

NEVADA STATE BOARD OF MEDICAL EXAMINERS

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Reno, NV 89521Rachakonda D. Prabhu, M.D.
Board PresidentEdward O. Cousineau, J.D.
Executive Director

February 14, 2019

Governor Steve Sisolak
101 North Carson Street
Carson City, Nevada 89701Richard Combs, Director
Legislative Counsel Bureau
401 South Carson Street
Carson City, Nevada 89701-4747

Re: Biennial Statistical Report

Dear Governor Sisolak and Mr. Combs:

The Nevada State Board of Medical Examiners is required by NRS 630.130(2) to submit a written report to the Governor and the Director of the Legislative Counsel Bureau containing certain statistical information. The following table provides all of the information sought in NRS 630.130(2) with the exception of information requested under NRS 630.130(2)(c) for in-office surgery reports and sentinel events. Note: The biennial license renewal period ends July 1, 2019; therefore, statistics requested per NRS 630.130(2)(c) will not be available until after that date and will be submitted in a supplemental report.

STATUTE	TOTAL
NRS 630.130(2)(a) – Disciplinary action taken by the Board during the previous biennium against any licensee for malpractice or negligence	67
NRS 630.3067(1)(a) – The insurer of a physician licensed under this chapter shall report to the Board any action for malpractice against the physician not later than 45 days after the physician receives service of a summons and complaint for the action	255
(1)(b) – The insurer of a physician licensed under this chapter shall report to the Board any claim for malpractice against the physician that is submitted to arbitration or mediation not later than 45 days after the claim is submitted to arbitration or mediation	0
(1)(c) – The insurer of a physician licensed under this chapter shall report to the Board any settlement, award, judgment or other disposition of any action or claim described in paragraph (a) or (b) not later than 45 days after the settlement, award, judgment or other disposition	263
NRS 630.3068(1)(a) – A physician shall report to the Board any action for malpractice against the physician not later than 45 days after the physician receives service of a summons and complaint for the action	267
(1)(b) – A physician shall report to the Board any claim for malpractice against the physician that is submitted to arbitration or mediation not later than 45 days after the claim is submitted to arbitration or mediation	2

<p>(1)(c) – A physician shall report to the Board any settlement, award, judgment or other disposition of any action or claim described in paragraph (a) or (b) not later than 45 days after the settlement, award, judgment or other disposition</p>	<p>160</p>
<p>(1)(d) – A physician shall report to the Board any sanctions imposed against the physician that are reportable to the National Practitioner Data Bank not later than 45 days after the sanctions are imposed</p>	<p>143</p>
<p>NRS 630.307(3) – Any hospital, clinic or other medical facility licensed in this State, or medical society, shall report to the Board any change in the privileges of a physician, perfusionist, physician assistant or practitioner of respiratory care to practice while the physician, perfusionist, physician assistant or practitioner of respiratory care is under investigation and the outcome of any disciplinary action taken by that facility or society against the physician, perfusionist, physician assistant or practitioner of respiratory care concerning the care of a patient or the competency of the physician, perfusionist, physician assistant or practitioner of respiratory care within 30 days after the change in privileges is made or disciplinary action is taken</p>	<p>39</p>
<p>(4) – A hospital, clinic or other medical facility licensed in this State, or medical society, shall report to the Board within 5 days after a change in the privileges of a physician, perfusionist, physician assistant or practitioner of respiratory care to practice that is based on: (a) An investigation of the mental, medical or psychological competency of the physician, perfusionist, physician assistant or practitioner of respiratory care; or (b) Suspected or alleged substance abuse in any form by the physician, perfusionist, physician assistant or practitioner of respiratory care</p>	<p>0</p>
<p>(6) – The clerk of every court shall report to the Board any finding, judgment or other determination of the court that a physician, perfusionist, physician assistant or practitioner of respiratory care: (a) Is mentally ill; (b) Is mentally incompetent; (c) Has been convicted of a felony or any law governing controlled substances or dangerous drugs; (d) Is guilty of abuse or fraud under any state or federal program providing medical assistance; or (e) Is liable for damages for malpractice or negligence, within 45 days after such a finding, judgment or determination is made</p>	<p>0</p>
<p>NRS 690B.250(1) – Each insurer which issues a policy of insurance covering the liability of a practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS for a breach of his or her professional duty toward a patient shall report to the board which licensed the practitioner within 45 days each settlement or award made or judgment rendered by reason of a claim, if the settlement, award or judgment is for more than \$5,000, giving the name of the claimant and the practitioner and the circumstances of the case</p>	<p>95</p>
<p>(2) – A practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS who does not have insurance covering liability for a breach of his or her professional duty toward a patient shall report to the board which issued the practitioner’s license within 45 days of each settlement or award made or judgment rendered by reason of a claim, if the settlement, award or judgment is for more than \$5,000, giving the practitioner’s name, the name of the claimant and the circumstances of the case</p>	<p>2</p>

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<p>NRS 690B.260(3) – The Commissioner shall, within 30 days after receiving a report from an insurer pursuant to this section, submit a report to the Board of Medical Examiners or the State Board of Osteopathic Medicine, as applicable, setting forth the information provided to the Commissioner by the insurer pursuant to this section</p>	<p>171</p>
<p>NRS 630.130(2)(c) – Information reported to the Board during the previous biennium pursuant to NRS 630.30665, including, without limitation, the number and types of surgeries performed by each holder of a license to practice medicine and the occurrence of sentinel events arising from such surgeries, if any (in-office surgery reporting and sentinel events)</p>	

If you have any questions or need additional information, please contact me directly.

Respectfully,



Edward O. Cousineau, J.D.
Executive Director
Nevada State Board of Medical Examiners
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