REVISED PROPOSED REGULATION OF THE

STATE BOARD OF HEALTH

LCB File No. R057-16

August 4, 2016

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

AUTHORITY: §§1, 2, 4-8 and 10-14, NRS 457.065 and 457.240; §3, NRS 457.065 and 457.250; §9, NRS 457.065; §15, NRS 439.150, 457.065, 457.250 and 457.260.

A REGULATION relating to cancer; revising provisions relating to certain publications adopted by reference by the State Board of Health; revising provisions governing the system for reporting information on cancer and other neoplasms established and maintained by the Chief Medical Officer; establishing the amount and the procedure for the imposition of certain administrative penalties by the Division of Public and Behavioral Health of the Department of Health and Human Services; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law defines the term "cancer" to mean "all malignant neoplasms, regardless of the tissue of origin, including malignant lymphoma and leukemia" and, before the 78th Legislative Session, required the reporting of incidences of cancer. (NRS 457.020, 457.230) Pursuant to Assembly Bill No. 42 of the 78th Legislative Session, the State Board of Health is: (1) authorized to require the reporting of incidences of neoplasms other than cancer, in addition to incidences of cancer, to the system for reporting such information established and maintained by the Chief Medical Officer; and (2) required to establish an administrative penalty to impose against any person who violates certain provisions which govern the abstracting of records of a health care facility relating to the neoplasms the Board requires to be reported. (Sections 2, 3 and 4 of Assembly Bill No. 42, chapter 103, Statutes of Nevada 2015, at page 385 (NRS 457.230-457.250)) **Section 3** of this regulation establishes the amount of and the procedures for notice and appeal with regard to the imposition of such an administrative penalty. **Sections 4-15** of this regulation revise existing regulations to comport with the statutory changes made by Assembly Bill No. 42. (Sections 2, 3 and 4 of Assembly Bill No. 42, chapter 103, Statutes of Nevada 2015, at page 385)

Existing law, as amended by Assembly Bill No. 42, requires, with certain limited exceptions, a provider of health care who diagnoses or provides treatment for cancer or other neoplasms and a hospital, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer or other neoplasms to report information on cases of cancer and other neoplasms to the system. A provider of health care who has directly

referred or previously admitted a patient to a hospital, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer or other neoplasms is excepted from the requirement of reporting information concerning that case to the system. (Section 2 of Assembly Bill No. 42, chapter 103, Statutes of Nevada 2015, at page 385 (NRS 457.230))

Section 9 of this regulation sets forth the limited information that a provider of health care who has directly referred or previously admitted a patient to a hospital, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer or other neoplasms is required to provide to the Chief Medical Officer. **Section 9** does not require such a provider of health care to report information on cases of cancer and other neoplasms involving such a patient to the system, rather, it requires such a provider of health care to provide limited information to the Chief Medical Officer which the Chief Medical Officer may use to obtain the required reports from the hospital, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer or other neoplasms to which the patient was referred or admitted.

Existing law authorizes an agency to adopt by reference in a regulation material published by another authority if certain requirements are satisfied. (NRS 233B.040) Under existing regulations, the State Board of Health has adopted by reference the *Registry Operations and Data Standards (ROADS) Manual, 1996 edition*. (NAC 457.050) **Section 2** of this regulation provides instead that the Board adopts by reference the most current version of certain volumes of the *Standards for Cancer Registries*, the *International Classification of Diseases for Oncology* and the *Facility Oncology Registry Data Standards (FORDS)*, and any subsequent revision of those publications that have been approved by the Chief Medical Officer for use in this State.

Existing regulations specify the types of neoplasms that are required to be reported pursuant to state statute. (NAC 457.040, 457.045) **Sections 5 and 6** of this regulation amend existing regulations to instead reference the neoplasms listed in one of the publications adopted by reference in **section 2** of this regulation as the types of neoplasms which are required, with certain limited exceptions, to be reported pursuant to existing law.

Existing regulations require health care facilities to abstract information concerning malignant neoplasms and provide that information to the Chief Medical Officer. (NAC 457.050) **Section 7** of this regulation expands: (1) the scope of the information abstracted to include information on cases of cancer and other neoplasms; and (2) the applicability of the requirement to certain providers of health care and other facilities that provide screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms.

Section 15 of this regulation: (1) increases from $32 to $250 the fee that the Chief Medical Officer must collect from a health care facility from whose records regarding cases of neoplasms the Division of Public and Behavioral Health of the Department of Health and Human Services abstracts information pursuant to **section 7**; (2) expands the applicability of that fee to certain providers of health care and other facilities that provide screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms; (3) removes the fee imposed on a health care facility that abstracts information from its own records at the request of

the Division; and (4) increases from $35 to $200 the fee that the Chief Medical Officer must collect from a medical researcher who obtains data from the registry.

Section 1. Chapter 457 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this regulation.

Sec. 2. ***1. The State Board of Health hereby adopts by reference the most current version of:***

(a) The following volumes in the Standards for Cancer Registries published by the North American Association of Central Cancer Registries:

(1) Volume I, Data Exchange Standards and Record Description;

(2) Volume II, Data Standards and Data Dictionary;

(3) Volume III, Standards for Completeness, Quality, Analysis, Management, Security, and Confidentiality of Data;

(4) Volume IV, Standard Data EDITS; and

(5) Volume V, Pathology Laboratory Electronic Reporting.

➥ A copy of each volume adopted by reference may be obtained, free of charge, from the North American Association of Central Cancer Registries at the Internet address http://www.naaccr.org.

(b) The International Classification of Diseases for Oncology, published by the World Health Organization. A copy of this publication may be obtained, free of charge, from the World Health Organization at the Internet address http://codes.iarc.fr/usingicdo.php.

(c) The Facility Oncology Registry Data Standards (FORDS), published by the Commission on Cancer of the American College of Surgeons. A copy of this publication may be obtained, free of charge, from the American College of Surgeons at the Internet address https://www.facs.org/quality-programs/cancer/ncdb/registrymanuals/cocmanuals.

2. If a publication adopted by reference in subsection 1 is revised, the Chief Medical Officer shall review the revision to determine its suitability for this State. If the Chief Medical Officer determines that the revision is not suitable for this State, the Chief Medical Officer shall file an objection to the revision with the State Board of Health within 30 days after the standards are revised. If the Chief Medical Officer does not file such an objection, the revision becomes part of the publication adopted by reference pursuant to subsection 1. If the Board determines that the revision is not suitable for this State, it will hold a public hearing to review its determination and give notice of that hearing within 6 months after the date of the publication of the revision. If, after the hearing, the Board does not revise its determination, the Board will give notice that the revision is not suitable for this State within 30 days after the hearing. If the Board does not give such notice, the revision becomes part of the publication adopted by reference pursuant to subsection 1.

Sec. 3. *1. The Division may impose an administrative penalty of not more than $25,000 against a person who violates any provision of NRS 457.250 and fails to correct the violation within the time set forth in the notice provided pursuant to subsection 2.*

2. Before imposing an administrative penalty pursuant to this section, the Division shall give notice in the manner forth in NAC 439.345 which includes, without limitation, a time determined by the Chief Medical Officer within which the person must correct the violation of NRS 457.250.

3. If a person is aggrieved by a decision of the Division relating to the imposition of an administrative penalty pursuant to this section, the aggrieved person may appeal the decision pursuant to the procedures set forth in NAC 439.300 to 439.395, inclusive.

Sec. 4. NAC 457.010 is hereby amended to read as follows:

457.010 As used in NAC 457.010 to 457.150, inclusive, ***and sections 2 and 3 of this regulation,*** unless the context otherwise requires:

1. "Cancer" has the meaning ascribed to it in NRS 457.020.

2. "Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.

3. "Health care facility" has the meaning ascribed to it in NRS 457.020.

4. ~~[~~"Malignant neoplasm" means a virulent or potentially virulent tumor, regardless of the tissue of origin.

~~5.]~~ "Medical laboratory" has the meaning ascribed to it in NRS 652.060.

~~[6. "Physician" means a physician licensed pursuant to chapter 630 or 633 of NRS.~~

~~7.]~~ ***5. "Provider of health care" has the meaning ascribed to it in NRS 629.031.***

6. "Registry" means the office in which the Chief Medical Officer conducts the program for reporting information on cancer ***and other neoplasms*** and maintains records containing that information.

Sec. 5. NAC 457.040 is hereby amended to read as follows:

457.040 Except as otherwise provided in NAC 457.045, the types of ~~[malignant]~~ neoplasms which must be reported pursuant to NRS 457.240 are as follows:

~~[1. Neoplasms, not otherwise specified:~~

~~Neoplasm, malignant~~

~~Neoplasm, metastatic~~

~~Neoplasm, malignant, uncertain whether primary or metastatic~~

~~Tumor cells, malignant~~

~~Malignant tumor, small cell type~~

~~Malignant tumor, giant cell type~~

~~Malignant tumor, fusiform cell type~~

~~Malignant tumor, spindle cell type~~

~~2. Epithelial neoplasms, not otherwise specified:~~

~~Carcinoma, in situ, not otherwise specified~~

~~Intraepithelial carcinoma, not otherwise specified~~

~~Carcinoma, not otherwise specified~~

~~Epithelial tumor, malignant~~

~~Carcinoma, metastatic, not otherwise specified~~

~~Carcinomatosis~~

~~Epithelioma, malignant~~

~~Large cell carcinoma, not otherwise specified~~

~~Carcinoma, undifferentiated type, not otherwise specified~~

~~Carcinoma, anaplastic type, not otherwise specified~~

~~Pleomorphic carcinoma~~

~~Giant cell and spindle cell carcinoma~~

~~Giant cell carcinoma~~

~~Spindle cell carcinoma~~

~~Pseudosarcomatous carcinoma~~

~~Polygonal cell carcinoma~~

~~Spheroidal cell carcinoma~~

~~Small cell carcinoma, not otherwise specified~~

~~Reserve cell carcinoma~~

~~Round cell carcinoma~~

~~Oat cell carcinoma~~

~~Small cell carcinoma, fusiform cell type~~

~~3. Papillary and squamous cell neoplasms:~~

~~Papillary carcinoma, in situ~~

~~Papillary carcinoma~~

~~Verrucous carcinoma~~

~~Papillary squamous cell carcinoma~~

~~Papillary epidermoid carcinoma~~

~~Squamous cell carcinoma, in situ~~

~~Epidermoid carcinoma, in situ~~

~~Intraepidermal carcinoma~~

~~Intraepithelial squamous cell carcinoma~~

~~Squamous cell carcinoma~~

~~Epidermoid carcinoma~~

~~Spinous cell carcinoma~~

~~Squamous carcinoma~~

~~Squamous cell epithelioma~~

~~Squamous cell carcinoma, metastatic~~

~~Squamous cell carcinoma, keratinizing type~~

~~Squamous cell carcinoma, large cell, nonkeratinizing type~~

~~Squamous cell carcinoma, small cell, nonkeratinizing type~~

~~Squamous cell carcinoma, spindle cell type~~

~~Adenoid squamous cell carcinoma~~

~~Squamous cell carcinoma, micro-invasive~~

~~Queyrat's erythroplasia~~

~~Bowen's disease~~

~~Intraepidermal squamous cell carcinoma, Bowen's type~~

~~Lymphoepithelial carcinoma~~

~~Lymphoepithelioma~~

~~4. Basal cell neoplasms:~~

~~Basal cell carcinoma, not otherwise specified~~

~~Multicentric basal cell carcinoma~~

~~Basal cell carcinoma, morphea type~~

~~Basal cell carcinoma, fibroepithelial type~~

~~Basosquamous carcinoma~~

~~Metatypical carcinoma~~

~~5. Transitional cell papillomas and carcinomas:~~

~~Transitional cell carcinoma, in situ~~

~~Transitional cell carcinoma~~

~~Transitional carcinoma~~

~~Urothelial carcinoma~~

~~Schneiderian carcinoma~~

~~Transitional cell carcinoma, spindle cell type~~

~~Basaloid carcinoma~~

~~Cloacogenic carcinoma~~

~~Papillary transitional cell carcinoma~~

~~6. Adenocarcinomas:~~

~~Adenocarcinoma~~

~~Adenocarcinoma, metastatic~~

~~Scirrhous adenocarcinoma~~

~~Linitis plastica~~

~~Superficial spreading adenocarcinoma~~

~~Adenocarcinoma, intestinal type~~

~~Carcinoma, diffuse type~~

~~Islet cell carcinoma~~

~~Islet cell adenocarcinoma~~

~~Insulinoma, malignant~~

~~Beta-cell tumor, malignant~~

~~Glucagonoma, malignant~~

~~Alpha-cell tumor, malignant~~

~~Gastrinoma, malignant~~

~~G cell tumor, malignant~~

~~Mixed islet cell and exocrine adenocarcinoma~~

~~Cholangiocarcinoma~~

~~Bile duct carcinoma~~

~~Bile duct adenocarcinoma~~

~~Bile duct cystadenocarcinoma~~

~~Hepatocellular carcinoma~~

~~Liver cell carcinoma~~

~~Hepatocarcinoma~~

~~Hepatoma, malignant~~

~~Combined hepatocellular carcinoma and cholangiocar-cinoma~~

~~Hepatocholangiocarcinoma~~

~~Trabecular adenocarcinoma~~

~~Trabecular carcinoma~~

~~Adenoid cystic carcinoma~~

~~Adenocystic carcinoma~~

~~Adenocarcinoma, cylindroid type~~

~~Cribriform carcinoma~~

~~Adenocarcinoma in adenomatous polyp~~

~~Adenocarcinoma in tubular adenoma~~

~~Carcinoma in adenomatous polyp~~

~~Adenocarcinoma in polypoid adenoma~~

~~Tubular adenocarcinoma~~

~~Tubular carcinoma~~

~~Adenocarcinoma in adenomatous, polyposis coli~~

~~Solid carcinoma~~

~~Carcinoma simplex~~

~~Carcinoid tumor, malignant~~

~~Carcinoid tumor, argentaffin, malignant~~

~~Argentaffinoma, malignant~~

~~Carcinoid tumor, nonargentaffin, malignant~~

~~Musocarcinoid tumor, malignant~~

~~Goblet cell carcinoid~~

~~Composite carcinoid~~

~~Bronchiolo-alveolar adenocarcinoma~~

~~Alveolar cell carcinoma~~

~~Bronchiolo-alveolar carcinoma~~

~~Bronchiolar adenocarcinoma~~

~~Bronchiolar carcinoma~~

~~Terminal bronchiolar carcinoma~~

~~Alveolar adenocarcinoma~~

~~Alveolar carcinoma~~

~~Papillary adenocarcinoma~~

~~Adenocarcinoma in villous adenoma~~

~~Villous adenocarcinoma~~

~~Chromophobe carcinoma~~

~~Chromophobe adenocarcinoma~~

~~Acidophil carcinoma~~

~~Acidophil adenocarcinoma~~

~~Eosinophil carcinoma~~

~~Eosinophil adenocarcinoma~~

~~Mixed acidophil-basophil carcinoma~~

~~Oxyphilic adenocarcinoma~~

~~Oncocytic carcinoma~~

~~Oncocytic adenocarcinoma~~

~~Hurthle cell carcinoma~~

~~Hurthle cell adenocarcinoma~~

~~Basophil carcinoma~~

~~Basophil adenocarcinoma~~

~~Mucoid cell adenocarcinoma~~

~~Clear cell adenocarcinoma~~

~~Clear cell adenocarcinoma, mesonephroid type~~

~~Clear cell carcinoma~~

~~Renal cell carcinoma~~

~~Renal cell adenocarcinoma~~

~~Grawitz tumor~~

~~Hypernephroma~~

~~Granular cell carcinoma~~

~~Granular cell adenocarcinoma~~

~~Water-clear cell adenocarcinoma~~

~~Water-clear cell carcinoma~~

~~Mixed cell adenocarcinoma~~

~~Follicular adenocarcinoma~~

~~Follicular carcinoma~~

~~Follicular adenocarcinoma, well differentiated type~~

~~Follicular adenocarcinoma, trabecular type~~

~~Wuchernde Struma Langhans~~

~~Papillary and follicular adenocarcinoma~~

~~Nonencapsulated sclerosing carcinoma~~

~~Nonencapsulated sclerosing adenocarcinoma~~

~~Nonencapsulated sclerosing tumor~~

~~Adrenal cortical carcinoma~~

~~Adrenal cortical adenocarcinoma~~

~~Adrenal cortical tumor, malignant~~

~~Endometrioid carcinoma~~

~~Endometrioid adenocarcinoma~~

~~Endometrioid cystadenocarcinoma~~

~~Endometrioid adenofibroma, malignant~~

~~Endometrioid cystadenofibroma, malignant~~

~~7. Adnexal and skin appendage neoplasms:~~

~~Skin appendage carcinoma~~

~~Adnexal carcinoma~~

~~Sweat gland adenocarcinoma~~

~~Sweat gland carcinoma~~

~~Sweat gland tumor, malignant~~

~~Apocrine adenocarcinoma~~

~~Sebaceous adenocarcinoma~~

~~Sebaceous carcinoma~~

~~Ceruminous adenocarcinoma~~

~~Ceruminous carcinoma~~

~~8. Mucoepidermoid neoplasms:~~

~~Mucoepidermoid carcinoma~~

~~9. Cystic, mucinous and serous neoplasms:~~

~~Cystadenocarcinoma~~

~~Serous cystadenocarcinoma~~

~~Serous adenocarcinoma~~

~~Papillary cystadenocarcinoma~~

~~Papillocystic adenocarcinoma~~

~~Papillary serous cystadenocarcinoma~~

~~Papillary serous adenocarcinoma~~

~~Serous surface papillary carcinoma~~

~~Mucinous cystadenocarcinoma~~

~~Pseudomucinous adenocarcinoma~~

~~Pseudomucinous cystadenocarcinoma~~

~~Papillary mucinous cystadenocarcinoma~~

~~Papillary pseudomucinous~~

~~Cystadenocarcinoma~~

~~Mucinous adenocarcinoma~~

~~Mucinous carcinoma~~

~~Colloid adenocarcinoma~~

~~Colloid carcinoma~~

~~Gelatinous adenocarcinoma~~

~~Gelatinous carcinoma~~

~~Mucoid adenocarcinoma~~

~~Mucoid carcinoma~~

~~Mucous adenocarcinoma~~

~~Mucous carcinoma~~

~~Pseudomyxoma peritonei~~

~~Mucin-producing adenocarcinoma~~

~~Mucin-producing carcinoma~~

~~Mucin-secreting adenocarcinoma~~

~~Mucin-secreting carcinoma~~

~~Signet ring cell carcinoma~~

~~Signet ring cell adenocarcinoma~~

~~Metastatic signet ring cell carcinoma~~

~~Krukenberg tumor~~

~~10. Ductal, lobular and medullary neoplasms:~~

~~Intraductal carcinoma, noninfiltrating~~

~~Intraduct carcinoma, in situ~~

~~Infiltrating duct carcinoma~~

~~Infiltrating duct adenocarcinoma~~

~~Duct adenocarcinoma~~

~~Duct carcinoma~~

~~Duct cell carcinoma~~

~~Ductal carcinoma~~

~~Comedocarcinoma, noninfiltrating~~

~~Comedocarcinoma~~

~~Juvenile carcinoma of the breast~~

~~Secretory carcinoma of the breast~~

~~Noninfiltrating intraductal papillary adenocarcinoma~~

~~Noninfiltrating intracystic carcinoma~~

~~Medullary carcinoma~~

~~Medullary adenocarcinoma~~

~~Parafollicular cell carcinoma~~

~~C cell carcinoma~~

~~Medullary carcinoma with amyloid stroma~~

~~Solid carcinoma with amyloid stroma~~

~~Medullary carcinoma with lymphoid stroma~~

~~Lobular carcinoma, in situ~~

~~Lobular carcinoma, noninfiltrating~~

~~Lobular carcinoma~~

~~Lobular adenocarcinoma~~

~~Infiltrating lobular carcinoma~~

~~Infiltrating ductular carcinoma~~

~~Inflammatory carcinoma~~

~~Inflammatory adenocarcinoma~~

~~Paget's disease, mammary~~

~~Paget's disease of breast~~

~~Paget's disease and infiltrating duct carcinoma of breast~~

~~Paget's disease, extramammary~~

~~Acinar cell carcinoma~~

~~Acinic cell adenocarcinoma~~

~~Acinar adenocarcinoma~~

~~Acinar carcinoma~~

~~11. Complex epithelial neoplasms:~~

~~Adenosquamous carcinoma~~

~~Adenocarcinoma with squamous metaplasia~~

~~Adenoacanthoma~~

~~Adenocarcinoma with cartilaginous and osseous metaplasia~~

~~Adenocarcinoma with spindle cell metaplasia~~

~~Adenocarcinoma with apocrine metaplasia~~

~~Thymoma, malignant~~

~~Thymic carcinoma~~

~~12. Specialized gonadal neoplasms:~~

~~Theca cell carcinoma~~

~~Thecoma, malignant~~

~~Granulosa cell tumor, malignant~~

~~Granulosa cell carcinoma~~

~~Androblastoma, malignant~~

~~Arrhenoblastoma, malignant~~

~~Sertoli cell carcinoma~~

~~Leydig cell tumor, malignant~~

~~Interstitial cell tumor, malignant~~

~~13. Paragangliomas and glomus tumors:~~

~~Paraganglioma, malignant~~

~~Extra-adrenal paraganglioma, malignant~~

~~Nonchromaffin paraganglioma, malignant~~

~~Pheochromocytoma, malignant~~

~~Pheochromoblastoma~~

~~Glomangiosarcoma~~

~~Glomoid sarcoma~~

~~14. Nevi and melanomas:~~

~~Malignant melanoma~~

~~Melanoma~~

~~Melanocarcinoma~~

~~Nevocarcinoma~~

~~Melanosarcoma~~

~~Nodular melanoma~~

~~Balloon cell melanoma~~

~~Amelanotic melanoma~~

~~Malignant melanoma in junctional nevus~~

~~Precancerous malanosis~~

~~Malignant melanoma in precancerous melanosis~~

~~Hutchinson's melanotic freckle~~

~~Lentigo maligna~~

~~Malignant melanoma in Hutchinson's melanotic freckle~~

~~Lentigo maligna melanoma~~

~~Superficial spreading melanoma~~

~~Malignant melanoma in giant pigmented nevus~~

~~Epithelioid cell melanoma~~

~~Epithelioid cell melanosarcoma~~

~~Spindle cell melanoma~~

~~Spindle cell melanoma, type A~~

~~Spindle cell melanoma, type B~~

~~Mixed epithelioid and spindle cell melanoma~~

~~Blue nevus, malignant~~

~~15. Soft tissue tumors and sarcomas:~~

~~Sarcoma~~

~~Soft tissue tumor, malignant~~

~~Mesenchymal tumor, malignant~~

~~Sarcomatosis~~

~~Spindle cell sarcoma~~

~~Giant cell sarcoma~~

~~Pleomorphic cell sarcoma~~

~~Small cell sarcoma~~

~~Round cell sarcoma~~

~~Epithelioid cell sarcoma~~

~~16. Fibromatous neoplasms:~~

~~Fibrosarcoma~~

~~Fibromyxosarcoma~~

~~Periosteal fibrosarcoma~~

~~Periosteal sarcoma~~

~~Fascial fibrosarcoma~~

~~Infantile fibrosarcoma~~

~~Congenital fibrosarcoma~~

~~Fibrous histiocytoma, malignant~~

~~Fibroxanthoma, malignant~~

~~Fibroxanthosarcoma~~

~~Dermatofibrosarcoma~~

~~Dermatofibrosarcoma protuberans~~

~~Myxosarcoma~~

~~Liposarcoma~~

~~Fibroliposarcoma~~

~~Liposarcoma, well differentiated type~~

~~Myxoid liposarcoma~~

~~Myxoliposarcoma~~

~~Embryonal liposarcoma~~

~~Round cell liposarcoma~~

~~Pleomorphic liposarcoma~~

~~Mixed type liposarcoma~~

~~Angiomyoliposarcoma~~

~~17. Myomatous neoplasms:~~

~~Leiomyosarcoma~~

~~Epithelioid leiomyosarcoma~~

~~Angiomyosarcoma~~

~~Myosarcoma~~

~~Rhabdomyosarcoma~~

~~Rhabdosarcoma~~

~~Pleomorphic rhabdomyosarcoma~~

~~Mixed type rhabdomyosarcoma~~

~~Embryonal rhabdomyosarcoma~~

~~Sarcoma botryoides~~

~~Botryoid sarcoma~~

~~Alveolar rhabdomyosarcoma~~

~~18. Complex mixed and stromal neoplasms:~~

~~Endometrial stromal sarcoma~~

~~Endometrial sarcoma~~

~~Stromal sarcoma~~

~~Mixed tumor, malignant~~

~~Mixed tumor, salivary gland type malignant~~

~~Carcinoma in pleomorphic adenoma~~

~~Mullerian mexed tumor~~

~~Mesodermal mexed tumor~~

~~Nephroblastoma~~

~~Wilms's tumor~~

~~Adenosarcoma~~

~~Epithelian nephroblastoma~~

~~Mesenchymal nephroblastoma~~

~~Hepatoblastoma~~

~~Embryonal hepatoma~~

~~Carcinosarcoma~~

~~Carcinosarcoma, embryonal type~~

~~Pneumoblastoma~~

~~Mesenchymoma, malignant~~

~~Mixed mesenchymal sarcoma~~

~~Embryonal sarcoma~~

~~19. Fibroepithelial neoplasms:~~

~~Brenner tumor, malignant~~

~~Cystosarcoma phyllodes, malignant~~

~~20. Synovial neoplasms:~~

~~Synovial sarcoma~~

~~Synovioma~~

~~Synovioma, malignant~~

~~Synovial sarcoma, spindle cell type~~

~~Synovial sarcoma, epithelioid cell type~~

~~Synovial sarcoma, biphasic type~~

~~Clear cell sarcoma of tendons and aponeuroses~~

~~21. Mesothelial neoplasms:~~

~~Mesothelioma, malignant~~

~~Mesothelioma~~

~~Mesothelial sarcoma~~

~~Fibrous mesothelioma, malignant~~

~~Fibrous mesothelioma~~

~~Epithelioid mesothelioma, malignant~~

~~Epithelioid mesothelioma~~

~~Mesothelioma, biphasic type, malignant~~

~~Mesothelioma, biphasic type~~

~~22. Germ cell neoplasms:~~

~~Dysgerminoma~~

~~Seminoma~~

~~Seminoma, anaplastic type~~

~~Spermatocytic seminoma~~

~~Spermatocytoma~~

~~Germinoma~~

~~Embryonal carcinoma~~

~~Embryonal adenocarcinoma~~

~~Endodermal sinus tumor~~

~~Yolk sac tumor~~

~~Polyvesicular vitelline tumor~~

~~Orchioblastoma~~

~~Embryonal carcinoma, infantile type~~

~~Polyembryoma~~

~~Embryonal carcinoma, polyembryonal type~~

~~Teratoma, malignant~~

~~Embryonal teratoma~~

~~Teratoblastoma, malignant~~

~~Immature teratoma~~

~~Teratocarcinoma~~

~~Mixed embryonal carcinoma and teratoma~~

~~Malignant teratoma, undifferentiated type~~

~~Malignant teratoma, anaplastic type~~

~~Malignant teratoma, intermediate type~~

~~Dermoid cyst with malignant transformation~~

~~Struma ovarii, malignant~~

~~23. Trophablastic neoplasms:~~

~~Malignant hydatidiform mole~~

~~Choriocarcinoma~~

~~Chorionepithelioma~~

~~Chorioepithelioma~~

~~Choriocarcinoma combined with teratoma~~

~~Choriocarcinoma combined with embryonal carcinoma~~

~~Malignant teratoma, trophoblastic type~~

~~24. Mesonephromas:~~

~~Mesonephroma, malignant~~

~~Mesonephric adenocarcinoma~~

~~Mesonephroma~~

~~Mesometanephric carcinoma~~

~~Wolffian duct carcinoma~~

~~Hemangiosarcoma~~

~~Angiosarcoma~~

~~Kupffer cell sarcoma~~

~~Hemangioendothelioma, malignant~~

~~Hemangioendothelial sarcoma~~

~~Kaposi's sarcoma~~

~~Multiple hemorrhagic sarcoma~~

~~Hemangiopericytoma, malignant~~

~~25. Lymphatic vessel tumors:~~

~~Lymphangiosarcoma~~

~~Lymphangioendothelial sarcoma~~

~~Lymphangioendothelioma, malignant~~

~~26. Osteomas and osteosarcomas:~~

~~Osteosarcoma~~

~~Osteogenic sarcoma~~

~~Osteochondrosarcoma~~

~~Osteoblastic sarcoma~~

~~Chondroblastic osteosarcoma~~

~~Fibroblastic osteosarcoma~~

~~Osteofibrosarcoma~~

~~Telangiectatic osteosarcoma~~

~~Osteosarcoma in Paget's disease of bone~~

~~Juxtacortical osteosarcoma~~

~~Juxtacortical osteogenic sarcoma~~

~~Parosteal osteosarcoma~~

~~Periosteal osteogenic sarcoma~~

~~27. Chondromatous neoplasms:~~

~~Chondrosarcoma~~

~~Fibrochondrosarcoma~~

~~Juxtacortical chondrosarcoma~~

~~Chondroblastoma, malignant~~

~~Mesenchymal chondrosarcoma~~

~~28. Giant cell tumors:~~

~~Giant cell tumor of bone, malignant~~

~~Osteoclastoma, malignant~~

~~Giant cell sarcoma of bone~~

~~Malignant giant cell tumor of soft parts~~

~~29. Miscellaneous bone tumors:~~

~~Ewing's sarcoma~~

~~Ewing's tumor~~

~~Endothelial sarcoma of bone~~

~~Adamantinoma of long bones~~

~~Tibial adamantinoma~~

~~30. Odontogenic tumors:~~

~~Odontogenic tumor, malignant~~

~~Odontogenic carcinoma~~

~~Odontogenic sarcoma~~

~~Intraosseous carcinoma~~

~~Ameloblastic odontosarcoma~~

~~Ameloblastoma, malignant~~

~~Adamantinoma, malignant~~

~~Ameloblastic fibrosarcoma~~

~~Ameloblastic sarcoma~~

~~Odontogenic fibrosarcoma~~

~~31. Miscellaneous tumors:~~

~~Caraniopharyngioma~~

~~Pineloma~~

~~Pinecytoma~~

~~Pineoblastoma~~

~~Chordoma~~

~~32. Gliomas:~~

~~Glioma, malignant~~

~~Glioma~~

~~Gliosarcoma~~

~~Gliomatosis cerebri~~

~~Mixed glioma~~

~~Mixed oligo-astrocytoma~~

~~Subependymal glioma~~

~~Subependymoma~~

~~Subependymal astrocytoma~~

~~Subependymal giant cell astrocytoma~~

~~Choroid plexus papilloma, malignant~~

~~Choroid plexus papilloma, anaplastic type~~

~~Ependymoma~~

~~Epithelial ependymoma~~

~~Ependymoma, anaplastic type~~

~~Ependymoblastoma~~

~~Papillary ependymoma~~

~~Myxopapillary ependymoma~~

~~Astrocytoma~~

~~Astroglioma~~

~~Astrocytic glioma~~

~~Cystic astrocytoma~~

~~Astrocytoma, anaplastic type~~

~~Protoplasmic astrocytoma~~

~~Gemistocytic astrocytoma~~

~~Gemistocytoma~~

~~Fibrillary astrocytoma~~

~~Fibrous astrocytoma~~

~~Pilocytic astrocytoma~~

~~Piloid astrocytoma~~

~~Juvenile astrocytoma~~

~~Spongioblastoma~~

~~Spongioblastoma polare~~

~~Astroblastoma~~

~~Glioblastoma~~

~~Glioblastoma multiforme~~

~~Spongioblastoma multiforme~~

~~Giant cell glioblastoma~~

~~Glioblastoma with sarcomatous component~~

~~Primitive polar spongioblastoma~~

~~Oligodendroglioma~~

~~Oligodendroglioma, anaplastic type~~

~~Oligodendroblastoma~~

~~Medulloblastoma~~

~~Desmoplastic medulloblastoma~~

~~Circumscribed arachnoidal cerebellar sarcoma~~

~~Medullomyoblastoma~~

~~Cerebral sarcoma~~

~~Monstrocellular sarcoma~~

~~33. Neuroepitheliomatous neoplasms:~~

~~Ganglioneuroblastoma~~

~~Neuroblastoma~~

~~Sympathicoblastoma~~

~~Sympathicogonioma~~

~~Sympathogonioma~~

~~Medulloepithelioma~~

~~Diktyoma~~

~~Terotoid medulloepithelioma~~

~~Neuroepithelioma~~

~~Spongioneuroblastoma~~

~~Retinoblastoma~~

~~Olfactory neurogenic tumor~~

~~Esthesioneurocytoma~~

~~Esthesioneuroblastoma~~

~~Olfactory neuroblastoma~~

~~Esthesioneuroepithelioma~~

~~Olfactory neuriepithelioma~~

~~34. Meningiomas:~~

~~Meningioma, malignant~~

~~Leptomeningeal sarcoma~~

~~Meningeal sarcoma~~

~~Meningothelial sarcoma~~

~~Meningeal sarcomatosis~~

~~35. Nerve sheath tumors:~~

~~Neurofibrosarcoma~~

~~Neurogenic sarcoma~~

~~Neurosarcoma~~

~~Neurilemmoma, malignant~~

~~Schwannoma, malignant~~

~~Neurilemmosarcoma~~

~~36. Granular cell tumors and alveolar soft part sarcoma:~~

~~Granular cell tumor, malignant~~

~~Granular cell myoblastoma, malignant~~

~~Alveolar soft part sarcoma~~

~~37. Lymphomas, not otherwise specified or diffuse:~~

~~Malignant lymphoma~~

~~Lymphoma~~

~~Malignant lymphoma, diffuse~~

~~Malignant lymphoma, non-Hodgkin's type~~

~~Malignant lymphoma, undifferentiated cell type~~

~~Malignant lymphoma, undifferentiated cell type, non-Burkitt's~~

~~Malignant lymphoma, stem cell type~~

~~Stem cell lymphoma~~

~~Malignant lymphoma, convoluted cell type~~

~~Malignant lymphoma, lymphoblastic, convoluted cell type~~

~~Lymphosarcoma~~

~~Malignant lymphoma, lymphoplasmacytoid type~~

~~Malignant lymphoma, immunoblastic type~~

~~Immunoblastic sarcoma~~

~~Immunoblastic lymphosarcoma~~

~~Immunoblastic lymphoma~~

~~Malignant lymphoma, mixed lymphocytic-histiocytic, not otherwise specified~~

~~Malignant lymphoma, centroblastic-centrocystic, diffuse~~

~~Germinoblastoma, diffuse~~

~~Malignant lymphoma, follicular center cell~~

~~Malignant lymphoma, lymphocytic, well differentiated~~

~~Malignant lymphoma, lymphocytic, intermediate differentiation~~

~~Malignant lymphoma, centrocytic~~

~~Malignant lymphoma, germinocytic~~

~~Malignant lymphoma, follicular center cell, cleaved~~

~~Malignant lymphoma, lymphocytic, poorly differentiated~~

~~Prolymphocytic lymphosarcoma~~

~~Malignant lymphoma, centroblastic type~~

~~Malignant lymphoma, follicular center cell, noncleaved~~

~~38. Reticulosarcomas:~~

~~Reticulosarcoma~~

~~Reticulosarcoma, pleomorphic cell type~~

~~Reticulosarcoma, nodular~~

~~39. Hodgkin's disease:~~

~~Hodgkin's disease~~

~~Lymphogranuloma, malignant~~

~~Lymphogranulomatosis, malignant~~

~~Malignant lymphoma, Hodgkin's type~~

~~Hodgkin's disease, lymphocytic predominance~~

~~Hodgkin's disease, mixed cellularity~~

~~Hodgkin's disease, lymphocytic depletion~~

~~Hodgkin's disease, lymphocytic depletion, diffuse fibrosis~~

~~Hodgkin's disease, lymphocytic depletion, reticular type~~

~~Hodgkin's disease, nodular sclerosis~~

~~Hodgkin's disease, nodular sclerosis, cellular phase~~

~~Hodgkin's paragranuloma~~

~~Hodgkin's granuloma~~

~~Hodgkin's sarcoma~~

~~40. Lymphomas, nodular or follicular:~~

~~Malignant lymphoma, nodular~~

~~Malignant lymphoma, follicular~~

~~Nodular lymphosarcoma~~

~~Follicular lymphosarcoma~~

~~Brill-Symmer's disease~~

~~Giant follicular lymphoma~~

~~Lymphocytic lymphoma, nodular~~

~~Malignant lymphoma, mixed lymphocytic-histiocytic, nodular~~

~~Malignant lymphoma, centroblastic-centrocytic, follicular~~

~~Germinoblastoma, follicular~~

~~Malignant lymphoma, lymphocytic, well differentiated, nodular~~

~~Malignant lymphoma, lymphocytic, intermediate differentiation, nodular~~

~~Malignant lymphoma, follicular center cell, cleaved, follicular~~

~~Malignant lymphoma, lymphocytic, poorly differentiated, nodular~~

~~Malignant lymphoma, centroblastic type, follicular~~

~~Germinoblastic sarcoma, follicular~~

~~Malignant lymphoma, follicular center cell, noncleaved, follicular~~

~~41. Mycosis fungoides:~~

~~Mycosis fungoides~~

~~Sezary's disease~~

~~Sezary's syndrome~~

~~42. Miscellaneous reticuloendothelial neoplasms:~~

~~Microglioma~~

~~Malignant histiocytosis~~

~~Malignant reticuloendotheliosis~~

~~Malignant reticulosis~~

~~Histiocytic medullary reticulosis~~

~~Letterer-Siwe's disease~~

~~43. Plasma cell tumors:~~

~~Plasma cell myeloma~~

~~Plasmacytic myeloma~~

~~Multiple myeloma~~

~~Myeloma, not otherwise specified~~

~~Myelomatosis~~

~~Plasma cell tumor, malignant~~

~~Plasma cell sarcoma~~

~~44. Mast cell tumors:~~

~~Mast cell sarcoma~~

~~Malignant mast cell tumor~~

~~Malignant mastocytoma~~

~~Malignant mastocytosis~~

~~Systemic tissue mast cell disease~~

~~45. Burkitt's tumor:~~

~~Burkitt's tumor~~

~~Burkitt's lymphoma~~

~~Malignant lymphoma, undifferentiated, Burkitt's type~~

~~Malignant lymphoma, lymphoblastic, Burkitt's type~~

~~46. Leukemias:~~

~~Leukemia~~

~~Acute leukemia~~

~~Stem cell leukemia~~

~~Blast leukemia~~

~~Blastic leukemia~~

~~Undifferentiated leukemia~~

~~Subacute leukemia~~

~~Chronic leukemia~~

~~Aleukemic leukemia~~

~~47. Compound leukemias:~~

~~Compound leukemia~~

~~Mixed leukemia~~

~~48. Lymphoid leukemias:~~

~~Lymphoid leukemia~~

~~Lymphocytic leukemia~~

~~Lymphatic leukemia~~

~~Acute lymphoid leukemia~~

~~Subacute lymphoid leukemia~~

~~Chronic lymphoid leukemia~~

~~Aleukemic lymphoid leukemia~~

~~Prolymphocytic leukemia~~

~~49. Plasma cell leukemias:~~

~~Plasma cell leukemia~~

~~Plasmacytic leukemia~~

~~50. Erythroleukemias:~~

~~Erythroleukemia~~

~~Erythremic myelosis~~

~~Acute erythremia~~

~~Di Guglielmo's disease~~

~~Guglielmo's disease~~

~~Acute erythremic myelosis~~

~~Chronic erythremia~~

~~51. Lymphosarcoma cell leukemias:~~

~~Lymphosarcoma cell leukemia~~

~~52. Myeloid leukemias:~~

~~Myeloid leukemia~~

~~Granulocytic leukemia~~

~~Myelogenous leukemia~~

~~Myelosis~~

~~Myelomonocytic leukemia~~

~~Acute myeloid leukemia~~

~~Acute granulocytic leukemia~~

~~Blastic granulocytic leukemia~~

~~Acute Myelogenous leukemia~~

~~Myeloblastic leukemia~~

~~Acute myelocytic leukemia~~

~~Acute myelomonocytic leukemia~~

~~Acute myelosis~~

~~Subacute myeloid leukemia~~

~~Chronic myeloid leukemia~~

~~Chronic granulocytic leukemia~~

~~Myelocytic leukemia~~

~~Chronic myelogenous leukemia~~

~~Chronic myelomonocytic leukemia~~

~~Naegeli-type monocytic leukemia~~

~~Chronic myelosis~~

~~Aleukemic myeloid leukemia~~

~~Aleukemic granulocytic leukemia~~

~~Aleukemic myelogenous leukemia~~

~~Aleukemic myelosis~~

~~Neutrophilic leukemia~~

~~Acute promyelocytic leukemia~~

~~53. Basophilic leukemias:~~

~~Basophilic leukemia~~

~~54. Eosinophilic leukemias:~~

~~Eosinophilic leukemia~~

~~55. Monocytic leukemias:~~

~~Monocytic leukemia~~

~~Histiocytic leukemia~~

~~Schilling-type monocytic leukemia~~

~~Monocytoid leukemia~~

~~Acute monocytic leukemia~~

~~Acute monocytoid leukemia~~

~~Monoblastic leukemia~~

~~Subacute monocytic leukemia~~

~~Subacute monacytoid leukemia~~

~~Chronic monocytic leukemia~~

~~Chronic monocytoid leukemia~~

~~Aleukemic monocytic leukemia~~

~~Aleukemic monocytoid leukemia~~

~~56. Miscellaneous leukemias:~~

~~Mast cell leukemias~~

~~Megakaryocytic leukemia~~

~~Megakaryocytoid leukemia~~

~~Thrombocytic leukemia~~

~~Megakaryocytic myelosis~~

~~Myeloid sarcoma~~

~~Chloroma~~

~~Granulocytic sarcoma~~

~~Myelosarcoma~~

~~Hairy cell leukemia~~

~~Leukemic reticuloendotheliosis~~

~~57. No microscopic confirmation of tumor:~~

~~No microscopic confirmation; clinically malignant tumor (cancer)~~

~~No microscopic confirmation; clinically metastatic tumor (cancer)]~~

1. Any neoplasm that is listed in the International Classification of Diseases for Oncology, as adopted by reference in section 2 of this regulation, with a behavior code of in situ or malignant; and

2. Any solid tumor of the brain or central nervous system, including, without limitation, the meninges and intracranial endocrine structures, that is listed in the International Classification of Diseases for Oncology, as adopted by reference in section 2 of this regulation, with a behavior code of benign, uncertain malignant potential, in situ or malignant.

Sec. 6. NAC 457.045 is hereby amended to read as follows:

457.045 Carcinoma in situ of the cervix ***uteri*** and ~~[noninvasive]~~ ***cervical intraepithelial neoplasia,*** basal and squamous cell carcinomas of the skin ***and prostatic intraepithelial neoplasia*** are not required to be reported pursuant to NAC 457.040.

Sec. 7. NAC 457.050 is hereby amended to read as follows:

457.050 1. Each ***provider of health care who is required to report information on cases of cancer and other neoplasms pursuant to NRS 457.230, each*** health care facility ***and any other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms*** shall ***, within 6 months after a patient is admitted, initially diagnosed with or treated for cancer or another neoplasm,*** provide to the Chief Medical Officer information concerning ~~[malignant]~~ ***such*** neoplasms by ~~[abstracting]~~ ***:***

(a) Abstracting information on a form prescribed by the Chief Medical Officer or a designee thereof ~~[.]~~ ***; and***

(b) Except as otherwise provided in subsection 6, submitting that information on a monthly basis using an electronic means approved by the Chief Medical Officer or the designee.

2. Except as otherwise provided in subsection 3, each ***provider of health care described in subsection 1, each*** health care facility ***and any other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms*** shall abstract information in conformance with the standards for abstracting information concerning ~~[malignant]~~ neoplasms ~~[of the Commission on Cancer of the American College of Surgeons as]~~ set forth in ~~[the Registry Operations and Data Standards (ROADS) Manual, 1996 edition, which is hereby adopted by reference, and any subsequent revision or amendment to the standards established by the Commission on Cancer of the American College of Surgeons. A copy of the manual may be obtained from the American College of Surgeons, 633 North Saint Clair Street, Chicago, Illinois 60611-3211, for the price of $25.~~

~~3. The Chief Medical Officer shall review any revision or amendment to the standards specified in subsection 2 to determine whether the revision or amendment is appropriate for this State. Ten]~~ ***:***

(a) Volumes I to V, inclusive, of the Standards for Cancer Registries, as adopted by reference in section 2 of this regulation; and

(b) The Facility Oncology Registry Data Standards (FORDS), as adopted by reference in section 2 of this regulation.

3. Thirty days after ~~[the standards]~~ ***a publication*** specified in subsection 2 ~~[are]~~ ***is*** revised ***,*** ~~[or amended,]~~ a ***provider of health care described in subsection 1, a*** health care facility ***or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms*** shall abstract information in conformance with the revision ~~[or amendment]~~ unless the Chief Medical Officer files an objection to the ~~[amendment or]~~ revision

~~[with the State Board of Health within 10 days after the standards are revised or amended.]~~ ***pursuant to section 2 of this regulation.***

4. A ***provider of health care described in subsection 1, a*** health care facility ***or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms*** which does not use the staff of the Division to abstract information from its records shall cause to have abstracted and reported to the Division the ~~[malignant neoplasms listed]~~ ***neoplasms described*** in NAC 457.040 in the manner required by this section.

5. If a ***provider of health care, a*** health care facility ~~[with 100 beds or more does not use the staff of the Division to abstract information from its records concerning malignant neoplasms, it shall cause to have abstracted and reported to the Division, pursuant to subsection 4, the malignant neoplasms listed in NAC 457.040 using an electronic means approved by the Chief Medical Officer or the designee, unless an exemption from this requirement is granted by the]~~ ***or other facility fails to comply with subsection 4, the Division shall give the provider of health care, health care facility or other facility at least 30 days to comply with subsection 4 before the Division abstracts information from the records of the provider of health care, health care facility or other facility and the*** Chief Medical Officer ~~[.]~~ ***charges the fee set forth in NAC 457.150.***

6. The Chief Medical Officer may waive the requirement of submitting the information by electonic means pursuant to subsection 1 if the Chief Medical Officer determines that such a waiver is in the best interests of the general public.

Sec. 8. NAC 457.053 is hereby amended to read as follows:

457.053 1. A medical laboratory that obtains a specimen of human tissue which, upon examination, shows evidence of cancer ***or other neoplasms*** shall, within 10 working days after

the date that the pathology report is completed, provide information concerning its findings to the Chief Medical Officer using an electronic means approved by the Chief Medical Officer or a designee thereof.

2. The information provided by a medical laboratory pursuant to subsection 1 must include, without limitation ~~[:]~~ ***, for each specimen which shows evidence of cancer or other neoplasms which are subject to reporting pursuant to NAC 457.040:***

(a) The name, address, date of birth, gender and social security number of the person from whom the specimen was obtained;

(b) The name and the address or telephone number of the ~~[physician]~~ ***provider of health care*** who ordered the examination of the specimen;

(c) The name and the address or telephone number of the medical laboratory that examined the specimen;

(d) The final diagnosis from the pathology report; and

(e) Any other relevant information from the pathology report, including, without limitation:

(1) The anatomical site of the lesion;

(2) The size of the lesion;

(3) The stage of the disease and the grade of tumor;

(4) The lesion margin status, if available; and

(5) Lymphatic involvement, if available.

Sec. 9. NAC 457.057 is hereby amended to read as follows:

457.057 1. ~~[Except as otherwise provided in subsection 3, a physician]~~ ***A provider of health care*** who has a case ***of cancer or another neoplasm*** in which he or she ~~[diagnoses]~~ ***has directly referred or previously admitted*** a patient ~~[as having cancer or provides treatment to a~~

~~patient with cancer]~~ ***to a hospital, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms is not required to provide information to the Chief Medical Officer pursuant to NAC 457.050 but*** shall, within ~~[10]~~ ***30*** working days after the date of the ~~[diagnosis or the date of the first treatment,]~~ ***referral or admission,*** provide information to the Chief Medical Officer concerning the case on a form prescribed by the Chief Medical Officer or a designee thereof, or by an electronic means approved by the Chief Medical Officer or the designee.

2. Information provided by a ~~[physician]~~ ***provider of health care*** pursuant to subsection 1 must include, without limitation:

(a) The name, address, date of birth, gender, race or ethnicity, and social security number of the patient;

(b) The name and the address or telephone number of the ~~[physician]~~ ***provider of health care*** making the report;

(c) The ***date and*** final diagnosis ~~[from the pathology report; and]~~ ***of the patient;***

(d) ~~[Any other relevant information from the pathology report, including, without limitation:~~

~~(1)]~~ The anatomical site of the lesion;

~~[(2) The size of the lesion;~~

~~(3)]~~

(e) The stage of the disease ***,*** ~~[and the grade of tumor;~~

~~(4) The lesion margin status, if available; and~~

~~(5) Lymphatic involvement,]~~ if available ~~[.]~~ ***; and***

(f) The name and the address or telephone number of the hospital, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms to which the patient was referred or admitted.

3. ~~[A physician is not required to provide information pursuant to this section if the patient is directly referred to or has been previously admitted to a hospital, medical laboratory or other facility which is required to report similar information pursuant to this chapter.]~~ ***The Chief Medical Officer or a designee thereof shall notify a provider of health care who fails to comply with this section of the fact that the provider of health care is not in compliance with the provisions of this section.***

4. The Chief Medical Officer or a designee thereof may contact a provider of health care regarding a patient who was directly referred to or previously admitted to a hospital, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms if the Chief Medical Officer determines it is necessary for the abstraction of the required data relating to the incidence of neoplasms.

Sec. 10. NAC 457.060 is hereby amended to read as follows:

457.060 All documents in the possession of the registry which contain names of patients, ~~[physicians, hospitals]~~ ***providers of health care, health care facilities, other facilities that provide screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms*** or medical laboratories are confidential except the list of names of ~~[hospitals]~~ ***health care facilities or other facilities that provide screening, diagnostic or therapeutic services*** which report information to the registry and the list of names of medical laboratories which report information to the registry.

Sec. 11. NAC 457.090 is hereby amended to read as follows:

457.090 1. If confidential information of the registry is to be mailed to a ~~[physician]~~ ***provider of health care*** or health care facility, the envelope or container must be addressed directly to the ~~[physician]~~ ***provider of health care*** or to the person designated by the health care facility to receive such information.

2. The Chief Medical Officer shall keep a list of the persons who have been designated by the chief administrator of the health care facility to receive confidential information of the registry.

Sec. 12. NAC 457.110 is hereby amended to read as follows:

457.110 1. The Chief Medical Officer or person employed in the registry shall not disclose the existence or nonexistence in the registry of a record concerning any patient or disclose other information about the patient except to:

(a) The ~~[physician]~~ ***provider of health care*** who treated the patient;

(b) The health care facility ***, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms*** where the patient was treated;

(c) A health care facility ***, medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms,*** or a registry connected with ~~[that facility]~~ ***one of those entities*** which has participated or is participating in treating the patient; or

(d) A qualified researcher in cancer.

2. If a request for information about a patient is made over the telephone by the ~~[physician]~~ ***provider of health care*** who treated the patient or by a representative of the health care facility ***, medical laboratory or other facility that provides screening, diagnostic or therapeutic services***

to patients with respect to cancer and other neoplasms in which the patient was treated, and the caller is not known to the employee who receives the call at the registry, the employee must verify the identity of the caller in the manner described in NAC 457.130.

Sec. 13. NAC 457.120 is hereby amended to read as follows:

457.120 The Chief Medical Officer or person employed in the registry may provide confidential medical information in the registry concerning a patient's medical treatment for cancer with any health care facility, ***medical laboratory or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms,*** or registry connected with ~~[the facility]~~ ***one of those entities*** which has participated or is participating in treating that patient's illness if the person seeking the information:

1. Has been identified in the manner described in NAC 457.130;

2. Furnishes the employee of the registry with specific information, other than the patient's name, which is sufficient to identify the patient without using his or her name; and

3. Gives assurances to the employee of the registry that the confidentiality of the information will be maintained to the same extent as is required in NAC 457.010 to 457.150, inclusive ~~[.]~~ ***, and sections 2 and 3 of this regulation.***

Sec. 14. NAC 457.140 is hereby amended to read as follows:

457.140 1. A person who desires to use the confidential records of individual patients or the statistical data of the registry for the purpose of scientific research into cancer must apply in writing to the Chief Medical Officer. The applicant must:

(a) Set forth in the application:

(1) His or her qualifications as an epidemiologist, ~~[physician]~~ ***provider of health care*** or employee of a bona fide program of research into cancer or other qualification for using confidential information and statistical data in the registry; and

(2) A description of the research project in which that information will be used.

(b) Sign a statement, on a form furnished by the Chief Medical Officer or a designee thereof, in which the applicant agrees not to make any copies of the records, and to maintain the confidentiality of the information in the records in the manner required by NAC 457.010 to 457.150, inclusive ~~[.]~~ ***, and sections 2 and 3 of this regulation.***

(c) Agree to ~~[submit]~~ ***:***

(1) Submit to the Chief Medical Officer or the designee for review and approval any proposed publication which is based on or contains information obtained from the registry ~~[.]~~ ***;***

(2) Notify the Chief Medical Officer if, at any time during the research project or before publishing any results, the applicant finds an increased risk or decreased survival for cancer as compared to other states in either:

(I) A geographical area of this State; or

(II) A particular group of persons in this State, including, without limitation, a group of persons identifiable by age, gender, race, ethnicity, occupation, lifestyle or place of residence; and

(3) Include in any publication which is based on or contains information obtained from the registry the following disclosure in substantially the following form:

The views expressed herein are solely those of the author and do not necessarily reflect the views of the Division.

2. The Chief Medical Officer or the designee must:

(a) Before a researcher is allowed access to information in the registry, make a written finding that he or she is qualified as a researcher and has a need for the information; and

(b) ~~[Before any material based on or containing information from the registry is published by the researcher, examine and give written approval for the proposed publication.]~~ ***Notify the Division as soon as practicable after the Chief Medical Officer receives notice of a finding described in subparagraph (2) of paragraph (c) of subsection 1 so that the Division may independently assess the validity of the finding before the material is published or released by the researcher.***

Sec. 15. NAC 457.150 is hereby amended to read as follows:

457.150 The Chief Medical Officer shall charge and collect from:

1. A ***provider of health care who is required to report information on cases of cancer and other neoplasms pursuant to NRS 457.230, a*** health care facility ~~[,]~~ ***or other facility that provides screening, diagnostic or therapeutic services to patients with respect to cancer and other neoplasms,*** a fee of ~~[$32]~~ ***$250*** for each abstract prepared by the Division from the records of the ***provider of health care,*** health care facility ~~[and a fee of $8 for each abstract prepared by the health care facility from its own records.]~~ ***or other facility.***

2. A medical researcher ~~[or other person]~~ who obtains ~~[information]~~ ***data*** from the registry, a fee of ~~[$35]~~ ***$200*** or the actual cost of ~~[furnishing the information,]~~ ***providing the data,*** whichever is ~~[larger.]~~ ***more.***