensing practitioner who prescribed the drug their desire to have their prescription drugs dispensed by the system.

(7) Provide a method to identify the patient and dispense a prescription drug only to the patient or to an authorized agent of the patient.

(8) Dispense one, any combination or all of the prescription drugs available to a patient at the option of the patient at the time that the patient removes the prescription drugs from the system.

(9) Record the date and time that the patient removes the prescription drugs from the system.

(10) Inform a patient:

(I) If the patient is using the system at the time that the reproductive healthcare center is open, that the patient may discuss questions and concerns regarding the prescription drug with the dispensing practitioner in person, if available, or through user-based access technology described in subparagraph (13).

(II) If the patient is using the system at the time that the reproductive healthcare center is closed, that the patient may discuss questions and concerns regarding the prescription drug through the user-based access technology described in subparagraph (13).

(III) That the patient may choose not to purchase the prescription drug from the system at any time before the system dispenses the prescription drug.

(11) Dispense all prescription drugs in containers labeled in conformance with NRS 639.2801.

(12) Be installed in such a place and manner that a person is unable to remove the system from its location or obtain access to the system without authorization. The system must be monitored by real-time audio-visual technology or audio-visual recording technology.

(13) Be equipped with user-based access technology that includes, without limitation, an audio-visual function that allows the patient to communicate, in real time, with a dispensing practitioner who has access to any patient record necessary for counseling the patient in compliance with NAC 639.707 and 639.708.

4. A reproductive healthcare center that dispenses prescription drugs by an automated drug dispensing system pursuant to this section shall maintain a written policy that sets forth:

(a) The duties of all persons who are authorized to access the system; and

(b) The procedures for:

(1) Maintaining the security of the prescription drugs stored in the system during the maintenance and repair of the system;

(2) The preparation of an inventory of the prescription drugs stored in the system; and

(3) Stocking the system with prescription drugs.

5. A dispensing practitioner practicing at a reproductive healthcare center that dispenses prescription drugs through an automated drug dispensing system pursuant to this section shall comply with all applicable federal and state recordkeeping requirements and shall maintain those records in a readily retrievable manner separate from other medical records.

6. Prescription drugs stored in an automated drug dispensing system pursuant to this section shall be deemed part of the inventory and the responsibility of each dispensing practitioner that uses the automated drug dispensing system at the reproductive healthcare center that holds the license for the system. Prescription drugs dispensed from the system shall be deemed to have been dispensed by that dispensing practitioner or those dispensing practitioners, as applicable.

7. The Board may prohibit a reproductive healthcare center from using an automated drug dispensing system to furnish a prescription drug to a patient if the Board determines that the system, or one or more dispensing practitioners' use of the system, does not comply with this section.

8. The provisions of this section do not prohibit the use of an automated drug dispensing system to furnish a drug or device that is approved by the Food and Drug Administration for sale over the counter without a prescription if the reproductive healthcare center using the system is otherwise authorized to use the system pursuant to this section.

~~[9. As used in this section, "reproductive healthcare center" means a health care facility that is:~~

~~(a) Owned and operated by a nonprofit corporation or a public health center, as defined in subsection 8 of NRS 449.260; and~~

~~(b) Principally engaged in providing family planning services and reproductive health care, including, without limitation, the testing, diagnosis and treatment of, or providing of medication to prevent sexually transmitted infections or other infections of the urogenital system.]~~

Sec. 4. Section 1 of LCB File No. R196-22 is hereby amended to read as follows:

Sec. 1. 1. A person or public or private facility shall not operate or provide the services of a facility for treatment with narcotics unless the person or facility holds a

license ~~[to administer opioid agonist treatment medication]~~ issued by the Board pursuant to this section.

2. A person or public or private facility may apply to the Board for a license ~~[to administer opioid agonist treatment medication]~~ by submitting an application to the Board on a form prescribed by the Board. The Board shall issue such a license if the applicant meets the requirements sets forth in subsection 3 and pays the fee required by NAC 639.220.

3. An applicant for a license pursuant to subsection 2 must:

(a) Be certified by the Substance Abuse and Mental Health Services Administration of the United States Department of Health and Human Services pursuant to 42 C.F.R. § 8.11;

(b) Hold a license issued by the Division of Public and Behavioral Health of the Department of Health and Human Services pursuant to NAC 449.154 to 449.15485, inclusive, to operate a facility for treatment with narcotics;

(c) Be certified by the Division of Public and Behavioral Health of the Department of Health and Human Services pursuant to NRS 458.025; and

(d) ~~[Ensure that each practitioner who dispenses opioid agonist treatment medication at the facility is]~~ ***Be*** registered with ~~[the Board pursuant to NRS 453.231 and]~~ the Drug Enforcement Administration of the United States Department of Justice ~~[to dispense controlled substances.]~~ ***as a narcotic treatment program, as defined in 21 C.F.R. § 1300.01.***

4. Any license issued pursuant to this section is a revocable privilege and a holder of such a license does not acquire any vested right in such a license.

5. ~~[Each dispensing practitioner practicing at a]~~ ***A facility for treatment with narcotics may administer or dispense a controlled substance listed in schedule II or III that is approved by the United States Food and Drug Administration as an opioid agonist treatment to a person who is dependent on opioids for use in the maintenance or detoxification treatment of the person. A facility for treatment with narcotics shall not prescribe a controlled substance or dangerous drug.***

6. A facility for treatment with narcotics shall:

(a) Employ a medical director who must be:

(1) A physician who is licensed to practice medicine or osteopathic medicine pursuant to chapter 630 or 633 of NRS, as applicable;

(2) Registered to dispense controlled substances pursuant to NRS 453.231; and

(3) Registered as a dispensing practitioner pursuant to NAC 639.742; and

(b) Notify the Board before changing the medical director of the facility.

7. A facility for treatment with narcotics shall ~~[, to]~~ ***:***

(a) To the extent required by 42 C.F.R. § 2.36, obtain informed consent for the reporting of information to the computerized program to track prescriptions for controlled substances established pursuant to NRS 453.162 ~~[.]~~ ***; and***

(b) Comply with all applicable federal and state laws and regulations, including, without limitation, 21 U.S.C. §§ 801 to 904, inclusive, 21 C.F.R. Chapter II and 42 C.F.R. Part 8.

8. For purposes of this section, "medical director" has the meaning ascribed to it in 42 C.F.R. § 8.2.

Sec. 5. This regulation is hereby amended by adding thereto the following transitory language which has the force and effect of law but which will not be codified in the Nevada Administrative Code:

A license to administer opioid agonist treatment medication issued pursuant to section 1 of LCB File No. 196-22 before the effective date of this regulation shall be deemed to be a license to operate a facility for treatment with narcotics issued pursuant to section 1 of LCB File No. 196-22, as amended by section 3 of this regulation, and remains valid until the date on which the license would otherwise expire.

JOE LOMBARDO
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President

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Executive Secretary

STATE OF NEVADA

BOARD OF PHARMACY

985 Damonte Ranch Pkwy, Ste 206
Reno, NV 89521

Posted: October 28, 2025

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Regulations of the Nevada State Board of Pharmacy

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Pursuant to NRS 241.023(1)(c) the meeting is being conducted by means of remote technology. The public may attend the meeting via live stream remotely or at the following location:

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Meeting ID: 588 625 6671

The purpose of the hearing is to receive comments from all interested persons regarding the adoption and amendment of regulations that pertain to Chapter 639 and/or 453 of the Nevada Administrative Code.

The following information is provided pursuant to the requirements of NRS 233B.060:

Amendment to the Nevada Administrative Code ("NAC") 639. The proposed amendments relate to the licensing requirements for facilities for intermediate care or facilities for skilled nursing licensed by the State Board of Health pursuant to NRS 449.0303 and provide other matters properly relating thereto. (LCB File No. R203-24)

1. The need for and the purpose of the proposed regulation or amendment.

The regulation sets forth the requirements necessary for intermediate care facilities or skilled nursing facilities to obtain a license from the Board of Pharmacy. The purpose is to protect the public with regard to safe and efficient acquisition, storage, handling, and administration of controlled substances and dangerous drugs, and to set the qualifications, authority, and duties of the owners and contract employees.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no economic impact from this regulation amendment on the regulated entities or on the public. The regulation amendment will have a beneficial effect on the regulated entities and on the public by having safeguards for controlled substances and dangerous drugs at intermediate care facilities or skilled nursing facilities.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be beneficial by having safeguards for controlled substances and dangerous drugs at intermediate care facilities or skilled nursing facilities.

4. The estimated cost to the agency for enforcement of the proposed regulation.

The cost to the Board for enforcement of the proposed regulation cannot be determined at this time since it will be dependent upon the number of applicants for registration/licensure.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any other state or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

The regulation amendment increases the fees for the investigation or issuance or renewal of a license for insert license type. The revenue generated from the fee increase will partially offset the costs of regulatory enforcement of this regulation incurred by the Board of Pharmacy.

Persons wishing to comment upon the proposed action of the Board may appear at the scheduled public hearing or may address their comments, data, views, or arguments, in written form, to the Board at teambc@pharmacy.nv.gov or to the Nevada State Board of Pharmacy, 985 Damonte Ranch Parkway, Suite 206 – Reno, NV 89521. Written submissions must be received by the Board on or before December 4, 2025. If no person who is directly affected by the proposed action appears to request time to make an oral presentation, the Board may proceed immediately to act upon any written submissions.

Members of the public who are disabled and require special accommodations or assistance at the meeting are requested to notify the Nevada State Board of Pharmacy in writing at 985 Damonte Ranch Pkwy., #206, Reno, Nevada 89521, or by calling (775) 850-1440. Please notify us at least one (1) week prior to the scheduled meeting date to allow time to secure any necessary equipment or provisions prior to the meeting.

This notice and the text of the proposed regulation are also available in the State of Nevada Register of Administrative Regulations which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653, and on the Internet at http://www.leg.state.nv.us. Copies of this notice and the proposed regulation will also be mailed to members of the public upon request.

Pursuant to NRS 233B.064(1), upon adoption of any regulation, the Board, if requested to do so by an interested person, either before adoption or within 30

days thereafter, will issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

This notice of hearing has been posted at:

www.notice.nv.gov
www.bop.nv.gov
www.leg.state.nv.us.

Nevada State Board of Pharmacy
Reno, Nevada

Nevada State Board of Pharmacy
Las Vegas, Nevada

Nevada State Library
100 N. Stewart St.
Carson City, NV 89701

PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R203-24

September 19, 2025

EXPLANATION – Matter in ***italics*** is new; matter in brackets **[**~~omitted material~~**]** is material to be omitted.

AUTHORITY: §§ 1, 3, 4 and 8, NRS 639.070 and 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745; §§ 2 and 5, NRS 453.221, 639.070 and 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745; §§ 6 and 7, NRS 639.070, 639.071 and 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745.

A REGULATION relating to pharmacy; adopting requirements governing the registration with the State Board of Pharmacy of facilities for intermediate care and facilities for skilled nursing which do not maintain a pharmacy on their premises and wish to maintain a stock of drugs for emergency treatment of inpatients; requiring facilities for intermediate care and facilities for skilled nursing which do not maintain a pharmacy on their premises to enter into a contract with a licensed pharmacy to perform certain functions relating to the stocking and distributing of certain drugs to be given to patients at the facility; requiring such a facility to employ or enter into a contract with a pharmacist to establish certain policies and procedures relating to the purchase, storage, maintenance of records and administration of certain drugs; establishing the duties of such a pharmacist; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law and regulations require a medical facility, including, without limitation, a facility for intermediate care or facility for skilled nursing, to obtain a license from the State Board of Pharmacy for any pharmacy that is part of or operated in conjunction with the facility for the purpose of supplying medication and pharmaceutical services to patients at the facility. (NRS 449.0151, 639.0085, 639.071, 639.100, 639.231; NAC 639.457, 639.4575, 639.462) Existing law and regulations also authorize a facility for intermediate care or a facility for skilled nursing to maintain a stock of drugs for emergency treatment of inpatients if the facility is registered with the Board and complies with certain requirements for the storage and distribution of the drugs. (NRS 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745; NAC 639.515)

Section 2 of this regulation: (1) establishes the requirements for a facility for intermediate care or a facility for skilled nursing which does not have a licensed pharmacy on its premises and wishes to maintain a stock of drugs for emergency treatment of inpatients to

register with the Board; (2) requires such a facility to register with the Drug Enforcement Administration of the United States Department of Justice to dispense controlled substances if the stock of drugs includes a controlled substance listed in schedule II, III, IV or V; and (3) requires the director of nurses at such a facility to ensure that the facility complies with certain requirements relating to the stock of drugs for emergency treatment of inpatients. **Section 5** of this regulation establishes the fee for such a registration. **Section 8** of this regulation makes a conforming change to clarify that facilities for intermediate care and facilities for skilled nursing that are registered with the Board are authorized to maintain a stock of drugs for emergency treatment of inpatients.

Sections 3 and 4 of this regulation establish requirements for the maintenance of a stock of medications for distribution in facilities for intermediate care and facilities for skilled nursing which do not have a licensed pharmacy on their premises and the filling of prescriptions for medications to be given to patients of such facilities. **Section 3** requires a facility for intermediate care or facility for skilled nursing to enter into a contract with a licensed pharmacy to: (1) supply any stock of drugs for emergency treatment of inpatients; (2) stock any supply of prepackaged drugs or furnish a supply of drugs and medicines in certain mechanical devices; and (3) process and fill any prescription for certain drugs which are to be given to a patient in the facility. **Section 3** also requires such a facility to employ or enter into a contract with a pharmacist to establish and monitor compliance with policies and procedures which satisfy certain requirements relating to the purchasing, storage, maintenance of records and administration of drugs at the facility. **Sections 4 and 7** of this regulation set forth the duties of such a pharmacist.

Section 6 of this regulation applies certain definitions in existing regulations relating to facilities for intermediate care and facilities for skilled nursing to the provisions of **sections 2, 3 and 4**.

Section 1. Chapter 639 of NAC is hereby amended by adding thereto the provisions set forth as sections 2, 3 and 4 of this regulation.

Sec. 2. ***1. Each facility which does not have a licensed pharmacy on the premises of the facility and wishes to maintain a stock of drugs for emergency treatment of inpatients pursuant to NRS 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745, shall:***

(a) Register with the Board by submitting an application on a form prescribed by the Board and paying the requisite fee prescribed by NAC 639.220; and

(b) If the stock of drugs for emergency treatment of inpatients includes controlled substances listed in schedule II, III, IV or V, register with the Drug Enforcement Administration of the United States Department of Justice to dispense controlled substances.

2. The director at a facility which is registered pursuant to this section shall ensure that the facility complies with the provisions of NRS 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745, and NAC 639.515 relating to the stock of drugs for emergency treatment of inpatients maintained at the facility.

3. Any registration issued pursuant to this section is a revocable privilege and no holder of such a registration acquires any vested right therein or thereunder.

Sec. 3. *1. Each facility which does not have a licensed pharmacy on the premises of the facility and wishes to maintain a stock of drugs for emergency treatment of inpatients pursuant to NRS 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745, stock a supply of prepackaged drugs pursuant to NAC 639.476, stock a supply of drugs and medicines in a mechanical device other than an automated drug dispensing system pursuant to NAC 639.720 or receive a prescription drug which is to be given to a patient in the facility in accordance with NAC 639.478 shall:*

(a) Enter into a contract with a licensed pharmacy to, as applicable:

(1) Supply any stock of drugs for emergency treatment of inpatients;

(2) Stock any supply of prepackaged drugs pursuant to NAC 639.476;

(3) Furnish any supply of drugs and medicines in a mechanical device other than an automated drug dispensing system pursuant to NAC 639.720; and

(4) Process and fill any prescription for a drug which is to be given to a patient in the facility in accordance with NAC 639.478; and

(b) Employ or enter into a contract with a pharmacist to establish policies and procedures which must:

(1) Be consistent with the policies and procedures developed pursuant to NAC 639.477;

(2) Require the maintenance of records relating to controlled substances in accordance with the requirements of NAC 639.485, 639.486, 639.494 and 639.496;

(3) Address the purchase, storage, maintenance of records and administering of drugs and investigational drugs;

(4) Require the maintenance of a perpetual inventory of all controlled substances;

(5) Require the storage of drugs:

(I) In accordance with the specifications of the manufacturer;

(II) For a stock of drugs for emergency treatment of inpatients maintained pursuant to NRS 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745, in accordance with the requirements of NRS 639.2327, as amended by section 279 of Senate Bill No. 494, chapter 514, Statutes of Nevada 2025, at page 3745, and NAC 639.515; and

(III) For a supply of prepackaged drugs pursuant to NAC 639.476 or a prescription drug which is to be given to a patient in the facility in accordance with NAC 639.478, in a locked cabinet or room;

(6) Prescribe procedures for quarantining and destroying any drug or investigational drug which is expired, adulterated, mislabeled or otherwise unsafe for use by humans; and

(7) Ensure that the facility administers drugs and investigational drugs pursuant to chart orders and in accordance with all applicable state and federal laws and regulations.

2. The policies and procedures established pursuant to paragraph (b) of subsection 1 must be maintained, reviewed at least annually, and dated upon adoption and amendment.

3. A pharmacist who is employed or contracted with a facility pursuant to paragraph (b) of subsection 1 may establish the policies and procedures required by that paragraph in consultation with the director or an assistant of the director at the facility.

Sec. 4. *A pharmacist who is employed by or contracted with a facility pursuant to paragraph (b) of subsection 1 of section 3 of this regulation shall:*

1. Visit the facility at least once each month to:

(a) Evaluate the effectiveness of the policies and procedures established pursuant to paragraph (b) of subsection 1 of section 3 of this regulation; and

(b) Confirm that the facility is in compliance with the provisions of this section, section 3 of this regulation and the policies and procedures established pursuant to paragraph (b) of subsection 1 of section 3 of this regulation;

2. Maintain documentation of each visit the pharmacist makes pursuant to subsection 1;

3. Conduct an audit of the facility at least once each month using a randomly selected sample of records of the facility, including, without limitation, records of patients and records relating to the purchasing, storage and administration of drugs and investigational drugs, to determine whether the records indicate that:

(a) Drugs and investigational drugs are being administered in a safe and effective manner in accordance with accepted standards of practice and the specifications of the manufacturer;

(b) A discrepancy exists between the actual quantity of drugs and investigational drugs in the possession of the facility and the quantity of drugs and investigational drugs that should be in the possession of the facility according to the records of the facility;

(c) The employees of the facility:

(1) Maintain accurate records relating to drugs; and

(2) Maintain and properly monitor the perpetual inventory of all controlled substances in accordance with the policies and procedures established pursuant to subparagraph (4) of paragraph (b) of subsection 1 of section 3 of this regulation; and

4. Submit a written report, which must include, without limitation, a written explanation, to the Board not later than 5 business days after the date on which the pharmacist determines that:

(a) The facility is violating a state or federal law or regulation which affects the care and safety of a patient;

(b) There is a discrepancy of 5 percent or more between the actual quantity of a controlled substance in the possession of the facility and the quantity of the controlled substance that should be in the possession of the facility according to the records of the facility, including, without limitation:

(1) Purchase orders and invoices for the controlled substance;

(2) Records which indicate the removal of the controlled substance from the storage area;

(3) Records of patients, including, without limitation, records of dispensing or administering the controlled substance to a patient;

(4) Records which indicate the return of the controlled substance to the manufacture or that the controlled substance was destroyed; and

(5) Any other records relating to the controlled substance;

(c) The facility has intentionally or recklessly failed to create or maintain a record required by the policies and procedures established pursuant to paragraph (b) of subsection 1 of section 3 of this regulation;

(d) The facility is administering a drug in violation of accepted standards of practice or the specifications of the manufacturer; or

(e) The facility is engaged in a practice which endangers the health, safety or welfare of a patient or employee of the facility.

Sec. 5. NAC 639.220 is hereby amended to read as follows:

639.220 1. The Board hereby adopts the following schedule of fees:

For the examination of an applicant for registration as a pharmacist ..... Actual cost of the examination

For the investigation or registration of an applicant as a registered pharmacist.....$200

For the investigation, examination or registration of an applicant as a registered pharmacist by reciprocity.....200

For the investigation or issuance of an original license to conduct a retail pharmacy 500

For the biennial renewal of a license to conduct a retail pharmacy 500

For the investigation or issuance of an original license to conduct an institutional pharmacy 500

For the biennial renewal of a license to conduct an institutional pharmacy 500

For the investigation or issuance of an original license to conduct a pharmacy in a correctional institution 500

For the biennial renewal of a license to conduct a pharmacy in a correctional institution 500

For the investigation or issuance of an original license to conduct a pharmacy in a recovery center or ambulatory surgical center licensed pursuant to chapter 449 of NRS 500

For the biennial renewal of a license to conduct a pharmacy in a recovery center or ambulatory surgical center licensed pursuant to chapter 449 of NRS 500

For the issuance of an original or duplicate certificate of registration as a registered pharmacist 50

For the biennial renewal of registration as a registered pharmacist 200

For the reinstatement of a lapsed registration (in addition to the fees for renewal for the period of lapse) 100

For the initial registration of a pharmaceutical technician, pharmaceutical technician in training, dispensing technician or dispensing technician in training 50

For the biennial renewal of registration of a pharmaceutical technician, pharmaceutical technician in training, dispensing technician or dispensing technician in training 50

For the investigation or registration of an intern pharmacist 40

For the biennial renewal of registration as an intern pharmacist 40

For authorization of a practitioner who is a medical intern or resident physician to prescribe or possess controlled substances 80

For the biennial renewal of authorization of a practitioner who is a medical intern or resident physician to prescribe or possess controlled substances 80

For the investigation or issuance of an original license to engage in business as an authorized warehouse or medical products provider 500

For the biennial renewal of a license to engage in business as an authorized warehouse or medical products provider.....500

For the investigation or issuance of an original license to a manufacturer or wholesaler.....1,000

For the biennial renewal of a license for a manufacturer or wholesaler 1,000

For the reissuance of a license issued to a pharmacy, when no change of ownership is involved, but the license must be reissued because of a change in the information required thereon.....50

For authorization of a practitioner, other than a licensed veterinarian, to dispense controlled substances or dangerous drugs, or both, for human consumption for each location where the practitioner will dispense controlled substances or dangerous drugs, or both, for human consumption.....300

For the biennial renewal of authorization of a practitioner, other than a licensed veterinarian, to dispense controlled substances or dangerous drugs, or both, for human consumption for each location where the practitioner will dispense controlled substances or dangerous drugs, or both, for human consumption.....300

For authorization of a licensed veterinarian to dispense controlled substances or dangerous drugs, or both, not for human consumption.....150

For the biennial renewal of authorization of a licensed veterinarian to dispense controlled substances or dangerous drugs, or both, not for human consumption.....150

For authorization of a registered nurse to dispense dangerous drugs for human consumption while engaged in the performance of a public health program approved by the Board 300

For the biennial renewal of authorization of a registered nurse to dispense dangerous drugs for human consumption while engaged in the performance of a public health program approved by the Board.....300

For the investigation or issuance of an original license for an automated drug dispensing system.....500

For the biennial renewal of a license for an automated drug dispensing system 500

For the investigation or issuance of an original license to a pharmacy authorizing the use of a mechanical device to furnish drugs and medications for administration to patients at a medical facility.....250

For the biennial renewal of a license to a pharmacy authorizing the use of a mechanical device to furnish drugs and medications for administration to patients at a medical facility.....250

For the investigation or issuance of an original license for a facility for treatment with narcotics to administer opioid agonist treatment medication 80

For the biennial renewal of a license for a facility for treatment with narcotics to administer opioid agonist treatment medication 80

For the investigation or issuance of an original registration for a facility for intermediate care or a facility for skilled nursing licensed pursuant to chapter 449 of NRS which does not have a licensed pharmacy on the premises of the facility and wishes to maintain a stock of drugs for emergency treatment of inpatients.....500

For the biennial renewal of a registration for a facility for intermediate care or a facility for skilled nursing licensed pursuant to chapter 449 of NRS which does not have a licensed pharmacy on the premises of the facility and wishes to maintain a stock of drugs for emergency treatment of inpatients.....500

2. The penalty for failure to pay the renewal fee for any license, permit or certificate within the statutory period, as provided in subsection 6 of NRS 639.170, is 50 percent of the renewal fee for each period of delinquency in addition to the renewal fee for each period of delinquency.

3. Any person who has been registered as a pharmacist in this State for at least 50 years is not required to pay the fee for the biennial renewal of a certificate of registration as a registered pharmacist.

4. The provisions of this section concerning the fee for the biennial renewal of the authorization to dispense controlled substances or dangerous drugs do not apply to an advanced practice registered nurse who is required to pay a fee pursuant to NAC 639.870.

5. A practitioner employed by or serving as an independent contractor of a health center:

(a) Which is a federally-qualified health center that provides health care primarily to medically underserved persons in a community; and

(b) Which is not a medical facility as defined in NRS 449.0151,

↪ is not required to pay a fee to the Board for a change of address or for an additional address at which the practitioner dispenses drugs.

6. A practitioner who is exempt from the payment of a fee pursuant to subsection 5 shall notify the Board in writing of each change of address or additional address, or both.

7. In addition to any other fees paid by an applicant for a certificate, license or permit issued pursuant to chapter 639 of NRS, the Board may require that the applicant pay the actual costs of inspection incurred by the Board.

Sec. 6. NAC 639.492 is hereby amended to read as follows:

639.492 As used in NAC 639.492 to 639.498, inclusive, ***and sections 2, 3 and 4 of this regulation,*** unless the context otherwise requires:

1. "Director" means the director of nurses of a facility.

2. "Facility" means a facility for intermediate care as defined in NRS 449.0038 or a facility for skilled nursing as defined in NRS 449.0039.

Sec. 7. NAC 639.498 is hereby amended to read as follows:

639.498 1. Except as otherwise provided in subsection 2:

(a) At least once each month, the director or ~~[a licensed consulting]~~ ***the*** pharmacist ***who is employed by or contracted with the facility*** shall destroy, on the premises of the facility, the controlled substances described in subsection 1 of NAC 639.050.

(b) If the director destroys the controlled substances, the ~~[licensed consulting]~~ pharmacist ***who is employed by or contracted with the facility*** shall witness the destruction of the controlled substances. If the ~~[licensed consulting]~~ pharmacist ***who is employed by or contracted with the facility*** destroys the controlled substances, the director shall witness the destruction of the controlled substances.

2. The director may designate a nurse licensed pursuant to chapter 632 of NRS to carry out his or her duties pursuant to this section. The ~~[licensed consulting]~~ pharmacist ***who is employed by or contracted with the facility*** may designate a pharmacist licensed pursuant to chapter 639 of NRS to carry out his or her duties pursuant to this section.

3. The controlled substances must be destroyed in accordance with 21 C.F.R. Parts 1300, 1301, 1304, 1305, 1307 and 1317 and any other provision of federal law governing the destruction or disposal of controlled substances.

Sec. 8. NAC 639.515 is hereby amended to read as follows:

639.515 1. A facility for skilled nursing or a facility for intermediate care ***which is registered pursuant to section 2 of this regulation*** may maintain a stock of the following drugs for emergency treatment for inpatients:

Analgesic-CII

Analgesic-non CII

Anesthetics, local

Antiarrhythmics

Antibiotics

Oral

Intravenous

Anticholinergic

Antidiarrheal

Antihistamine

Antihypertensive

Antinauseants

Antipsychotic

Bronchodilators

Calcium injectable

Dextrose injection

Diazepam

Digoxin

Diuretic injectable

Epinephrine

Glucagon

Heparin

Insulin

Intravenous solutions

Magnesium sulfate

Muscle relaxant

Naloxone

Nitroglycerin tablets

Normal saline

Phenobarbital

Phenytoin

Potassium chloride

Pressor amine

Protamine

Sodium bicarbonate

Steroids

Vitamin K

Water for injection

2. The quantity of each drug stocked must not exceed 20 units of each drug at each nursing station in the facility.

3. All drugs must be stored and maintained in unit dosages, if manufactured in that form.

JOE LOMBARDO
Governor

HELEN PARK
President

J. DAVID WUEST
Executive Secretary

STATE OF NEVADA

BOARD OF PHARMACY

985 Damonte Ranch Pkwy, Ste 206
Reno, NV 89521

Posted: October 28, 2025

NOTICE OF INTENT TO ACT UPON A REGULATION

Notice of Hearing for the Adoption and Amendment of
Regulations of the Nevada State Board of Pharmacy

The Nevada State Board of Pharmacy will hold a Public Hearing at 9:00 a.m. on Thursday, December 4, 2025.

Pursuant to NRS 241.023(1)(c) the meeting is being conducted by means of remote technology. The public may attend the meeting via live stream remotely or at the following location:

Hilton Garden Inn
7830 S. Las Vegas Boulevard
Las Vegas, NV

Via Videoconference at Zoom: https://zoom.us/j/5886256671
or
Via Teleconference at 1 (669) 900-6833
Meeting ID: 588 625 6671

The purpose of the hearing is to receive comments from all interested persons regarding the adoption and amendment of regulations that pertain to Chapter 639 and/or 453 of the Nevada Administrative Code.

The following information is provided pursuant to the requirements of NRS 233B.060:

A REGULATION relating to controlled substances adding ethylphenidate and 2-methyl AP-237 to the controlled substances listed in Schedule I; and providing other matters properly relating thereto. (LCB File No. R204-24)

1. The need for and the purpose of the proposed regulation or amendment.

The proposed amendment to NAC 453.510 will add ethylphenidate and 2-methyl AP-237 to the controlled substances listed in Schedule I in conformity with federal regulations of the Uniform Controlled Substances Act.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no economic impact from this regulation amendment on the regulated entities or on the public. The regulation amendment will have a beneficial effect on the regulated entities and on the public since the drugs proposed for addition to Schedule I have a high potential for abuse and no accepted medical use, and the regulation amendment will benefit public health, safety and welfare.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be beneficial since the drugs proposed for addition to Schedule I have a high potential for abuse and no accepted medical use, and the regulation amendment will benefit public health, safety and welfare.

4. The estimated cost to the agency for enforcement of the proposed regulation.

There will be no additional or special costs incurred by the Board of Pharmacy for enforcement of this regulation amendment.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any

other state or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

This regulation does not provide a new or increase of fees.

Persons wishing to comment upon the proposed action of the Board may appear at the scheduled public hearing or may address their comments, data, views, or arguments, in written form, to the Board at teambc@pharmacy.nv.gov or to the Nevada State Board of Pharmacy, 985 Damonte Ranch Parkway, Suite 206 – Reno, NV 89521. Written submissions must be received by the Board on or before December 4, 2025. If no person who is directly affected by the proposed action appears to request time to make an oral presentation, the Board may proceed immediately to act upon any written submissions.

Members of the public who are disabled and require special accommodations or assistance at the meeting are requested to notify the Nevada State Board of Pharmacy in writing at 985 Damonte Ranch Pkwy., #206, Reno, Nevada 89521, or by calling (775) 850-1440. Please notify us at least one (1) week prior to the scheduled meeting date to allow time to secure any necessary equipment or provisions prior to the meeting.

This notice and the text of the proposed regulation are also available in the State of Nevada Register of Administrative Regulations which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653, and on the Internet at http://www.leg.state.nv.us. Copies of this notice and the proposed regulation will also be mailed to members of the public upon request.

Pursuant to NRS 233B.064(1), upon adoption of any regulation, the Board, if requested to do so by an interested person, either before adoption or within 30 days thereafter, will issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

This notice of hearing has been posted at:

www.notice.nv.gov
www.bop.nv.gov
www.leg.state.nv.us.

Nevada State Board of Pharmacy
Reno, Nevada

Nevada State Board of Pharmacy
Las Vegas, Nevada

Nevada State Library
100 N. Stewart St.
Carson City, NV 89701

PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R204-24

July 23, 2025

EXPLANATION – Matter in ***italics*** is new; matter in brackets **[**~~omitted material~~**]** is material to be omitted.

AUTHORITY: § 1, NRS 453.146, 453.2182 and 639.070.

A REGULATION relating to controlled substances; revising the list of controlled substances contained in schedule I; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes the State Board of Pharmacy to adopt regulations to add, delete or reschedule substances listed as controlled substances in schedules I, II, III, IV and V of the Uniform Controlled Substances Act. (NRS 453.146) Existing regulations set forth the drugs and substances that are enumerated in schedule I. (NAC 453.510) This regulation revises the list of drugs and substances contained in schedule I to include ethylphenidate and 2-Methyl AP-237.

Section 1. NAC 453.510 is hereby amended to read as follows:

453.510 1. Schedule I consists of the drugs and other substances listed in this section by whatever official, common, usual, chemical or trade name designated.

2. Unless specifically excepted or unless listed in another schedule, any of the following opiates, including, without limitation, their isomers, esters, ethers, salts and salts of isomers, esters and ethers, whenever the existence of such isomers, esters, ethers and salts is possible within the specific chemical designation:

Acetyl-alpha-methylfentanyl (N-[1-(1-methyl-2-phenethyl)-4-piperidinyl]-N-phenylacetamide);

Acetylmethadol;

Acryl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylacrylamide) (some trade or other names: acryloylfentanyl);

Allylprodine;

Alphacetylmethadol (except levo-alphacetylmethadol, commonly referred to as levo-alpha-acetylmethadol, levomethadyl acetate or "LAAM");

Alphameprodine;

Alphamethadol;

Alpha′-methyl butyryl fentanyl (2-methyl-N-(1-phenethylpiperidin-4-yl)-N-phenylbutanamide);

Alphamethylfentanyl (N-[1-(alpha-methyl-beta-phenyl)ethyl-4-piperidyl] propionanilide; 1-(1-methyl-2-phenylethyl)-4-(N-propanilido) piperidine);

Alpha-methylthiofentanyl (N-[1-methyl-2-(2-thienyl)ethyl-4-piperidinyl]-N-phenylpropanamide);

Benzethidine;

Betacetylmethadol;

Beta-hydroxyfentanyl (N-[1-(2-hydroxy-2-phenethyl)-4-piperidinyl]-N-phenylpropanamide);

Beta-hydroxy-3-methylfentanyl (other name: N-[1-(2-hydroxy-2-phenethyl)-3-methyl-4-piperidinyl]-N-phenylpropanamide);

Beta-hydroxythiofentanyl (trade or other names: N-[1-[2-hydroxy-2-(thiophen-2-yl)ethyl]piperidin-4-yl]-N-phenylpropionamide; N-[1-[2-hydroxy-2-(2-thienyl)ethyl]-4-piperidinyl]-N-phenylpropanamide);

Betameprodine;

Betamethadol;

Betaprodine;

Butyryl fentanyl (trade or other names: N-(1-phenethylpiperidin-4-yl)-N-phenylbutyramide; N-(1-phenethylpiperidin-4-yl)-N-phenylbutanamide);

Clonitazene;

Cyclopentyl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylcyclopentanecarboxamide);

Cyclopropyl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylcyclopropanecarboxamide);

Dextromoramide;

Diampromide;

Diethylthiambutene;

Difenoxin;

Dimenoxadol;

Dimepheptanol;

2′,5′-dimethoxyfentanyl (N-(1-(2,5-dimethoxyphenethyl)piperidin-4-yl)-N-phenylpropionamide

Dimethylthiambutene;

Dioxaphetyl butyrate;

Dipipanone;

Ethylmethylthiambutene;

Etonitazene;

Etoxeridine;

Eutylone (bk-EBDB, 1-(1,3-Benzodioxol-5-yl)-2-(ethylamino)butan-1-one, b-keto-ethylbenzodioxolylbutanamine);

Fentanyl carbamate (Ethyl-(1-phenethylpiperidin-4-yl)(phenyl)carbamate);

Fluoro furanyl fentanyl;

Fluoroacryl fentanyl;

Fluorobutyryl fentanyl;

Fluorofentanyl (N-(4-fluorophenyl)-N-[1-(2-phenethyl)-4-piperidinyl]propanamide);

Fluoroisobutyryl fentanyl (N-(4-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)isobutyramide);

Furanyl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylfuran-2-carboxamide);

3-Furanyl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylfuran-3-carboxamide);

Furethidine;

Hydroxypethidine;

Isobutyryl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylisobutyramide);

Isotonitazene;

Isovaleryl fentanyl (3-methyl-N-(1-phenethylpiperidin-4-yl)-N-phenylbutanamide);

Ketobemidone;

Levomoramide;

Levophenacylmorphan;

Meta-fluorofentanyl (N-(3-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)propionamide);

Meta-fluoroisobutyryl fentanyl (N-(3-fluorophenyl)-N-(1-phenethylpiperidin-4-yl) isobutyramide);

Methoxyacetyl fentanyl;

Methyl acetyl fentanyl;

2-Methyl-AP-237 (some trade or other names: 1-(2-methyl-4-(3-phenyl-2-propen-1-yl)-1-piperazinyl)-1-butanone; 2-MAP);

Methyl methoxyacetyl fentanyl (some trade or other names: 2-methoxy-N-(2-methylphenyl)-N-(1-phenethylpiperidin-4-yl)acetamide (ortho-methyl methoxyacetylfentanyl; 2-methyl methoxyacetyl fentanyl));

Methylfentanyl;

Methylthiofentanyl;

Morpheridine;

MPPP (1-methyl-4-phenyl-4-propionoxypiperidine);

Noracymethadol;

Norlevorphanol;

Normethadone;

N-(1-(2-fluorophenethyl)piperidin-4-yl)-N-(2-fluorophenyl)propionamide (2'-fluoro ortho-fluorofentanyl; 2'-fluro 2'-fluorofentanyl);

Norpipanone;

Ocfentanil (N-(2-fluorophenyl)-2-methoxy-N-(1-phenethylpiperidin-4-yl)acetamide;

Ortho-fluorofuranyl fentanyl (N-(2-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)furan-2-carboxamide);

Para-chloroisobutyryl fentanyl (N-(4-chlorophenyl)-N-(1-phenethylpiperidin-4-yl)isobutyramide);

Para-fluorobutyryl fentanyl (N-(4-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)butyramide);

Para-methoxybutyryl fentanyl (N-(4-methoxyphenyl)-N-(1-phenethylpiperidin-4-yl)butyramide);

Para-methoxyfuranyl fentanyl (N-(4-methoxyphenyl)-N-(1-phenethylpiperidin-4-yl)furan-2-carboxamide);

Para-methylcyclopropyl fentanyl (N-(4-methylphenyl)-N-(1-phenethylpiperidin-4-yl)cyclopropanecarboxamide);

PEPAP (1-(-2-phenethyl)-4-phenyl-4-acetoxypiperidine);

Phenadoxone;

Phenampromide;

Phenomorphan;

Phenoperidine;

Phenyl fentanyl (some trade or other names: benzoyl fentanyl);

Phenylpropanoyl fentanyl;

Piritramide;

Proheptazine;

Properidine;

Propiram;

Racemoramide;

Tetrahydrofuranyl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenyltetrahydrofuran-2-carboxamide);

Thiofentanyl (N-phenyl-N-[1-(2-thienyl)ethyl-4-piperidinyl]-propanamide);

Thiofuranyl fentanyl (some trade or other names: thiophene fentanyl);

Tianeptine;

Tilidine;

Trimeperidine; or

Valeryl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylpentanamide).

3. Unless specifically excepted or unless listed in another schedule, any of the following opium derivatives, including, without limitation, their salts, isomers and salts of isomers, whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation:

Acetorphine;

Acetyl fentanyl;

Acetyldihydrocodeine;

Benzylmorphine;

Codeine methylbromide;

Codeine-N-Oxide;

Cyprenorphine;

Desomorphine;

Dihydromorphine;

Drotebanol;

Etorphine (except hydrochloride salt);

Heroin;

Hydromorphinol;

Methyldesorphine;

Methyldihydromorphine;

Morphine methylbromide;

Morphine methylsulfonate;

Morphine-N-Oxide;

Myrophine;

Nicocodeine;

Nicomorphine;

Normorphine;

Pholcodine; or

Thebacon.

4. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following hallucinogenic substances, including, without limitation, their salts, isomers and salts of isomers, whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation:

ADB-BUTINACA (some trade or other names: N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-butyl-1H-indazole-3-carboxamide;

ADB-4en-PINACA (some trade or other names: N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-(pent-4-en-1-yl)-1H-indazole-3-carboxamide);

Adinazolam (some trade or other names: 8-chloro-1-((dimethylamino)methyl)-6-phenyl-4H-s-triazolo(4,3-a)(1,4)benzodiazepine; adinazolamum; Deracyn);

Alpha-ethyltryptamine (some trade or other names: ET, Trip);

Alpha-methyltryptamine (some trade or other names: AMT);

Alpha-PiHP (some trade or other names: 4-methyl-1-phenyl-2-(pyrrolidin-1-yl)pentan-1-one);

Bromazolam (some trade or other names: 8-bromo-1-methyl-6-phenyl-4H[1,2,4]triazolo[4,3-a][1,4]benzodiazepine; XLI-268);

1,4-Butanediol (some trade or other names: 1,4-butyleneglycol, dihydroxybutane, tetramethylene glycol, butane 1,4-diol, SomatoPro, Soma Solutions, Zen);

4-bromo-2,5-dimethoxyamphetamine (some trade or other names: 4-bromo-2,5-dimethoxy-alpha-methylphenethylamine; 4-bromo-2,5-DMA);

4-bromo-2,5-dimethoxyphenethylamine (some trade or other names: Nexus, 2C-B);

1-Butyl-3-(1-naphthoyl)indole-7173 (some trade or other names: JWH-073);

2-(4-Chloro-2,5-dimethoxyphenyl)ethanamine (some trade or other names: 2C-C);

4-(2-chlorophenyl)-2-ethyl-9-methyl-6H-thieno[3,2-f][1,2,4]triazolo[4,3-a][1,4]diazepine (some trade or other names: Etizolam);

Clonazolam (some trade or other names: 6-(2-chlorophenyl)-1-methyl-8-nitro-4H-[1,2,4]triazolo[4,3-a][1,4]benzodiazepine; clonitrazolam);

CUMYL-PEGACLONE (some trade or other names: SGT-151; 5-Pentyl-2-(2-phenylpropan-2-yl)pyrido[4,3-b]indol-1-one; 2,5-dihydro-2-(1-methyl-1-phenylethyl)-5-pentyl-1H-pyrido[4,3-b]indol-1-one);

1-cyclohexylethyl-3-(2-methoxyphenylacetyl)indole (some trade or other names: SR-18; BTM-8; RCS-8);

Diclazepam (some trade or other names: 7-chloro-5-(2-chlorophenyl)-1,3-dihydro-1-methyl-2H-1,4-benzodiazepin-2-one; 7-chloro-5-(2-chlorophenyl)-1-methyl-1,3-dihydro-2H-benzo[e][1,4]diazepin-2-one; 2'-chlorodiazepam; Chlorodiazepam; Ro 5-3448);

2,5-dimethoxyamphetamine (some trade or other names: 2,5-dimethoxy-alpha-methylphenethylamine; 2,5-DMA);

2,5-dimethoxy-4-ethylamphet-amine (some trade or other names: DOET);

2-(2,5-Dimethoxy-4-ethylphenyl)ethanamine (some trade or other names: 2C-E);

2-(2,5-Dimethoxy-4-methylphenyl)ethanamine (some trade or other names: 2C-D);

2-(2,5-Dimethoxy-4-nitro-phenyl)ethanamine (some trade or other names: 2C-N);

2,5-Dimethoxy-N-(2-methoxybenzyl) phenethylamine (NBOMe) and any derivative thereof (some trade or other names: 2C-X-NBOMe; N-benzylated phenethylamines; N-o-methoxybenzyl analogs; NBOMe; 25H-NBOMe; 25B-NBOMe; 25C-NBOMe; 25D-NBOMe; 25E-NBOMe; 25I-NBOMe; 25N-NBOMe; 25P-NBOMe; 25T2-NBOMe; 25T4-NBOMe; 25T7-NBOMe);

2-(2,5-Dimethoxy-4-(n)-propylphenyl)ethanamine (some trade or other names: 2C-P);

2,5-dimethoxy-4-(n)-propylthiophenethylamine (some trade or other names: 2C-T-7);

2-(2,5-Dimethoxyphenyl)ethanamine (some trade or other names: 2C-H);

3-[(2-Dimethylamino)ethyl]-1H-indol-4-yl acetate (some trade or other names: 4-acetoxy-N, N-dimethyltryptamine;4-AcO-DMT; psilacetin; O-acetylpsilocin; 4-acetoxy-DMT);

5-(1,1-Dimethylheptyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol-7297 (some trade or other names: CP-47,497);

5-(1,1-Dimethyloctyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol-7298 (some trade or other names: cannabicyclohexanol; CP-47,497 C8 homologue);

Ethyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate (some trade or other names: 5F-EDMB-PINACA);

4-ethylnaphthalen-1-yl-(1-pentylindol-3-yl)methanone (some trade or other names: (4-ethyl-1-naphthalenyl)(1-pentyl-1H-indol-3-yl)-methanone; JWH-210);

2-[4-(Ethylthio)-2,5-dimethoxyphenyl]ethanamine (some trade or other names: 2C-T-2);

5F-EDMB-PICA (some trade or other names: 5F-EDMB-2201; Ethyl 2-[[1-(5-fluoropentyl)indole-3-carbonyl]amino]-3,3-dimethyl-butanoate; N-[[1-(5-fluoropentyl)-1H-indol-3-yl]carbonyl]-3-methyl-L-valine, ethyl ester);

4F-MDMB-BUTICA (some trade or other names: 4F-MDMB-BICA; Methyl 2-[[1-4-fluorobutyl)indole-3-carbonyl]amino]-3,3-dimethyl-butanoate; N-[[1-(4-fluorobutyl)-1H-indol-3-yl]carbonyl]-3-methyl-L-valine, methyl);

Flualprazolam (some trade or other names: 8-chloro-6-(2-fluorophenyl)-1-methyl-4H-[1,2,4]triazolo[4,3-a][1,4]benzodiazepine; 8-chloro-6-(2-fluoro-phenyl)-1-methyl-4h-benzo[f][1,2,4]triazolo[4,3-a][1,4]diazepine; 2'-fluoro alprazolam; ortho-fluoro alprazolam);

Flubromazepam (some trade or other names: 7-bromo-5-(2-fluorophenyl)-1,3-dihydro-2H-1,4-benzodiazepin-2-one; 7-Bromo-5-(2-fluorophenyl)-1H-benzo[e][1,4]diazepin-2(3H)-one; 7-bromo-5-(2-fluorophenyl)-1,3-dihydro-1,4-benzodiazepin-2-one);

Flubromazolam (some trade or other names: 8-bromo-6-(2-fluorophenyl)-1-methyl-4H-(1,2,4)triazolo(4,3-a)(1,4)benzodiazepine);

Flunitrazolam (some trade or other names: 6-(2-fluorophenyl)-1-methyl-8-nitro-4H-benzo[f][1,2,4]triazolo[4,3-a][1,4]diazepine);

(1-(4-fluorobenzyl)-1H-indol-3-yl)(2,2,3,3-tetramethylcyclopropyl)methanone (some trade or other names: FUB-144);

2-(1-(4-fluorobenzyl)-1H-indazole-3-carboxamido)-3-methylbutanoate (Some trade or other names: FUB-AMB; MMB-FUBINACA);

[1-(5-fluoropentyl)-1H-indazol-3-yl](naphthalen-1-yl)methanone (some trade or other names: THJ-2201; 5-fluoro THJ 018; AM2201 indazole analog; fluorpentyl JWH-018 indazole);

[1-(5-fluoropentyl)-1H-indol-3-yl]-1-naphthalenyl-methanone (some trade or other names: 1-(5-fluoropentyl)-3-(1-naphthoyl)indole; AM-2201);

[1-(5-fluoropentyl)-1H-indol-3-yl]-(2-iodophyenyl)-methanone (some trade or other names: 1-(5-fluoropentyl)-3-(2-iodobenzoyl)indole; AM-694);

(1-(5-fluoropentyl)-1H-indol-3-yl)(2,2,3,3-tetramethylcyclopropyl)methanone (some trade or other names: XLR-11);

1-(5-fluoropentyl)-N-(2-phenylpropan-2-yl)-1H-indazole-3-carboxamide (some trade or other names: 5F-CUMYL-PINACA; SGT-25);

1-(5-fluoropentyl)-N-(tricyclo[3.3.1.13,7]dec-1-yl)-1H-indazole-3-carboxamide (some trade or other names: N-((3s,5s,7s)-adamantan-1-yl)-1-(5-fluoropentyl)-1H-indazole-3-carboxamide; APINACA 5-fluoropentyl analog; 5F-AKB48; 5-Fluoro-AKB48; 5F-APINACA; 5-Fluoro-APINACA;

1-(5-fluoropentyl)-8-quinolinyl ester-1H-indole-3-carboxylic acid (some trade or other names: 1-(5-fluoropentyl)-1H-indole-3-carboxylic acid 8-quinolinyl ester; 5-Fluoro-PB-22; 5F-PB-22);

Flutoprazepam (some trade or other names: 7-chloro-1-(cyclopropylmethyl)-5-(2-fluorophenyl)-1,3-dihydro-2H-1,4-benzodiazepin-2-one);

2-(4-Iodo-2,5-dimethoxyphenyl)ethanamine (some trade or other names: 2C-I);

2-[4-(Isopropylthio)-2,5-dimethoxyphenyl]ethanamine (some trade or other names: 2C-T-4);

1-hexyl-3-(1-naphthoyl)indole (some trade or other names: JWH-019);

MDMB-4en-PINACA (some trade or other names: Methyl 3,3-dimethyl-2-(1-(pent-4-en-1-yl)-1H-indazole-3-carboxamido)butanoate);

Meclonazepam (some trade or other names: (3S)-5-(2-chlorophenyl)-1,3-dihydro-3-methyl-7-nitro-2H-1,4-benzodiazepin-2-one; Ro 11-3128);

Methoxetamine (some trade or other names: MXE; 2-(3-methoxyphenyl)-2-(ethylamino)cyclohexanone)

3-MMC (some trade or other names: 3-methylmethcathinone; 2-(methylamino)-1-(3-methylphenyl)propan-1-one);

4-methoxyamphetamine (some trade or other names: 4-methoxy-alpha-methylphenethylamine; para-methoxyamphetamine; PMA);

(4-methoxy-1-naphthalenyl)(1-pentyl-1H-indol-3-yl)-methanone (some trade or other names: JWH-081);

5-methoxy-3,4-methylenedioxyamphetamine (some trade or other names: MMDA);

5-methoxy-N, N-diisopropyltryptamine (some trade or other names: 5-meO-DIPT);

4-methyl-2,5-dimethoxyamphetamine (some trade or other names: 4-methyl-2,5-dimethoxy-alpha-methylphenethylamine; “DOM”; “STP”);

(4-methyl-1-naphthalenyl)(1-pentyl-1H-indol-3-yl)-methanone (some trade or other names: JWH-122);

Methyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate (some trade or other names: 5F-ADB; 5F-MDMB-PINACA);

Methyl 2-(1-(5-fluoropentyl)-1H-indole-3-carboxamido)-3,3-dimethylbutanoate (some trade or other names: 5F-MDMB-PICA);

Methylenedioxyamphetamine (some trade or other names: MDA);

Methylenedioxymethamphetamine (MDMA);

Methylenedioxy-N-ethylamphetamine (commonly referred to as N-ethyl-alpha-methyl-3,4(methylenedioxy) phenethylamine, N-ethyl MDA, MDE, MDEA);

MMB-FUBICA ester (some trade or other names: Methyl 2-(1-(4-fluorobenzyl)-1H-indole-3-carboxamido)-3-methyl butanoate; N-[[1-[(4-fluorophenyl)methyl]-1H-indol-3-yl]carbonyl]-L-valine, methyl ester);

1-[2-(4-Morpholinyl)ethyl]-3-(1-naphthoyl)indole-7200 (some trade or other names: JWH-200);

N-(adamantan-1-yl)-1-(4-fluorobenzyl)-1H-indazole-3-carboxamide (some trade or other names: FUB-AKB48; FUB-APINACA; AKB48 N-(4-fluorobenzyl);

N-(1-adamantyl)-1-pentyl-1H-indazole-3-carboxamide (some trade or other names: 1-pentyl-N-tricyclo[3.3.1.13,7]dec-1-yl-1H-indazole-3-carboxamide; APINACA; AKB48);

N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-(cyclohexylmethyl)-1H-indazole-3-carboxamide (trade or other names: ADB-CHMINACA; MAB-CHMINACA);

N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-pentyl-1H-indazole-3-carboxamide (trade or other name: ADB-PINACA);

N-(1-amino-3-methyl-1-oxobutan-2-yl)-1-pentyl-1H-indazole-3-carboxamide (some trade or other names: AB-PINACA);

N-(1-amino-3-methyl-1-oxobutan-2-yl)-1-(4-fluorobenzyl)-1H-indazole-3-carboxamide (trade or other name: AB-FUBINACA);

N-[(1S)-1-(aminocarbonyl)-2-methylpropyl]-1-(cyclohexylmethyl)-1H-indazole-3-carboxamide (trade or other name: AB-CHMINACA);

N-hydroxy-3,4-methylenedioxyamphetamine (commonly referred to as N-hydroxy-alpha-methyl-3,4(methylenedioxy) phenethylamine, N-hydroxy MDA);

2-(2-methoxyphenyl)-1-(1-pentylindol-3-yl)ethanone (some trade or other names: 1-(1-pentyl-1H-indol-3-yl)-2-(2-methoxyphenyl)-ethanone; 1-pentyl-3-(2-methoxyphenylacetyl)indole; JWH-250);

Nifoxipam (some trade or other names: 5-(2-fluorophenyl)-1,3-dihydro-3-hydroxy-7-nitro-2H-1,4-benzodiazepin-2-one; 1,3-Dihydro-5-(2-fluorophenyl)-3-hydroxy-7-nitro-2H-1,4-benzodiazepin-2-one; 3-hydroxydesmethylflunitrazepam; DP 370);

Nitrazolam (some trade or other names: 1-methyl-8-nitro-6-phenyl-4H-[1,2,4]triazolo[4,3-a][1,4]benzodiazepine);

Norflurazepam (some trade or other names: 7-chloro-5-(2-fluorophenyl)-1,3-dihydro-2H-1,4-benzodiazepin-2-one; nor-Flurazepam; N-Desalkylflurazepam; Desalkylflurazepam; Ro 5-3367);

1-Pentyl-3-(2-chlorophenylacetyl)indole (some trade or other names: JWH-203);

1-Pentyl-3-(4-cholor-1-naphthoyl)indole (some trade or other names: JWH-398);

1-Pentyl-3-[(4-methoxy)-benzoyl]indole (some trade or other names: SR-19; BTM-4; RCS-4);

1-Pentyl-3-(1-naphthoyl)indole-7118 (some trade or other names: JWH-018; AM678);

(1-pentylindol-3-yl)-(2,2,3,3-tetramethylcyclopropyl)methanone (some trade or other names: UR-144);

1-pentyl-N-(tricyclo[3.3.1.1^{3,7}]dec-1-yl-1H-indole-3 carboxamide (some trade or other names: APICA; JWH-018 adamantyl carboxamide; 2NE1; SDB-001);

1-pentyl-8-quinolinyl ester-1H-indole-3-carboxylic acid (some trade or other names: 1-pentyl-1H-indole-3-carboxylic acid 8-quinolinyl ester; PB-22; QUPIC);

Phenazepam (some trade or other names: 7-bromo-5-(2-chlorophenyl)-1,3-dihydro-2H-1,4-benzodiazepin-2-one; 7-bromo-5-(2-chlorophenyl)-1,2-dihydro-3H-1,4-benzodiazepin-2-one; BD 98; Fenazepam; Elzepam; Phezipam; Phenorelaxan; Phenzitat);

Pyrazolam (some trade or other names: 8-bromo-1-methyl-6-(2-pyridinyl)-4H-(1,2,4)triazolo(4,3-a)(1,4)benzodiazepine; 8-bromo-1-methyl-6-(pyridin-2-yl)-4H-benzo[f][1,2,4]triazolo[4,3-a][1,4]diazepine; Pirazolam);

3,4,5-trimethoxyamphetamine;

Bufotenine (some trade or other names: 3-(beta-dimethylaminoethyl)-5-hydroxyindole; 3-(2-dimethyl-aminoethyl)-5-indolol; N, N-dimethylserotonin; 5-hydroxy-N, N-dimethyltryptamine; mappine);

Diethyltryptamine (some trade or other names: DET; N,N-Diethyltryptamine);

Dimethyltryptamine (some trade or other names: DMT; N,N-DMT; N,N-Dimethyltryptamine);

Fluorophenylpiperazine (some trade or other names: FPP, pFPP, 2-fluorophenylpiperazine, 3-fluorophenylpiperazine, 4-fluorophenylpiperazine);

Gamma butyrolactone (some trade or other names: GBL, Gamma Buty Lactone, 4-butyrolactone, dihydro-2(3H)-furanone, tetrahydro-2-furanone, Gamma G, GH Gold);

Gamma hydroxy butyric acid (some trade or other names: GHB);

Ibogaine (some trade or other names: 7-ethyl-6, 6 beta, 7, 8, 9, 10, 12, 13-octahydro-2-methoxy-6, 9-methano-5H-pyrido (1',2':1,2) azepino (5,4-b) indole; *Tabernanthe iboga*);

Lysergic acid diethylamide;

Marijuana;

Mescaline;

Methoxyphenylpiperazine (some trade or other names: MeOPP, pMPP, 4-MPP, 2-MeOPP, 3-MeOPP, 4-MeOPP);

Parahexyl (some trade or other names: 3-Hexyl-1-hydroxy-7, 8, 9, 10-tetrahydro-6,6,9-trimethyl-6H-dibenzo[b,d]pyran; Synhexyl);

Peyote (meaning all parts of the plant presently classified botanically as *Lophophora williamsii Lemaire*, whether growing or not, the seeds thereof, any extract from any part of such plant, and every compound, manufacture, salts, derivative, mixture, or preparation of such plant, its seeds or extracts);

N-benzylpiperazine (some trade or other names: BZP, 1-benzylpiperazine);

N-ethyl-3-piperidyl benzilate;

N-methyl-3-piperidyl benzilate;

Psilocybin;

Psilocin;

Salvinorin A (some trade or other names: Divinorin A; Methyl (2S,4aR,6aR,7R,9S,10aS,10bR)-9-(acetyloxy)-2-(furan-3-yl)-6a,10b-dimethyl-4,10-dioxododecahydro-2H-benzo[f]isochromene-7-carboxylate);

Ethylamine analog of phencyclidine (some trade or other names: N-ethyl-1-phenylcyclohexylamine; (1-phenylcyclohexyl) ethylamine; N-(1-phenylcyclohexyl) ethylamine; cyclohexamine; PCE);

Pyrrolidine analog of phencyclidine (some trade or other names: 1-(1-phenylcyclohexyl)-pyrrolidine; PCPy; PHP);

1-(1-(2-thienyl)-cyclohexyl)-pyrrolidine (some trade or other names: TCPy);

Thiophene analog of phencyclidine (some trade or other names: 1-(1-(2-thienyl)-cyclohexyl)-piperidine; 2-thienyl analog of phencyclidine; TPCP; TCP); or

Trifluoromethylphenylpiperazine (some trade or other names: 1-(3-trifluoromethylphenyl)piperazine; 3-trifluoromethylphenylpiperazine; TFMPP).

For the purposes of this subsection, "isomer" includes, without limitation, the optical, position or geometric isomer.

5. All parts of the plant presently classified botanically as *Datura*, whether growing or not, the seeds thereof, any extract from any part of such plant or plants, and every compound, manufacture, salt derivative, mixture or preparation of such plant or plants, its seeds or extracts, unless substances consistent with those found in such plants are present in formulations that the Food and Drug Administration of the United States Department of Health and Human Services has approved for distribution.

6. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of phencyclidine, mecloqualone or methaqualone having a depressant effect on the central nervous system, including, without limitation, their salts, isomers and salts of isomers, whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation.

7. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including, without limitation, their salts, isomers and salts of isomers:

Alpha-PBP (some trade or other names: 1-phenyl-2-(pyrrolidin-1-yl)butan-1-one, alpha-pyrrolidinobutiophenone);

Alpha-PVP (some trade or other names: 1-phenyl-2-(1-pyrrolidinyl)-1-pentanone, alpha-pyrrolidinopentiophenone, alpha-pyrrolidinovalerophenone, O-2387);

Alpha-pyrrolidinoheptaphenone (some trade or other names: PV8);

Alpha-pyrrolidinohexanophenone (some trade or other names: alpha-PHP);

Aminorex;

Butylone (some trade or other names: 1-(1,3-benzodioxol-5-yl)-2-(methylamino)butan-1-one, β-keto-N-methylbenzodioxolylpropylamine, bk-MBDB);

Cathinone (some trade or other names: 2-amino-1-phenyl-1-propanone; alpha-aminopropiophenone; 2-aminopropiophenone; norephedrone);

4-chloro-alpha-pyrrolidinovalerophenone (some trade or other names: 4-chloro-a-PVP);

Dimethylone (some trade or other names: 3,4-methylenedioxy-N,Ndimethylcathinone; N,N-dimethyl MDCATH; N,N-dimethyl-3,4- methylenedioxycathinone; N,N-dimethyl-β-keto-3,4-methylenedioxyamphetamine; 1-(1,3-benzodioxol-5-yl)-2-(dimethylamino)propan-1-one; bk-MDDMA);

N-ethylhexedrone;

Ethylone (some trade or other names: N-ethyl-3,4-methylenedioxycathinone; 1-(1,3-benzodioxol-5-yl)-2-(ethylamino)propan-1-one; MDEC; bk-MDEA);

N-ethylpentylone (1-(1,3-benzodioxol-5-yl)-2-ethylamino)-pentan-1-one) (some trade or other names: ephylone);

Ethylphenidate (some trade or other names: ethyl 2-phenyl-2-(piperidin-2-yl)acetate);

Fenethylline;

Fluoroamphetamine (some trade or other names: 2-fluoroamphetamine, 3-fluoroamphetamine, 4-fluoroamphetamine, 2-FA, 3-FA, 4-FA, PFA);

Fluoromethcathinone (some trade or other names: 4-Fluoro-N-methylcathinone, 1-(4-fluorophenyl)-2-(methylamino)propan-1-one, 4-Fluoromethcathinone (Flephedrone), 4-FMC, 3-Fluoro-N-methylcathinone, 1-(3-fluorophenyl)-2-2(methylamino)propan-1-one, 3-Fluoromethcathinone, 3-FMC, 2-Fluoro-N-methylcathinone, 1-(2-fluorophenyl)-2-(methylamino)propan-1-one, 2-FMC);

Mephedrone (some trade or other names: Methylmethcathinone, 4-Methylmethcathinone, 4-MMC, 4-Methylephedrone);

Methamphetamine;

Methcathinone (some trade or other names: N-Methylcathinone, cat);

Methedrone (some trade or other names: Methoxymethcathinone, 4-Methoxymethcathinone, bk-PMMA, methoxyphedrine);

4-methyl-alpha-ethylaminopentiophenone (some trade or other names: 4-MEAP);

4'-methyl-alpha-pyrrolidinohexiophenone (some trade or other names: MPHP);

4-methyl-alpha-pyrrolidinopropiophenone (some trade or other names: 1-(4-methylphenyl)-2-(pyrrolidin-1-yl)-propan-1-one, 4-MePPP);

(±)cis-4-methylaminorex ((+)cis-4,5-dihydro-4-methyl-5-phenyl-2-oxazolamine);

Methylenedioxypyrovalerone (some trade or other names: 3,4-Methylenedioxypyrovalerone, MDPV);

Methylethcathinone (some trade or other names: 2-(ethylamino)-1-(4-methylphenyl)propan-1-one, 4-MEC, 4-methyl-N-ethylcathinone);

Methylone (some trade or other names: Methylenedioxy-N-methylcathinone, Methylenedioxymethcathinone, 3,4-Methylenedioxy-N-methylcathinone, bk-MDMA);

N,N-dimethylamphetamine (commonly referred to as N,N-alpha-trimethyl-benzeneethanamine; N,N-alpha-trimethylphenethylamine);

N-ethylamphetamine;

Naphyrone (some trade or other names: 1-(naphthalen-2-yl)-2(pyrrolidin-1-yl)pentan-1-one, naphthylpyrovalerone, naphpyrovalerone, NRG-1, O-2482);

Pentedrone (some trade or other names: 2-(methylamino)-1-phenylpentan-1-one, α-methylaminovalerophenone); or

Pentylone (trade or other names: 1-(1,3-benzodioxol-5-yl)-2-(methylamino)pentan-1-one; beta-keto-methylbenzodioxolylpentanamine; bk-MBDP; bk-methyl-K).

8. Unless specifically listed in another schedule, coca leaves, cocaine base or free base, or a salt, compound, derivative, isomer or preparation thereof which is chemically equivalent or identical to such substances, and any quantity of material, compound, mixture or preparation which contains coca leaves, cocaine base or cocaine free base or its isomers or any of the salts of cocaine, except decocainized coca leaves or extractions which do not contain cocaine or ecgonine.

9. Unless specifically listed in another schedule, Tetrahydrocannabinols (natural or synthetic equivalents of substances contained in the plant, or in the resinous extractives of Cannabis, sp. or synthetic substances, derivatives and their isomers with similar chemical structure and pharmacological activity such as the following:

Delta 9 cis or trans tetrahydrocannabinol, and their optical isomers, also known as Delta 1 cis or trans tetrahydrocannabinol, and their optical isomers;

Delta 8 cis or trans tetrahydrocannabinol, and their optical isomers, also known as Delta 6 cis or trans tetrahydrocannabinol, and their optical isomers;

Delta 3, 4 cis or trans tetrahydrocannabinol, and its optical isomers;

Tetrahydrocannabinols contained in the genus Cannabis or in the resinous extractives of the genus Cannabis;

Synthetic equivalents of tetrahydrocannabinol substances or synthetic substances, derivatives and their isomers with a similar chemical structure; and

Since nomenclature of these substances is not internationally standardized, compounds of these structures, regardless of numerical designation of atomic positions covered).

10. Unless specifically listed in another schedule and except as otherwise provided in subsection 11, any material, compound, mixture or preparation which contains any quantity of CBD (natural or synthetic equivalents of the substances contained in the plant or in the resinous extractives of Cannabis sp. or synthetic substances, derivatives and their isomers with similar chemical structure and pharmacological activity).

11. A drug product which:

(a) Has been approved by the United States Food and Drug Administration;

(b) Contains CBD derived from any plant in the genus Cannabis or the resinous extractives thereof; and

(c) Contains not more than 0.1 percent residual THC by weight,

➥ is not a controlled substance.

JOE LOMBARDO
Governor

HELEN PARK
President

J. DAVID WUEST
Executive Secretary

STATE OF NEVADA

BOARD OF PHARMACY

985 Damonte Ranch Pkwy, Ste 206
Reno, NV 89521

Posted: October 28, 2025

NOTICE OF INTENT TO ACT UPON A REGULATION

Notice of Hearing for the Adoption and Amendment of
Regulations of the Nevada State Board of Pharmacy

The Nevada State Board of Pharmacy will hold a Public Hearing at 9:00 a.m. on Thursday, December 4, 2025.

Pursuant to NRS 241.023(1)(c) the meeting is being conducted by means of remote technology. The public may attend the meeting via live stream remotely or at the following location:

Hilton Garden Inn
7830 S. Las Vegas Boulevard
Las Vegas, NV

Via Videoconference at Zoom: https://zoom.us/j/5886256671
or
Via Teleconference at 1 (669) 900-6833
Meeting ID: 588 625 6671

The purpose of the hearing is to receive comments from all interested persons regarding the adoption and amendment of regulations that pertain to Chapter 639 and/or 453 of the Nevada Administrative Code.

The following information is provided pursuant to the requirements of NRS 233B.060:

A REGULATION relating to the possession and administration of dangerous drugs by an advanced emergency medical technician or paramedic. (LCB File No. R004-25)

1. The need for and the purpose of the proposed regulation or amendment.

Emergency medical technicians (EMTs) and paramedics are expanding their practice based on updated guidance from the Nevada Health Department. This proposed regulation would allow EMTs and paramedics to help administer dangerous drugs in a hospital or correctional facility setting with a practitioner's order, so that they can help provide more access to patient care due to staffing shortages.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no economic impact from this regulation amendment on the regulated entities or on the public. The regulation amendment will have a beneficial effect on the regulated entities and on the public by providing the public more access to patient care.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be beneficial by providing the public more access to patient care..

4. The estimated cost to the agency for enforcement of the proposed regulation.

The cost to the Board for enforcement of the proposed regulation cannot be determined at this time since it will be dependent upon the number of applicants for registration/licensure.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any other state or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

The regulation amendment increases the fees for the investigation or issuance or renewal of a license for insert license type. The revenue generated from the fee increase will partially offset the costs of regulatory enforcement of this regulation incurred by the Board of Pharmacy.

Persons wishing to comment upon the proposed action of the Board may appear at the scheduled public hearing or may address their comments, data, views, or arguments, in written form, to the Board at teambc@pharmacy.nv.gov or to the Nevada State Board of Pharmacy, 985 Damonte Ranch Parkway, Suite 206 – Reno, NV 89521. Written submissions must be received by the Board on or before December 4, 2025. If no person who is directly affected by the proposed action appears to request time to make an oral presentation, the Board may proceed immediately to act upon any written submissions.

Members of the public who are disabled and require special accommodations or assistance at the meeting are requested to notify the Nevada State Board of Pharmacy in writing at 985 Damonte Ranch Pkwy., #206, Reno, Nevada 89521, or by calling (775) 850-1440. Please notify us at least one (1) week prior to the scheduled meeting date to allow time to secure any necessary equipment or provisions prior to the meeting.

This notice and the text of the proposed regulation are also available in the State of Nevada Register of Administrative Regulations which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653, and on the Internet at http://www.leg.state.nv.us. Copies of this notice and the proposed regulation will also be mailed to members of the public upon request.

Pursuant to NRS 233B.064(1), upon adoption of any regulation, the Board, if requested to do so by an interested person, either before adoption or within 30 days thereafter, will issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

This notice of hearing has been posted at:

www.notice.nv.gov
www.bop.nv.gov
www.leg.state.nv.us.

Nevada State Board of Pharmacy
Reno, Nevada

Nevada State Board of Pharmacy
Las Vegas, Nevada

Nevada State Library
100 N. Stewart St.
Carson City, NV 89701

PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R004-25

July 22, 2025

EXPLANATION – Matter in ***italics*** is new; matter in brackets **[**~~omitted material~~**]** is material to be omitted.

AUTHORITY: § 1, NRS 454.213 and 639.070.

A REGULATION relating to dangerous drugs; authorizing an advanced emergency medical technician or paramedic to possess and administer dangerous drugs under certain circumstances; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes an advanced emergency medical technician or paramedic to possess and administer dangerous drugs as provided by regulation of the State Board of Pharmacy. (NRS 454.213) This regulation governs the circumstances under which such a person may administer a dangerous drug to a patient in a hospital or correctional institution. Specifically, this regulation authorizes an advanced emergency medical technician or paramedic to possess and administer a dangerous drug to a patient in a hospital or correctional institution if: (1) the hospital or correctional institution has adopted a written policy and protocol governing such possession and administration; (2) the dangerous drug is administered pursuant to an order issued by a practitioner; and (3) certain other requirements are met.

Section 1. Chapter 454 of NAC is hereby amended by adding thereto a new section to read as follows:

An advanced emergency medical technician or paramedic may possess and administer a dangerous drug to a patient in a hospital or correctional institution if:

1. The hospital or correctional institution has adopted written policies and protocols governing the possession and administration of dangerous drugs; and

2. The advanced emergency medical technician or paramedic:

(a) Holds a current and valid certification issued pursuant to chapter 450B of NRS;

(b) Administers the dangerous drug pursuant to an order issued by a practitioner; and

(c) Complies with:

(1) The policies and protocols described in subsection 1; and

(2) All applicable provisions of chapters 450B and 454 of NRS and any regulations adopted pursuant thereto.