Health Division Emergency Regulation Nevada Administrative Code Chapter 449

Proposed Regulation Amendments:

Nevada Administrative Codes (NAC) 449.9812

NAC 449.9812 Program for quality assurance. (NRS 449.037)

- 1. The administrator of an ambulatory surgical center shall establish a program for quality assurance for the center.
 - 2. The program for quality assurance must include, without limitation:
- (a) Periodic reviews of the clinical responsibilities and authority of the members of the staff.
 - (b) Periodic evaluations of members of the staff that are conducted by their peers.
- (c) Procedures for the supervision of the professional and technical activities of the members of the staff.
- (d) Periodic evaluations that are conducted to determine whether the clinical and administrative policies of the center are cost-effective. The evaluations required by this paragraph must not be limited to the cost-effectiveness of the administrative policies of the center.
- (e) Procedures for identifying and correcting any problems or concerns that provide an opportunity for all members of the staff who are health care practitioners to participate in the program for quality assurance.
- (f) Techniques for self-assessment that are required to be used by the members of the staff and provide for an examination of the manner in which care has been, is and will be provided and the quality of the care provided.
- (g) Procedures for identifying and addressing any problems or concerns related to the care provided to patients using the medical records of the center and any other sources of data that may be useful to identify previously unrecognized concerns, and for assessing the frequency, severity and sources of suspected problems and concerns. The procedures must include, without limitation, procedures for assessing:
- (1) The clinical performances of members of the staff who are health care practitioners;
 - (2) The standards used for the maintenance of medical records;
- (3) The procedures used to control the quality of radiological, pathological, laboratory and pharmaceutical services provided by the center;
- (4) The procedures used to control the quality of other professional and technical services provided by the center;
- (5) The care and services provided by the extended recovery unit, if such a unit is operated by the center;
 - (6) The procedures used to control infection; and
 - (7) The satisfaction of patients who have been treated at the center.
- (h) The maintenance of a record of all fires and deaths that have occurred at the center and the transfer of all patients from the center to a hospital.
- (i) Procedures for assessing any actions taken to correct identified problems or concerns and for determining whether the actions taken have achieved or sustained the desired result and, if not, why not. EXHIBIT E-7 Health Care

Entire document provided. Due to size limitations, pages provided. A copy of the complete document is available through the Research Library (775/684-6827) or e-mail library@lcb.state.nv.us). Meeting Date 3/6/08

Document consists of 3 pages.

- 3. The members of the professional and administrative staffs of the center shall:
- (a) Understand, support and participate in the program for quality assurance; and
- (b) Participate in the resolution of any problems and concerns identified pursuant to the procedures required by subsection 2.
 - 4. The members of the staff who are health care practitioners shall participate in the development and application of the criteria used to evaluate the care provided at the center and the evaluation of any problems and concerns identified pursuant to the procedures required by subsection 2.
 - 5. The facility shall establish and maintain an infection control program designed in accordance with acceptable standards of practice to prevent the development and transmission of disease and infection.
- 5–6. Activities conducted pursuant to the program for quality assurance must be reported to the appropriate members of the staff and to the governing body. The administrator of the center shall establish procedures for carrying out any recommendations of the governing body.
- 6-7. As used in this section, "health care practitioner" means a person who is licensed or certified to provide health care services in this State, including, without limitation, a physician, dentist, podiatrist, and registered or licensed practical nurse.

(Added to NAC by Bd. of Health by R049-99, eff. 9-27-99)

NAC 449.990 Medication and treatment. (NRS 449.037)

- 1. Any medication or treatment may be given only upon the written or oral order of a person lawfully authorized to prescribe that medication or treatment. This order must be authenticated by the prescriber and the person administering the medication. An oral order must be recorded and authenticated within 24 hours after it is made.
 - 2. Medications prepared by one nurse may not be administered by another nurse.
 - 3. At the time the medication is administered, the patient must be identified and the medication must be identified as being ordered for that patient and recorded in the medical record of the patient.
 - 4. The facility shall provide drugs and biologicals in a safe and effective manner in accordance with accepted professional practice and following manufacturer's instructions.
 - 5. Drugs must be prepared and administered according to established policies, acceptable standards of practice and manufacturers instructions.
- —4. 6. Records must be maintained for any substance listed as a schedule II controlled substance pursuant to chapter 453 of NRS. Any such record must indicate the name of the patient, the name of the prescriber, the name of the controlled substance, the strength and dose administered, and the balance of the controlled substance remaining. A count must be made of all such controlled substances at the change of each nursing shift by a nurse from each shift. The count must be authenticated by both nurses.
- 5. 7. Transfusions of blood or intravenous medications may be administered only by persons who have been specially trained and are authorized for that duty. An ambulatory surgical center shall adopt policies and procedures for the administration of blood.
- 6. 8. Any suspected adverse reaction to a transfusion or medication must be reported by members of the nursing staff to the physician attending the patient. The nursing staff shall note the reaction in the medical record of the patient. Any suspected reaction to a transfusion must also be reported to the service that furnished the blood.

(Added to NAC by Bd. of Health, eff. 12-15-88; A by R049-99, 9-27-99)	

Endorsed this date	by
Honorable Jim Gibbons, Gove	ernor of the State of Nevada