

# DEVELOPMENT OF THE PRACTICE OF CHINESE MEDICINE



*Bulletin No. 116*

LEGISLATIVE COMMISSION  
OF THE  
LEGISLATIVE COUNSEL BUREAU  
STATE OF NEVADA



DEVELOPMENT OF THE PRACTICE  
OF CHINESE MEDICINE

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1. Senate Concurrent Resolution No. 35--Senators Drakulich, Herr, Walker, Neal, Swobe and Young

FILE NUMBER 114

SENATE CONCURRENT RESOLUTION--Directing the legislative commission to study the development of the practice of Chinese medicine in this state and to make a report of the results of the study and recommendations for proposed legislation to the next regular session of the legislature.

WHEREAS, By its considered action the legislature of the State of Nevada has enacted a bill permitting and regulating the practice of traditional Chinese medicine, including the practice of acupuncture and herbal medicine; and

WHEREAS, This action on the part of the legislature is an innovative approach to the needs of the people; and

WHEREAS, This action is a distinct accomplishment by comparison with the public policy of other states; and

WHEREAS, The practice of traditional Chinese medicine is a novel activity in this country; now, therefore, be it

RESOLVED BY THE SENATE OF THE STATE OF NEVADA, THE ASSEMBLY CONCURRING, That the legislative commission is hereby directed to make a study of the development and the experience of the practice of Chinese medicine in this state and to report the results of such study and any recommendations for proposed legislation to the 58th session of the legislature.



2. Report of the Legislative Commission

TO THE MEMBERS OF THE 58TH SESSION OF THE NEVADA LEGISLATURE:

The Legislative Commission appointed a subcommittee to study the development of the practice of Chinese medicine for the purpose of reporting to the 58th session of the legislature the results of such study and its recommendations pursuant to Senate Concurrent Resolution No. 35 (1973). The following legislators were named as members of the subcommittee:

Senator Stanley J. Drakulich, Chairman  
Senator Archie Pozzi, Jr.  
Senator William J. Raggio  
Assemblyman Eileen B. Brookman  
Assemblyman Daniel J. Demers  
Assemblyman Darrell H. Dreyer  
Assemblyman Roy L. Torvinen

The Legislative Commission accepts the subcommittee's report and thanks the members of the subcommittee for their efforts in making the required study and report.

The report is transmitted to the members of the 1975 legislature for their consideration and appropriate action.

Respectfully submitted,

Legislative Commission  
State of Nevada

October 1974



3. Final Report of the Legislative Commission's Subcommittee  
for the Study of the Development of the Practice of Chinese  
Medicine

I. Introduction

Senate Concurrent Resolution No. 35 of the 1973 legislative session directed the Legislative Commission to study the development of the practice of Chinese medicine in the State of Nevada. Pursuant to this direction, the commission appointed the following subcommittee to pursue the study:

Senator Stanley J. Drakulich, Chairman  
Senator Archie Pozzi, Jr.  
Senator William J. Raggio  
Assemblyman Eileen B. Brookman  
Assemblyman Daniel J. Demers  
Assemblyman Darrell H. Dreyer  
Assemblyman Roy L. Torvinen

During the 1973 legislative session, Senate Bill No. 448 was adopted by the legislature and was approved by the Governor. Chapter 441, Statutes of Nevada 1973. The Statute Reviser, in the Legislative Counsel Bureau, then incorporated this statute into the Nevada Revised Statutes as chapter 634A of NRS. (Appendix A.) The provisions of this statute recognize the practice of traditional Chinese medicine as a learned profession, beneficial to the welfare of the residents of our state. This legislation also provides for a state board to regulate the practice of traditional Chinese medicine and to license only those applicants who meet educational and experiential criteria sufficient to satisfy the board of the applicant's competence to practice traditional Chinese medicine in such a manner that the public welfare and safety will be adequately protected.

II. Background

The practice of traditional Chinese medicine includes acupuncture and herbology. However, it is acupuncture which is more familiar to the public and which has created the most controversy. The use of acupuncture as a healing art began approximately 5,000 years ago. Most of the publicity which acupuncture

has received in this country involves its use as an analgesic device (to relieve pain), or an anesthetic device (to desensitize, i.e., to facilitate surgery). However, in Oriental countries they also use acupuncture for the treatment of disease. Modernly, doctors of traditional Chinese medicine unhesitatingly point out that acupuncture is not a cure for all medical problems.

The theories upon which acupuncture has developed are essentially based on the Chinese philosophy of life. According to this philosophy, the forces responsible for life or death are in the form of Ch'i (vital energy). The flow of Ch'i through the body is controlled by the interaction of two opposing forces, the Yin and the Yang. Yin represents the negative and Yang represents the positive.

In the universe, according to this philosophy, the harmonious interaction of Yin and Yang expresses itself in the rising and setting of the sun, the development of good crops and other positive occurrences in nature. An imbalance between Yin and Yang is expressed in nature by such negative occurrences as storms, earthquakes and other natural disasters. In man, health is the result of a balance between Yin and Yang, and all diseases are due to an imbalance of these forces.

The theories upon which acupuncture has developed provide that Ch'i circulates through the "12 organs" of the body by means of 12 primary meridians (channels). These meridians have a direct connection with every organ in the body, thereby providing access to the source or sources of individual disturbances. The acupuncture needles are inserted at acupuncture points located along these 12 meridians.

An acupuncturist will diagnose the source or sources of a patient's problems by taking the patient's pulse. This is not a method for merely ascertaining the rate of a patient's heartbeat, as performed by western medical sciences. Pulse diagnosis is a complex and highly sophisticated system whereby a practitioner is able to determine, according to doctors of traditional Chinese medicine, how an organ is functioning by monitoring one of 12 different pulses. A highly proficient practitioner has as many as 27 different qualities on each pulse which he can monitor for purposes of diagnosis.

After locating the source of an energy imbalance, a Chinese practitioner then seeks to restore the balance of Yin and Yang by inserting needles into one or more acupuncture points. The needles are sometimes twirled to achieve the desired result; and under stipulated circumstances, a practitioner may burn certain prescribed herbs while such herbs are attached to the needle or placed on the skin of the patient (moxibustion). It is through these procedures that a balance between Yin and Yan is restored and the patient is returned to health.

Acupuncture, as a branch of the medical healing arts, has been received in this country with considerable skepticism, particularly by western medical professionals.

Beginning in 1971, numerous physicians from this country made professional tours of Red China and reported to their colleagues on the amazing results of acupuncture anesthesiology. In 1972 the National Institute of Health, of the U.S. Department of Health, Education, and Welfare, announced that it would fund research projects analyzing the many aspects of acupuncture.

Subsequently, the American Society of Anesthesiologists, a professional association of approximately 11,000 physicians specializing or interested in anesthesiology, announced that it would also conduct research into the use of acupuncture in surgery and dentistry. Also, the 5,000-member National Acupuncture Research Society, composed of medical scientists and practitioners from all parts of the country, is collecting information and conducting research concerning the benefits of acupuncture.

There are numerous other private and public organizations, including the medical schools of the University of California, which are studying acupuncture and its potential medical uses.

Most of these research projects have barely begun their enormous tasks. Hopefully, these various undertakings will soon yield facts and conclusions which will answer some of the many questions raised by medical practitioners in this country, and will alleviate the apprehension expressed by some members of the 1973 session of the Nevada legislature when the provisions regulating Chinese medicine were adopted.

### III. Subcommittee Hearings and Findings

Pursuant to its mandate from the Legislative Commission, the subcommittee held hearings throughout the state. Meetings were held on:

November 1, 1973, Carson City, Nevada  
February 15, 1974, Las Vegas, Nevada  
July 12, 1974, Reno, Nevada  
September 20, 1974, Las Vegas, Nevada

These meetings were attended by: representatives of western and eastern medical sciences from this state, Nevada's sister states and from foreign countries; William M. Edwards, M.D., Secretary, Board of Chinese Medicine; members of the Chinese Medicine Advisory Committee; and numerous members of the public, many of whom had received treatment by acupuncturists.

These hearings familiarized the subcommittee with problems to be anticipated in Nevada during the period of the development of acupuncture as an accepted and respected field of the healing arts. The subcommittee also gained understanding concerning the need for acupuncturists within our state and of the benefits acupuncture treatment offers to recipients of this medical service.

The subcommittee was often reminded, by both eastern and western practitioners of acupuncture, that this form of treatment is not a panacea for all medical problems; but that it is often effective where traditional western treatment is unsuccessful.

#### (a) State Board of Chinese Medicine

The subcommittee would like to express its appreciation to the State Board of Chinese Medicine and to the Chinese Medicine Advisory Committee for the tremendous effort expended in initiating the licensing procedures and in developing regulatory policies for the practice of Chinese medicine in Nevada. The subcommittee recognized that the board had to function under considerable pressure initiated by persons aspiring to be licensed as acupuncturists, and by members of the public desiring immediate access to this

form of medical treatment. Difficulties were further intensified since the board was creating original and imaginative regulatory procedures for a profession that is essentially unrecognized by Nevada's sister states.

The subcommittee especially commends William M. Edwards, M.D., Secretary, State Board of Chinese Medicine. Dr. Edwards' immense and untiring efforts in implementing the legislative mandate establishing acupuncture as a recognized medical profession in Nevada merits the respect and gratitude of all Nevadans and particularly of his peers within the medical profession.

It was the tremendous demands placed upon Dr. Edwards which suggested the need for an executive secretary, working on a full- or part-time basis, under the direction of the State Board of Chinese Medicine. It was further determined that an appropriation from the general fund would be needed during the next biennium to fund the executive secretary position because of the limited income available to the board at this time. This limited income is due to the small number of licensees under the board's jurisdiction and the low license fees (further discussed below). The subcommittee recommends a general fund appropriation for the position of executive secretary. (Appendix C.)

It was thought to be highly desirable for the practice of traditional Chinese medicine to be regulated by practitioners from within this profession. This is the legislative policy followed for other professional regulatory boards in Nevada. The subcommittee realized that at the present time there may not be enough prospective members of the profession who are willing and legally qualified to sit on the board. The subcommittee believed that members of the board could be slowly replaced by practitioners of traditional Chinese medicine. The subcommittee further concluded that the board should be able to abolish the Chinese Medicine Advisory Committee when the board determines that the assistance of an advisory committee is no longer necessary. (Appendix D.)

In his several appearances before the subcommittee, Dr. Edwards indicated that the board was not confident of the jurisdictional limits of its rulemaking authority. The board has already adopted regulations requiring applicants for licenses to pay necessary investigation and translation fees. The board desires to adopt regulations permitting the board to inspect the professional facilities of licensees and to require certain periodic reports of its licensees. The subcommittee recommended that the jurisdiction of the board be further clarified. (Appendix E.)

(b) Licenses

As of August 15, 1974, there were 13 practitioners licensed to practice traditional Chinese medicine or acupuncture in Nevada. Four of these practitioners have not yet established offices in this state. There were nine persons licensed as acupuncture assistants, of which only one had established an office in Nevada.

There were many problems brought to the attention of the subcommittee concerning the licensing of practitioners and the regulation of this profession. One of the problems concerns the expenses involved in regulating the profession and how the board might meet those expenses. The board has already expended approximately \$8,000 in public funds. Apparently, it would have a great deal of difficulty if required to repay this debt because of the board's limited income. The subcommittee determined that it was desirable for the board to be supported by the professionals it regulates, even though this may not be possible until there are a greater number of licensees. In order to achieve this self-support within the profession, the subcommittee recommended that the annual license fees should be substantially increased and that resident and nonresident licensees should pay equal fees. (Appendix F.)

On numerous occasions the subcommittee discussed the desirability of all licensed practitioners being proficient in the English language. Presently, the rules and regulations of the board require an applicant for

a license as a doctor of traditional Chinese medicine, or any of its branches, to demonstrate "reasonable proficiency" in the English language during an oral interview. An applicant, however, may choose to take the written examination in another language. The subcommittee decided that the public would be better served if, after June 30, 1977, all examinations administered by the board were in the English language. This would enhance communication between the practitioners and their patients and facilitate a more adequate diagnosis. (Appendix G.)

It is believed that under our present statutory scheme of regulating the various medical professions, certain medical professionals may, subject to statutory restrictions, be qualified to employ techniques of acupuncture within their respective practices. There was general agreement among the members of the subcommittee, and between the subcommittee and the representative of the board, Dr. Edwards, that practitioners of certain other healing professions should be able to combine their past medical education and experience with further education and experience in the field of acupuncture, to enable such persons to be licensed as doctors of traditional Chinese medicine or as doctors of acupuncture. The subcommittee recommended that the board be authorized to adopt, at its discretion, rules and regulations providing for the licensing of certain other medical health professionals as doctors of traditional Chinese medicine or as doctors of acupuncture. (Appendix H.)

The board and the members of the subcommittee agreed that the licensing requirements of chapter 634A of NRS should be waived, under certain circumstances, in order to permit educational seminars in acupuncture to be conducted in Nevada. There was testimony suggesting that licensees are inhibited from holding seminars in this state because their students would not be able to practice the techniques of acupuncture. It is also believed that there are persons knowledgeable in acupuncture from throughout the world who are unable to obtain a license to practice acupuncture in Nevada because of its educational and experiential

requirements, but who might be competent and valuable lecturers on certain techniques of acupuncture. The subcommittee believed that the development of the practice of acupuncture in Nevada would be greatly enhanced if licensing requirements could be waived in these limited circumstances. (Appendix I.)

(c) Establishing a college or school of acupuncture

There was a considerable amount of testimony before the subcommittee concerning the need for colleges or schools of acupuncture in Nevada, and the criteria which might be developed for establishing such institutions. Some persons who appeared before the subcommittee are interested in immediately establishing a school of acupuncture if they can obtain approval from the board. The board has, understandably, taken a cautious approach to this problem. Apparently, the board has not yet devoted a substantial amount of study to this problem because of the priorities assigned to the licensing of practitioners. Some members of the subcommittee strongly believe that since the legislature is ultimately responsible for establishing the practice of traditional Chinese medicine in Nevada, the consent of the legislature should be required prior to the granting of state approval for educational institutions to teach acupuncture. The subcommittee decided to recommend that legislative consent should be obtained, in addition to approval of the board, and the approval of the state board of education, prior to establishing schools of acupuncture. (Appendix J.)

(d) Fees

A problem that deeply troubles the members of the subcommittee and the board is the high fees that are allegedly being charged by practitioners licensed by the board. Information available to the subcommittee indicates that in some cases acupuncturists are setting fees that substantially exceed those charged by other medical professions. It was generally understood that it is very difficult to determine what may be a reasonable fee for medical services. The subcommittee, however,

felt that the members of the legislature had been led to believe that acupuncture would be available at a cost that most Nevadans could afford. Apparently, this is not the present situation. The subcommittee generally concluded that it was probably impossible, both legally and as a practical matter, for the state to regulate the fees of medical practitioners. It was presumed that the fees would decrease as additional acupuncturists were licensed to practice in Nevada.

(e) Interaction between medical professions

It became apparent to the subcommittee during the course of its public hearings that there is a conspicuous and unfortunate lack of communications between persons involved in the development of the practice of Chinese medicine and other branches of the medical profession. This problem initially arose during the 1973 session of the legislature when legislation concerning acupuncture was first considered. The legislative committees considering provisions regulating the practice of acupuncture were not provided with adequate input from physicians concerning problems and benefits which could be anticipated if acupuncture was to be recognized as a branch of the healing arts in Nevada. During the first two public hearings of the subcommittee there was again no input from physicians although representatives of the physicians appeared at later hearings pursuant to special invitations from the subcommittee. (It is to be noted that the membership of the State Board of Chinese Medicine contains two physicians--William M. Edwards, M.D. and John L. Holmes, M.D.) The subcommittee strongly encourages the doctors of medicine and the doctors of traditional Chinese medicine to work together and exchange ideas to improve the medical health services available to the residents of our state.

The subcommittee learned that the Nevada State Medical Association has begun collecting information concerning acupuncture treatments from among its members. This information is to include cases brought to the attention of licensed medical doctors where the medical condition of patients has been improved by this form of treatment, and cases where there is no discernible medical improvement exhibited by patients. The subcommittee has expressed its appreciation for this effort by the medical association.

Testimony offered at one of the subcommittee hearings by the president of the Washoe Medical Society, Richard C. Inskip, M.D., indicated that physicians may be reluctant to refer patients to acupuncturists because of a concern that the referring physician may be liable in civil damages for medical malpractice on the part of the acupuncturist. The members of the subcommittee did not think that this problem should be of any greater significance for referrals to acupuncturists than it would be for referrals to any other licensed health professional. The subcommittee, however, did recommend legislation limiting the liability of physicians and acupuncturists when making interprofessional referrals. (Appendix K.)

(f) Insurance

The subcommittee has learned that malpractice insurance is not available to acupuncturists, licensed under chapter 634A of NRS, who are not also licensed practitioners in one of the traditional fields of western medicine. The subcommittee concluded that this problem is not amenable to a legislative solution. The subcommittee recommends, however, that the state insurance commissioner encourage insurance companies who offer medical malpractice insurance in Nevada to offer similar coverage to licensed acupuncturists.

Numerous persons appeared before the subcommittee who had suffered medical problems which were alleviated or eradicated by acupuncture treatment. Many of these persons had subsequently filed claims for reimbursement from their health insurance companies for these treatments. Much to their surprise and financial hardship, some of these persons learned that their insurers would pay for acupuncture treatment only if the practitioner was also licensed to practice traditional western medicine. The subcommittee believed that since acupuncturists are licensed in Nevada only after they have proven their competency, and since acupuncture offers proven medical benefits, all health insurance companies doing business in Nevada should be required to include benefits for treatment by licensed doctors of traditional Chinese medicine, or any branch thereof. (Appendix L.)

The subcommittee also recommended that a joint resolution be sent memorializing Congress to adopt legislation requiring federal medical insurance programs to reimburse recipients of benefits under these programs for treatment by licensed acupuncturists. (Appendix M.)

(g) Other problems

After receiving testimony from several eastern and western experts in traditional Chinese medicine, the subcommittee decided that the definition of acupuncture should be expanded. (Appendix N.) The subcommittee was particularly impressed with the testimony of Dr. Richard Yennie, a chiropractor from Kansas City, Missouri, and a lecturer on acupuncture. Dr. Yennie has been trained in the Japanese approach to acupuncture called Shiatsu. This technique employs digital pressure to achieve some of the same benefits gained with piercing needles. The subcommittee was also told that electrical or ultrasonic stimulation at the acupuncture points also achieves beneficial results.

The subcommittee learned that even though acupuncture was developed in China, it has been used in other Oriental countries for thousands of years. Further, the techniques of acupuncture have been expanded to include the use of nonpiercing pressure. For these reasons the subcommittee, with the encouragement of the board, is recommending that the denomination of the various meridian therapies be changed to "traditional Oriental medicine" instead of the current use of "traditional Chinese medicine." (Appendix O.)

The board has adopted a regulation providing that a practitioner may not employ or supervise more than one acupuncture assistant. Dr. Edwards, in representing the views of the board before the subcommittee, indicated that a practitioner could not adequately care for his patients if he had numerous acupuncture assistants delivering services. There is also considerable concern that too many assistants working for any one practitioner could turn that practitioner's clinic

into an "acupuncture mill" with quality care becoming a secondary consideration. The subcommittee decided to recommend that a single practitioner be limited to a maximum of three acupuncture assistants, with the board having the power to provide for a lesser number. (Appendix P.)

(h) Conclusion

The subcommittee believes that the practice of traditional Chinese medicine in Nevada is developing as rapidly and as successfully as the 1973 legislature might have expected. The practice of traditional Chinese medicine, though 5,000 years old, is relatively new in this country and, particularly, in the State of Nevada. The State Board of Chinese Medicine has successfully implemented the legislative program establishing traditional Chinese medicine as a respected field within the healing arts.

There are certain problem areas that merit legislative attention. Our recommendations are included in this report. (Appendix B.) It has been less than 1 year since the board licensed the first practitioners (November 19, 1973). The practice of traditional Chinese medicine has not yet had an opportunity to mature under the guidance of state regulation. Consequently, the subcommittee believes that the practice of traditional Chinese medicine should be monitored by a legislative subcommittee during the 1975-1977 interim period. We believe that traditional Chinese medicine has a significant and vital contribution to offer toward the health care of the residents of Nevada.

Respectfully submitted,

Senator Stanley J. Drakulich,  
Chairman

Senator Archie Pozzi, Jr.  
Senator William J. Raggio  
Assemblyman Eileen B. Brookman  
Assemblyman Daniel J. Demers  
Assemblyman Darrell H. Dreyer  
Assemblyman Roy L. Torvinen

#### **4. Chapter 634A of NRS**

### **CHAPTER 634A**

### **CHINESE MEDICINE**

#### **LEGISLATIVE DECLARATION; DEFINITIONS**

- 634A.010** Legislative declaration.
- 634A.020** Definitions.

#### **BOARD OF CHINESE MEDICINE**

- 634A.030** Board of Chinese medicine: Creation; appointment of members; oaths.
- 634A.040** Qualifications of members.
- 634A.050** Compensation, expenses of members.
- 634A.060** Officers of board.
- 634A.070** Powers of board.
- 634A.080** Duties of board.
- 634A.090** Approval of schools of Chinese medicine.
- 634A.100** Chinese medicine advisory committee: Creation; appointment, qualifications; compensation, terms of members; duties.

#### **LICENSES**

- 634A.110** Applications for licenses; fee.
- 634A.120** Examinations: Times; subjects covered.
- 634A.130** Waiver of examination; fee.
- 634A.140** Issuance of licenses to practice traditional Chinese medicine, acupuncture.
- 634A.150** Issuance of license for acupuncture assistant.
- 634A.160** Recordation and display of licenses; annual registration fee; penalties for failure to pay fee.
- 634A.170** Suspension, revocation or refusal of license: Grounds.
- 634A.180** Suspension, revocation or refusal of license: Notice and hearing.

#### **MISCELLANEOUS PROVISIONS**

- 634A.190** Licensees not subject to chapters 629, 630 of NRS.
- 634A.200** Applicability of chapter.
- 634A.210** Reporting vital statistics.

#### **UNLAWFUL ACTS; PENALTIES**

- 634A.220** Prescription of unapproved herbs prohibited.
- 634A.230** Practice without a license a gross misdemeanor.
- 634A.240** Injunctive relief.

## LEGISLATIVE DECLARATION; DEFINITIONS

**634A.010 Legislative declaration.** The practice of Chinese medicine and any branch thereof is hereby declared to be a learned profession, affecting public safety and welfare and charged with the public interest, and therefore subject to protection and regulation by the state.  
(Added to NRS by 1973, 635)

**634A.020 Definitions.** Unless the context otherwise requires, the words, phrases and derivatives thereof employed in this chapter have the meanings ascribed to them in this section.

1. "Acupuncture" means the insertion of needles into the human body by piercing the skin of the body, for the purpose of controlling and regulating the flow and balance of energy in the body.
2. "Board" means the state board of Chinese medicine.
3. "Doctor of acupuncture" means a person who has been licensed under the provisions of this chapter to practice the art of healing known as acupuncture.
4. "Doctor of herbal medicine" means a person who has been licensed under the provisions of this chapter to practice the art of healing known as herbal medicine.
5. "Doctor of traditional Chinese medicine" means a person who has been licensed under the provisions of this chapter to practice the art of healing through traditional Chinese medicine.
6. "Herbal medicine" and "practice of herbal medicine" mean suggesting, recommending, prescribing or directing the use of herbs for the cure, relief or palliation of any ailment or disease of the mind or body, or for the cure or relief of any wound, fracture, bodily injury or deformity.
7. "Herbs" means plants or parts of plants valued for medicinal qualities.
8. "Licensed acupuncture assistant" means a person who assists in the practice of acupuncture under the direct supervision of a person licensed under the provisions of this chapter to practice traditional Chinese medicine or acupuncture.
9. "Traditional Chinese medicine" means that system of the healing art which places the chief emphasis on the flow and balance of energy in the body mechanism as being the most important single factor in maintaining the well-being of the organism in health and disease and includes the practice of acupuncture and herbal medicine.  
(Added to NRS by 1973, 635)

## BOARD OF CHINESE MEDICINE

**634A.030 Board of Chinese medicine: Creation; appointment of members; oaths.**

1. The state board of Chinese medicine, consisting of five members appointed by the governor, is hereby created.

2. The governor shall appoint the members as soon as feasible after April 19, 1973. Their terms shall be as follows:

- (a) Two members shall hold office for 1 year;
- (b) Two members shall hold office for 2 years;
- (c) One member shall hold office for 3 years; and
- (d) Thereafter, all terms shall be for 3 years.

3. The governor shall appoint persons to fill vacancies for the remainder of an unexpired term.

4. Each member of the board shall, before entering upon the duties of his office, take the oath of office prescribed by the constitution before someone qualified to administer oaths.

(Added to NRS by 1973, 636)

**634A.040 Qualifications of members.** All members of the board shall be citizens of the United States and residents of the State of Nevada.  
(Added to NRS by 1973, 636)

**634A.050 Compensation, expenses of members.** Each member of the board shall receive:

1. A salary of not more than \$25 per day, as fixed by the board, while engaged in the business of the board.

2. Actual expenses for subsistence and lodging, not to exceed \$25 per day, and actual expenses for transportation, while traveling on business of the board.

(Added to NRS by 1973, 636)

**634A.060 Officers of board.** The board shall annually elect from its members a president, vice president and secretary-treasurer, and may fix and pay a salary to the secretary-treasurer.

(Added to NRS by 1973, 636)

**634A.070 Powers of board.** The board may:

1. Employ attorneys, investigators and other professional consultants and clerical personnel necessary to discharge its duties. For the purpose of conducting its examinations, the board may call to its aid persons of established reputation and known ability in Chinese medicine;

2. Maintain offices in as many localities in the state as it finds necessary to carry out the provisions of this chapter;

3. Promulgate rules and regulations, or either of them, not inconsistent with the provisions of this chapter; and

4. Compel the attendance of witnesses and the production of evidence by subpoena and the board may administer oaths.

(Added to NRS by 1973, 636)

**634A.080 Duties of board.** The board shall:

1. Hold meetings at least once a year and at any other time at the request of the president of the majority of the members;

2. Have and use a common seal;

3. Deposit in interest-bearing accounts in the State of Nevada all

moneys received under the provisions of this chapter, which shall be used to defray the expenses of the board;

4. Operate on the basis of the fiscal year beginning July 1, and ending June 30; and

5. Keep a record of its proceedings which shall be open to the public at all times and which shall also contain the name and business address of every registered licensee in this state.

(Added to NRS by 1973, 636)

**634A.090 Approval of schools of Chinese medicine.**

1. A school or college of Chinese medicine may be established and maintained in this state only if:

(a) Its establishment is approved by the board.

(b) Its curriculum is approved annually by the board for content and quality of instruction in accordance with the requirements of this chapter.

2. The board may prescribe the courses of study required for the respective degrees of doctor of acupuncture, doctor of herbal medicine and doctor of traditional Chinese medicine.

(Added to NRS by 1973, 635)

**634A.100 Chinese medicine advisory committee: Creation; appointment, qualifications; compensation, terms of members; duties.**

1. The Chinese medicine advisory committee, consisting of 5 members appointed by the governor, is hereby created.

2. The governor shall appoint the members of the advisory committee as soon as feasible after April 19, 1973. Their terms shall be as follows:

(a) Two members shall hold office for 1 year;

(b) Two members shall hold office for 2 years;

(c) Two members shall hold office for 3 years; and

(d) Thereafter, all terms shall be for 3 years.

3. Members of the advisory committee shall be selected with special reference to their ability and fitness to advise with respect to the duties assigned by this chapter to the board.

4. The advisory committee shall advise the board regarding licensing, curriculum of a school or college of Chinese medicine established pursuant to NRS 634A.090, or any other duties of the board created by this chapter.

5. The advisory committee may receive, if authorized by the board, the same salary, subsistence, and travel expense provided by NRS 634A.050.

(Added to NRS by 1973, 637)

**LICENSES**

**634A.110 Applications for licenses; fee.** An applicant for examination for a license to practice traditional Chinese medicine or any branch thereof, shall:

1. Submit an application to the board on forms provided by the board;

2. Submit satisfactory evidence that he is 21 years or older and meets the appropriate educational requirements; and
  3. Pay a fee of \$100.
- (Added to NRS by 1973, 637)

**634A.120 Examinations: Times; subjects covered.**

1. Examinations shall be given at least twice a year at a time and place fixed by the board.
  2. Applicants for licenses to practice acupuncture, herbal medicine and traditional Chinese medicine and to practice as an acupuncture assistant shall be examined in the respectively appropriate subjects as determined by the board.
- (Added to NRS by 1973, 637)

**634A.130 Waiver of examination; fee.** The board may waive examination and grant a certificate of doctor of traditional Chinese medicine to any applicant who:

1. Has applied in writing to the board not later than 120 days after April 19, 1973;
  2. Obtained a certificate from the Republic of China, the People's Republic of China, Korea or Japan acknowledging that the applicant was qualified to practice Chinese medicine;
  3. Has practiced traditional Chinese medicine for at least 20 years immediately prior to April 19, 1973; and
  4. Submits with his application a filing fee of \$100.
- (Added to NRS by 1973, 637)

**634A.140 Issuance of licenses to practice traditional Chinese medicine, acupuncture.** The board shall issue a license for the practice of traditional Chinese medicine or a license for the practice of acupuncture where the applicant:

1. Has a license or certificate from the government of the Republic of China, People's Republic of China, Korea or Japan which acknowledges that the applicant has the qualifications to practice Chinese medicine or acupuncture, or has successfully completed a course of study of 48 months in Chinese medicine or 36 months in acupuncture at a college in Hong Kong;
  2. Has practiced traditional Chinese medicine or acupuncture for 10 years; and
  3. Passes the examination of the board.
- (Added to NRS by 1973, 637)

**634A.150 Issuance of license for acupuncture assistant.** An applicant for a license for acupuncture assistant shall be issued a license by the board if he:

1. Has successfully completed a course of study in acupuncture in any college or school in any country, territory, province or state requiring an attendance of 36 months;

2. Practiced acupuncture for not less than 3 years; and
  3. Passes the examination of the board for acupuncture assistant.
- (Added to NRS by 1973, 638)

**634A.160 Recordation and display of licenses; annual registration fee; penalties for failure to pay fee.**

1. Every person holding a license authorizing him to practice traditional Chinese medicine, acupuncture, herbal medicine or to serve as an acupuncture assistant in this state shall record his license in the office of the county clerk of the county of his office and residence. Every licensee upon a change of residence or office shall have his certificate recorded in like manner in the county to which he has changed.
  2. Every license shall be displayed in the office, place of business or place of employment of the holder thereof.
  3. Every person holding a license who is a resident of the state shall pay an annual registration fee of \$20 to the secretary-treasurer of the board on or before February 1. If the holder of a license fails to pay the registration fee his license shall be suspended. The license may be reinstated by payment of the required fee within 90 days after February 1.
  4. A license which is suspended for more than 3 months under the provisions of subsection 3 may be canceled by the board after 30 days' notice to the holder of the license.
  5. Every person holding a license who is not a resident of the state shall pay an annual registration fee of \$5 to the secretary-treasurer of the board on or before February 1.
- (Added to NRS by 1973, 638)

**634A.170 Suspension, revocation or refusal of license: Grounds.**

The board may either refuse to issue or may suspend or revoke any license for any one or any combination of the following causes:

1. Conviction of a felony, conviction of any offense involving moral turpitude or conviction of a violation of any state or federal law regulating the possession, distribution or use of any controlled substance as defined in chapter 453 of NRS, as shown by a certified copy of record of the court;
2. The obtaining of or any attempt to obtain a license or practice in the profession for money or any other thing of value, by fraudulent misrepresentations;
3. Gross malpractice;
4. Advertising by means of knowingly false or deceptive statement;
5. Advertising, practicing or attempting to practice under a name other than one's own;
6. Habitual drunkenness or habitual addiction to the use of a controlled substance as defined in chapter 453 of NRS;
7. Using any false, fraudulent or forged statement or document, or engaging in any fraudulent, deceitful, dishonest or immoral practice in connection with the licensing requirements of this chapter;
8. Sustaining a physical or mental disability which renders further practice dangerous;

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9. Engaging in any dishonorable, unethical or unprofessional conduct which may deceive, defraud or harm the public, or which is unbecoming a person licensed to practice under this chapter;

10. Using any false or fraudulent statement in connection with the practice of traditional Chinese medicine or any branch thereof;

11. Violating or attempting to violate, or assisting or abetting the violation of, or conspiring to violate any provision of this chapter;

12. Being adjudicated incompetent or insane;

13. Advertising in an unethical or unprofessional manner;

14. Obtaining a fee or financial benefit for any person by the use of fraudulent diagnosis, therapy or treatment;

15. Willful disclosure of a privileged communication;

16. Failure of a licensee to designate his school of practice in the professional use of his name by the term traditional Chinese doctor, doctor of acupuncture, doctor of herbal medicine or acupuncture assistant, as the case may be;

17. Willful violation of the law relating to the health, safety or welfare of the public or of the rules and regulations promulgated by the state board of health; and

18. Administering, dispensing or prescribing any controlled substance as defined in chapter 453 of NRS, except for the prevention, alleviation or cure of disease or for relief from suffering.

(Added to NRS by 1973, 638)

**634A.180 Suspension, revocation or refusal of license: Notice and hearing.** The board shall not refuse to issue, refuse to renew, suspend or revoke any license for any of the causes enumerated in NRS 634A.170, unless the person accused has been given at least 20 days' notice in writing of the charge against him and a hearing by the board.

(Added to NRS by 1973, 639)

#### MISCELLANEOUS PROVISIONS

**634A.190 Licensees not subject to chapters 629, 630 of NRS.** Persons licensed pursuant to this chapter are not subject to the provisions of chapters 629 and 630 of NRS.

(Added to NRS by 1973, 637)

**634A.200 Applicability of chapter.**

1. This chapter does not apply to Chinese physicians who are called into this state for consultation.

2. This chapter does not prohibit:

(a) Gratuitous services of druggists or other persons in cases of emergency;

(b) The domestic administration of family remedies;

(c) Any person from assisting any person in the practice of the healing arts licensed under this chapter, except that such person may not insert needles into the skin or prescribe herbal medicine.

(Added to NRS by 1973, 639)

**634A.210 Reporting vital statistics.** Traditional Chinese doctors and doctors of acupuncture shall observe and be subject to all state and municipal regulations relative to reporting all births and deaths in all matters pertaining to the public health.  
(Added to NRS by 1973, 639)

#### UNLAWFUL ACTS; PENALTIES

**634A.220 Prescription of unapproved herbs prohibited.** It is unlawful for any person licensed under the provisions of this chapter to prescribe herbal medication unless the herbs prescribed have been approved by the Food and Drug Administration for use for the prevention or alleviation or cure of illness or disease or for relief from suffering.  
(Added to NRS by 1973, 638)

**634A.230 Practice without a license a gross misdemeanor.** A person who represents himself as a practitioner of traditional Chinese medicine, or any branch thereof, and who engages in the practice of traditional Chinese medicine, or any branch thereof, in this state without holding a valid license issued by the board is guilty of a gross misdemeanor.  
(Added to NRS by 1973, 640)

**634A.240 Injunctive relief.**

1. The board may maintain in any court of competent jurisdiction a suit for an injunction against any person or persons practicing Chinese medicine or any branch thereof without a license.

2. Such an injunction:

(a) May be issued without proof of actual damage sustained by any person, this provision being understood to be a preventive as well as a punitive measure.

(b) Shall not relieve such person from criminal prosecution for practicing without a license.

(Added to NRS by 1973, 640)

5. Subcommittee Legislative Recommendations

1. Create the position of executive secretary of the State Board of Chinese Medicine to be initially funded by an appropriation from the general fund.
2. Permit the State Board of Chinese Medicine to abolish the Chinese Medicine Advisory Committee when the board feels the committee is no longer necessary.
3. Clarify the jurisdiction of the State Board of Chinese Medicine by providing that the board may adopt a code of ethics for its licensees, the board may inspect professional facilities of licensees, the board may require necessary reports of their licensees, and that the board may charge an applicant for expenses incurred by the board in processing an application and in administering the examination.
4. Increase the annual license fees.
5. After June 30, 1977, all examinations administered by the board will be in the English language.
6. Authorize the State Board of Chinese Medicine to adopt rules and regulations providing licensing criteria enabling licensed practitioners in western medicine to obtain licenses to practice acupuncture.
7. Permit the State Board of Chinese Medicine to waive licensing requirements for educational seminars.
8. Broaden the definition of acupuncture as used in chapter 634A of NRS to include non-piercing forms of treatment.
9. Change the denomination of traditional Chinese medicine to "traditional Oriental medicine."
10. Limit the number of acupuncture assistants a practitioner may supervise or employ.

11. Require legislative approval prior to establishing schools or colleges of Chinese medicine.
12. Provide immunity from tort liability for certain inter-professional referrals of patients.
13. Require health insurance policies issued in Nevada to include coverage for the services of persons licensed pursuant to the provisions of chapter 634A of NRS.
14. Memorialize Congress to adopt legislation requiring federal medical insurance programs to recognize treatment by licensed acupuncturists as a legitimate form of medical treatment.

SUMMARY--Permits state board of Chinese medicine to employ executive secretary and provides appropriation from general fund. Fiscal Note: Yes. (BDR 54-195)

AN ACT relating to Chinese medicine; permitting board of Chinese medicine to employ executive secretary; appropriating moneys from the general fund; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.070 is hereby amended to read as follows:

634A.070 The board may:

1. Employ attorneys, investigators and other professional consultants and clerical personnel necessary to discharge its duties. For the purpose of conducting its examinations, the board may call to its aid persons of established reputation and known ability in Chinese medicine;

2. Maintain offices in as many localities in the state as it finds necessary to carry out the provisions of this chapter;

3. Promulgate rules and regulations, or either of them, not inconsistent with the provisions of this chapter; [and]

4. Compel the attendance of witnesses and the production of evidence by subpoena and the board may administer oaths [.] ; and

5. Appoint and employ an executive secretary who need not be a member of the board. The executive secretary shall perform

such duties as the board may direct and shall receive compensation as set by the board. The executive secretary shall be reimbursed for the actual and necessary expenses incurred in the performance of his duties.

Sec. 2. There is hereby appropriated from the general fund in the state treasury the sum of \$39,531 to the state board of Chinese medicine for the biennium ending June 30, 1977.

SUMMARY--Permits state board of Chinese medicine to abolish Chinese medicine advisory committee. Fiscal Note: No. (BDR 54-193)

AN ACT relating to traditional Chinese medicine; permitting the state board of Chinese medicine to abolish the Chinese medicine advisory committee; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.100 is hereby amended to read as follows:

634A.100 1. The Chinese medicine advisory committee, consisting of [5] five members appointed by the governor, is hereby created.

2. The governor shall appoint the members of the advisory committee as soon as feasible after April 19, 1973. Their terms shall be as follows:

- (a) Two members shall hold office for 1 year;
- (b) Two members shall hold office for 2 years;
- (c) Two members shall hold office for 3 years; and
- (d) Thereafter, all terms shall be for 3 years.

3. Members of the advisory committee shall be selected with special reference to their ability and fitness to advise with respect to the duties assigned by this chapter to the board.

4. The advisory committee shall advise the board regarding licensing, curriculum of a school or college of Chinese medicine established pursuant to NRS 634A.090, or any other duties of the board created by this chapter.

5. The advisory committee may receive, if authorized by the board, the same salary, subsistence, and travel expense provided by NRS 634A.050.

6. The board may abolish the advisory committee when the board determines that the advice and counsel of the advisory committee are no longer necessary for the board to adequately perform its duties pursuant to the terms of this chapter.

SUMMARY--Clarifies jurisdiction of state board of Chinese medicine.  
Fiscal Note: No. (BDR 54-194)

AN ACT relating to Chinese medicine; providing that the state board of Chinese medicine may adopt a code of ethics for its licensees; providing that the board may adopt regulations concerning the payment of fees; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.070 is hereby amended to read as follows:

634A.070 The board may:

1. Employ attorneys, investigators and other professional consultants and clerical personnel necessary to discharge its duties. For the purpose of conducting its examinations, the board may call to its aid persons of established reputation and known ability in Chinese medicine;

2. Maintain offices in as many localities in the state as it finds necessary to carry out the provisions of this chapter;

3. Promulgate rules and regulations, or either of them, not inconsistent with the provisions of this chapter . [; and] Such rules and regulations may include a code of ethics regulating the professional conduct of licensees; and

4. Compel the attendance of witnesses and the production of evidence by subpoena and the board may administer oaths.

Sec. 2. NRS 634A.110 is hereby amended to read as follows:

634A.110 An applicant for examination for a license to practice traditional Chinese medicine or any branch thereof, shall:

1. Submit an application to the board on forms provided by the board;
2. Submit satisfactory evidence that he is 21 years or older and meets the appropriate educational requirements; [and]
3. Pay a fee of \$100 [.] ; and
4. Comply with such other rules and regulations relating to fees as may be adopted by the board.

SUMMARY--Increases annual license fees for practitioners of traditional Chinese medicine. Fiscal Note: Yes. (BDR 54-189)

AN ACT relating to traditional Chinese medicine; increasing the annual license fees for practitioners of traditional Chinese medicine; and requiring equal license fees for resident and nonresident practitioners of traditional Chinese medicine.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.160 is hereby amended to read as follows:

634A.160 1. Every person holding a license authorizing him to practice traditional Chinese medicine, acupuncture, herbal medicine or to serve as an acupuncture assistant in this state shall record his license in the office of the county clerk of the county of his office and residence. Every licensee upon a change of residence or office shall have his certificate recorded in like manner in the county to which he has changed.

2. Every license shall be displayed in the office, place of business or place of employment of the holder thereof.

3. Every person holding a license [who is a resident of the state shall pay an annual registration fee of \$20] shall pay to the secretary-treasurer of the board on or before February 1 [.] of each year, the annual registration fee required pursuant to

subsection 5. If the holder of a license fails to pay the registration fee his license shall be suspended. The license may be reinstated by payment of the required fee within 90 days after February 1.

4. A license which is suspended for more than 3 months under the provisions of subsection 3 may be canceled by the board after 30 days' notice to the holder of the license.

5. [Every person holding a license who is not a resident of the state shall pay an annual registration fee of \$5 to the secretary-treasurer of the board on or before February 1.] The annual registration fees shall be in the following amounts:

- (a) Doctor of traditional Chinese medicine.....\$500
- (b) Doctor of acupuncture..... 500
- (c) Doctor of herbal medicine..... 300
- (d) Licensed acupuncture assistant..... 250

SUMMARY--Requires that examinations for licenses to practice traditional Chinese medicine be in English language. Fiscal Note: No. (BDR 54-197)

AN ACT relating to Chinese medicine; requiring that after June 30, 1977, all examinations for licenses to practice traditional Chinese medicine or any of the branches thereof shall be administered in the English language; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.120 is hereby amended to read as follows:

634A.120 1. Examinations shall be given at least twice a year at a time and place fixed by the board.

2. Applicants for licenses to practice acupuncture, herbal medicine and traditional Chinese medicine and to practice as an acupuncture assistant shall be examined in the respectively appropriate subjects as determined by the board.

3. After June 30, 1977, all examinations administered by the board shall be in the English language.



SUMMARY--Authorizes state board of Chinese medicine to adopt rules and regulations providing licensing criteria enabling licensed practitioners in western medicine to obtain licenses to practice traditional Chinese medicine. Fiscal Note: No. (BDR 54-187)

AN ACT relating to traditional Chinese medicine; enabling the state board of Chinese medicine to adopt rules and regulations for licensing practitioners of certain western healing arts as doctors of traditional Chinese medicine; or doctors of acupuncture; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 634A of NRS is hereby amended by adding thereto a new section which shall read as follows:

1. The board may adopt rules and regulations providing standards by which persons licensed in Nevada to engage in the practice of medicine, osteopathy, chiropractic, podiatry or dentistry, or any one of them, may obtain a license pursuant to the provisions of this chapter as doctors of traditional Chinese medicine or as doctors of acupuncture.

2. The standards adopted pursuant to subsection 1 shall establish educational and experiential requirements deemed adequate by the board to protect the public health and welfare. Such standards shall take into consideration the applicant's past medical education and experience.

3. Any applicant applying for a license pursuant to the provisions of this section shall be required to successfully complete the same written examination that is required of those applicants applying pursuant to NRS 634A.140.

Sec. 2. NRS 634A.140 is hereby amended to read as follows:

634A.140 [The] Except as provided in section 1 of this act, the board shall issue a license for the practice of traditional Chinese medicine or a license for the practice of acupuncture where the applicant:

1. Has a license or certificate from the government of the Republic of China, People's Republic of China, Korea or Japan which acknowledges that the applicant has the qualifications to practice Chinese medicine or acupuncture, or has successfully completed a course of study of 48 months in Chinese medicine or 36 months in acupuncture at a college in Hong Kong;
2. Has practiced traditional Chinese medicine or acupuncture for 10 years; and
3. Passes the examination of the board.

SUMMARY--Permits waiver of licensing requirements by state board of Chinese medicine for educational seminars. Fiscal Note: No. (BDR 54-190)

AN ACT relating to traditional Chinese medicine; permitting state board of Chinese medicine to waive certain licensing requirements under limited circumstances pertaining to educational seminars; permitting state board of Chinese medicine to adopt rules and regulations providing for such waivers; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 634A of NRS is hereby amended by adding thereto a new section which shall read as follows:

1. The board may adopt rules and regulations which waive the licensing requirements of this chapter for persons conducting or attending educational seminars in this state. The provisions of this section shall apply when:

(a) The person conducting the seminar is licensed as a doctor of traditional Chinese medicine or as a doctor of acupuncture and he applies to the board for a certificate permitting his students to employ the techniques of traditional Chinese medicine while such students are at the seminar and while they are under the direct and immediate supervision of the person issued such certificate; or

(b) The person conducting the seminar is not licensed as a doctor of traditional Chinese medicine or as a doctor of acupuncture, and he desires a certificate permitting him, and no other unlicensed person, to employ the techniques of traditional Chinese medicine, for demonstration purposes, while he is immediately involved in conducting the seminar.

2. The board will issue a certificate waiving the licensing provisions of this chapter only if it is satisfied that the seminar is being conducted for educational purposes and that the public health and welfare will be adequately protected. The board may place such restrictions upon the issuance or use of the certificate as it deems necessary.

3. The board may charge a reasonable fee for any certificate issued pursuant to this section. The fee shall adequately reimburse the board for costs incurred in investigating the applicant and, if the board deems such action necessary, for monitoring the seminar.

SUMMARY--Increases prerequisites for establishing schools or colleges of traditional Chinese medicine. Fiscal Note: No. (BDR 54-188)

AN ACT relating to traditional Chinese medicine; requiring legislative approval and approval of state board of education prior to establishing schools or colleges of traditional Chinese medicine; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.090 is hereby amended to read as follows:

634A.090 1. A school or college of traditional Chinese medicine may be established and maintained in this state only if:

(a) Its establishment is approved by : [the board.]

(1) The board;

(2) The state board of education; and

(3) A concurrent resolution of the legislature; and

(b) Its curriculum is approved annually by the board for content and quality of instruction in accordance with the requirements of this chapter.

2. The board may prescribe the courses of study required for the respective degrees of doctor of acupuncture, doctor of herbal medicine and doctor of traditional Chinese medicine.

Sec. 2. NRS 634A.100 is hereby amended to read as follows:

634A.100 1. The Chinese medicine advisory committee, consisting of 5 members appointed by the governor, is hereby created.

2. The governor shall appoint the members of the advisory committee as soon as feasible after April 19, 1973. Their terms shall be as follows:

- (a) Two members shall hold office for 1 year;
- (b) Two members shall hold office for 2 years;
- (c) Two members shall hold office for 3 years; and
- (d) Thereafter, all terms shall be for 3 years.

3. Members of the advisory committee shall be selected with special reference to their ability and fitness to advise with respect to the duties assigned by this chapter to the board.

4. The advisory committee shall advise the board regarding licensing, curriculum of a school or college of traditional Chinese medicine established pursuant to NRS 634A.090, or any other duties of the board created by this chapter.

5. The advisory committee may receive, if authorized by the board, the same salary, subsistence, and travel expense provided by NRS 634A.050.

SUMMARY--Provides immunity from tort liability to certain medical practitioners. Fiscal Note: No. (BDR 3-198)

AN ACT relating to tort liability; providing immunity from tort liability to practitioners of traditional Chinese medicine when referring patients to practitioners in certain fields of western medicine; providing immunity from tort liability to practitioners in certain fields of western medicine when referring patients to doctors of traditional Chinese medicine or any branch thereof; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 41 of NRS is hereby amended by adding thereto a new section which shall read as follows:

1. Any physician, osteopath, chiropractor, podiatrist or dentist licensed in this state who in good faith refers a patient to a doctor of traditional Chinese medicine or any branch thereof, licensed pursuant to the provisions of chapter 634A of NRS, shall not be liable for any civil damages as a result of any act or omission of such doctor of traditional Chinese medicine or any branch thereof.

2. Any doctor of traditional Chinese medicine or any branch thereof, licensed pursuant to the provisions of chapter 634A of NRS, who in good faith refers a patient to a physician, osteopath, chiropractor, podiatrist or dentist licensed in this state

shall not be liable for any civil damages as a result of any act  
or omission of such physician, osteopath, chiropractor, podiatrist  
or dentist.

SUMMARY--Requires health insurance policies to include coverage for services by practitioners of traditional Chinese medicine. Fiscal Note: No. (BDR 57-200)

AN ACT relating to Chinese medicine; requiring health insurance policies to include coverage for services by persons licensed in Nevada to practice traditional Chinese medicine or a branch thereof; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 689A.380 is hereby amended to read as follows:

689A.380 As used in any policy of health insurance delivered, issued for delivery or used in this state, unless otherwise provided in the policy or in an endorsement thereon or in a rider attached thereto:

1. "Accidental death" means death by accident exclusively and independently of all other causes.
2. "Confinement to house" or "house confinement" includes the activities of a convalescent not able to be gainfully employed.
3. "Medical or surgical services" includes also services within the scope of his license rendered by any individual while duly licensed by the State of Nevada under any of the following chapters of NRS: 631 (dentistry); 633 (osteopathy); 634 (chiropractic); 634A (Chinese medicine); 635 (podiatry); or 636 (optometry). No policy of health insurance shall exclude coverage for services of any licensee provided for in this subsection.

4. "Total disability" means inability to perform the duties of any gainful occupation for which the insured is reasonably fitted by training, experience and accomplishment.

SUMMARY--Memorializes Congress to adopt legislation requiring federal medical insurance programs to recognize treatment by licensed acupuncturists as legitimate form of medical treatment. (BDR 199)

ASSEMBLY JOINT RESOLUTION--Memorializing Congress to adopt legislation requiring federal medical insurance programs to recognize treatments by licensed acupuncturists as a legitimate form of medical treatment and provide reimbursement therefor.

WHEREAS, The 1973 session of the Nevada legislature adopted legislation recognizing the practice of traditional Chinese medicine, which includes acupuncture, as a learned profession, beneficial to the health and welfare of the residents of Nevada; and

WHEREAS, This legislation provides for a state board to license only those applicants who meet stringent educational and experiential criteria sufficient to satisfy the board of the applicant's competence to practice traditional Chinese medicine in such a manner that the public safety and welfare will be adequately protected; and

WHEREAS, Federal insurance programs including but not limited to Medicare, Medicaid and Veterans' Administration Insurance programs, have refused to recognize traditional Chinese medicine as a legitimate branch of the healing arts, thereby denying reimbursement for acupuncture treatments unless such treatment was performed by a practitioner licensed in traditional western medicine; and

WHEREAS, The policies of the federal agencies which administer these programs against reimbursing deserving recipients of benefits under such programs for treatment by acupuncturists are unreasonable in view of our regulatory provisions and unfair to the residents of our state; now, therefore, be it

RESOLVED BY THE ASSEMBLY AND THE SENATE OF THE STATE OF NEVADA, JOINTLY, That the legislature of the State of Nevada hereby respectfully memorializes the Congress of the United States to adopt legislation requiring federal insurance programs to reimburse qualified recipients of benefits under these programs for treatment by acupuncturists; and be it further

RESOLVED, That copies of this resolution be prepared and transmitted by the legislative counsel to the Vice President of the United States as presiding officer of the Senate, to the Speaker of the House of Representatives and to each member of the Nevada congressional delegation.

SUMMARY--Broadens definition of acupuncture. Fiscal Note: No.  
(BDR 54-191)

AN ACT relating to traditional Chinese medicine; broadening the definition of acupuncture.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.020 is hereby amended to read as follows:

634A.020 Unless the context otherwise requires, the words, phrases and derivatives thereof employed in this chapter have the meanings ascribed to them in this section.

1. "Acupuncture" means : [the]

(a) The insertion of needles into the human body by piercing the skin of the body [,] ; and

(b) The use of nonpiercing needles, digital pressure, electronic probes, ultrasonic probes or any similar procedures or devices used on or near the skin of the body,

*flush* for the purpose of controlling and regulating the flow and balance of energy in the body.

2. "Board" means the state board of Chinese medicine.

3. "Doctor of acupuncture" means a person who has been licensed under the provisions of this chapter to practice the art of healing known as acupuncture.

4. "Doctor of herbal medicine" means a person who has been licensed under the provisions of this chapter to practice the art of healing known as herbal medicine.

5. "Doctor of traditional Chinese medicine" means a person who has been licensed under the provisions of this chapter to practice the art of healing through traditional Chinese medicine.

6. "Herbal medicine" and "practice of herbal medicine" mean suggesting, recommending, prescribing or directing the use of herbs for the cure, relief or palliation of any ailment or disease of the mind or body, or for the cure or relief of any wound, fracture, bodily injury or deformity.

7. "Herbs" means plants or parts of plants valued for medicinal qualities.

8. "Licensed acupuncture assistant" means a person who assists in the practice of acupuncture under the direct supervision of a person licensed under the provisions of this chapter to practice traditional Chinese medicine or acupuncture.

9. "Traditional Chinese medicine" means that system of the healing art which places the chief emphasis on the flow and balance of energy in the body mechanism as being the most important single factor in maintaining the well-being of the organism in health and disease and includes the practice of acupuncture and herbal medicine.

SUMMARY--Changes denomination of traditional Chinese medicine to traditional Oriental medicine. Fiscal Note: No. (BDR 54-192)

AN ACT relating to Chinese medicine; changing the designation of traditional Chinese medicine to traditional Oriental medicine; and providing other matters properly relating thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 634A.010 is hereby amended to read as follows:

634A.010 The practice of [Chinese] traditional Oriental medicine and any branch thereof is hereby declared to be a learned profession, affecting public safety and welfare and charged with the public interest, and therefore subject to protection and regulation by the state.

Sec. 2. NRS 634A.020 is hereby amended to read as follows:

634A.020 Unless the context otherwise requires, the words, phrases and derivatives thereof employed in this chapter have the meanings ascribed to them in this section.

1. "Acupuncture" means the insertion of needles into the human body by piercing the skin of the body, for the purpose of controlling and regulating the flow and balance of energy in the body.

2. "Board" means the state board of [Chinese] Oriental medicine.

3. "Doctor of acupuncture" means a person who has been licensed under the provisions of this chapter to practice the art of healing known as acupuncture.

4. "Doctor of herbal medicine" means a person who has been licensed under the provisions of this chapter to practice the art of healing known as herbal medicine.

5. "Doctor of traditional [Chinese] Oriental medicine" means a person who has been licensed under the provisions of this chapter to practice the art of healing through traditional [Chinese] Oriental medicine.

6. "Herbal medicine" and "practice of herbal medicine" mean suggesting, recommending, prescribing or directing the use of herbs for the cure, relief or palliation of any ailment or disease of the mind or body, or for the cure or relief of any wound, fracture, bodily injury or deformity.

7. "Herbs" means plants or parts of plants valued for medicinal qualities.

8. "Licensed acupuncture assistant" means a person who assists in the practice of acupuncture under the direct supervision of a person licensed under the provisions of this chapter to practice traditional [Chinese] Oriental medicine or acupuncture.

9. "Traditional [Chinese] Oriental medicine" means that system of the healing art which places the chief emphasis on the flow and balance of energy in the body mechanism as being the most important single factor in maintaining the well-being of the organism in health and disease and includes the practice of acupuncture and herbal medicine.

Sec. 3. NRS 634A.030 is hereby amended to read as follows:

634A.030 1. The state board of [Chinese] Oriental medicine, consisting of five members appointed by the governor, is hereby created.

2. The governor shall appoint the members as soon as feasible after April 19, 1973. Their terms shall be as follows:

- (a) Two members shall hold office for 1 year;
- (b) Two members shall hold office for 2 years;
- (c) One member shall hold office for 3 years; and
- (d) Thereafter, all terms shall be for 3 years.

3. The governor shall appoint persons to fill vacancies for the remainder of an unexpired term.

4. Each member of the board shall, before entering upon the duties of his office, take the oath of office prescribed by the constitution before someone qualified to administer oaths.

Sec. 4. NRS 634A.070 is hereby amended to read as follows:

634A.070 The board may:

1. Employ attorneys, investigators and other professional consultants and clerical personnel necessary to discharge its duties.

For the purpose of conducting its examinations, the board may call to its aid persons of established reputation and known ability in [Chinese] traditional Oriental medicine;

2. Maintain offices in as many localities in the state as it finds necessary to carry out the provisions of this chapter;

3. Promulgate rules and regulations, or either of them, not inconsistent with the provisions of this chapter; and

4. Compel the attendance of witnesses and the production of evidence by subpena and the board may administer oaths.

Sec. 5. NRS 634A.090 is hereby amended to read as follows:

634A.090 1. A school or college of [Chinese] traditional Oriental medicine may be established and maintained in this state only if:

(a) Its establishment is approved by the board.

(b) Its curriculum is approved annually by the board for content and quality of instruction in accordance with the requirements of this chapter.

2. The board may prescribe the courses of study required for the respective degrees of doctor of acupuncture, doctor of herbal medicine and doctor of traditional [Chinese] Oriental medicine.

Sec. 6. NRS 634A.100 is hereby amended to read as follows:

634A.100 1. The [Chinese] Oriental medicine advisory committee, consisting of [5] five members appointed by the governor, is hereby created.

2. The governor shall appoint the members of the advisory committee as soon as feasible after April 19, 1973. Their terms shall be as follows:

- (a) Two members shall hold office for 1 year;
- (b) Two members shall hold office for 2 years;
- (c) Two members shall hold office for 3 years; and
- (d) Thereafter, all terms shall be for 3 years.

3. Members of the advisory committee shall be selected with special reference to their ability and fitness to advise with respect to the duties assigned by this chapter to the board.

4. The advisory committee shall advise the board regarding licensing, curriculum of a school or college of [Chinese] traditional Oriental medicine established pursuant to NRS 634A.-090, or any other duties of the board created by this chapter.

5. The advisory committee may receive, if authorized by the board, the same salary, subsistence, and travel expense provided by NRS 634A.050.

Sec. 7. NRS 634A.110 is hereby amended to read as follows:

634A.110 An applicant for examination for a license to practice traditional [Chinese] Oriental medicine or any branch thereof, shall:

- 1. Submit an application to the board on forms provided by the board;

2. Submit satisfactory evidence that he is 21 years or older and meets the appropriate educational requirements; and

3. Pay a fee of \$100.

Sec. 8. NRS 634A.120 is hereby amended to read as follows:

634A.120 1. Examinations shall be given at least twice a year at a time and place fixed by the board.

2. Applicants for licenses to practice acupuncture, herbal medicine and traditional [Chinese] Oriental medicine and to practice as an acupuncture assistant shall be examined in the respectively appropriate subjects as determined by the board.

Sec. 9. NRS 634A.130 is hereby amended to read as follows:

634A.130 The board may waive examination and grant a certificate of doctor of traditional [Chinese] Oriental medicine to any applicant who:

1. Has applied in writing to the board not later than 120 days after April 19, 1973;

2. Obtained a certificate from the Republic of China, the People's Republic of China, Korea or Japan acknowledging that the applicant was qualified to practice [Chinese] traditional Oriental medicine;

3. Has practiced traditional [Chinese] Oriental medicine for at least 20 years immediately prior to April 19, 1973; and

4. Submits with his application a filing fee of \$100.

Sec. 10. NRS 634A.140 is hereby amended to read as follows:

634A.140 The board shall issue a license for the practice of traditional [Chinese] Oriental medicine or a license for the practice of acupuncture where the applicant:

1. Has a license or certificate from the government of the Republic of China, People's Republic of China, Korea or Japan which acknowledges that the applicant has the qualifications to practice [Chinese] traditional Oriental medicine or acupuncture, or has successfully completed a course of study of 48 months in [Chinese] traditional Oriental medicine or 36 months in acupuncture at a college in Hong Kong;

2. Has practiced traditional [Chinese] Oriental medicine or acupuncture for 10 years; and

3. Passes the examination of the board.

Sec. 11. NRS 634A.160 is hereby amended to read as follows:

634A.160 1. Every person holding a license authorizing him to practice traditional [Chinese] Oriental medicine, acupuncture, herbal medicine or to serve as an acupuncture assistant in this state shall record his license in the office of the county clerk of the county of his office and residence. Every licensee upon a change of residence or office shall have his certificate recorded in like manner in the county to which he has changed.

2. Every license shall be displayed in the office, place of business or place of employment of the holder thereof.

3. Every person holding a license who is a resident of the state shall pay an annual registration fee of \$20 to the secretary-treasurer of the board on or before February 1. If the holder of a license fails to pay the registration fee his license shall be suspended. The license may be reinstated by payment of the required fee within 90 days after February 1.

4. A license which is suspended for more than 3 months under the provisions of subsection 3 may be canceled by the board after 30 days' notice to the holder of the license.

5. Every person holding a license who is not a resident of the state shall pay an annual registration fee of \$5 to the secretary-treasurer of the board on or before February 1.

Sec. 12. NRS 634A.170 is hereby amended to read as follows:

634A.170 The board may either refuse to issue or may suspend or revoke any license for any one or any combination of the following causes:

1. Conviction of a felony, conviction of any offense involving moral turpitude or conviction of a violation of any state or federal law regulating the possession, distribution or use of any controlled substance as defined in chapter 453 of NRS, as shown by a certified copy of record of the court;

2. The obtaining of or any attempt to obtain a license or practice in the profession for money or any other thing of value, by fraudulent misrepresentations;

3. Gross malpractice;
4. Advertising by means of knowingly false or deceptive statement;
5. Advertising, practicing or attempting to practice under a name other than one's own;
6. Habitual drunkenness or habitual addiction to the use of a controlled substance as defined in chapter 453 of NRS;
7. Using any false, fraudulent or forged statement or document, or engaging in any fraudulent, deceitful, dishonest or immoral practice in connection with the licensing requirements of this chapter;
8. Sustaining a physical or mental disability which renders further practice dangerous;
9. Engaging in any dishonorable, unethical or unprofessional conduct which may deceive, defraud or harm the public, or which is unbecoming a person licensed to practice under this chapter;
10. Using any false or fraudulent statement in connection with the practice of traditional [Chinese] Oriental medicine or any branch thereof;
11. Violating or attempting to violate, or assisting or abetting the violation of, or conspiring to violate any provision of this chapter;
12. Being adjudicated incompetent or insane;

13. Advertising in an unethical or unprofessional manner;
14. Obtaining a fee or financial benefit for any person by the use of fraudulent diagnosis, therapy or treatment;
15. Willful disclosure of a privileged communication;
16. Failure of a licensee to designate his school of practice in the professional use of his name by the term traditional [Chinese] Oriental doctor, doctor of acupuncture, doctor of herbal medicine or acupuncture assistant, as the case may be;
17. Willful violation of the law relating to the health, safety or welfare of the public or of the rules and regulations promulgated by the state board of health; and
18. Administering, dispensing or prescribing any controlled substance as defined in chapter 453 of NRS, except for the prevention, alleviation or cure of disease or for relief from suffering.

Sec. 13. NRS 634A.200 is hereby amended to read as follows:

634A.200 1. This chapter does not apply to [Chinese] Oriental physicians who are called into this state for consultation.

2. This chapter does not prohibit:

- (a) Gratuitous services of druggists or other persons in cases of emergency;
- (b) The domestic administration of family remedies;

(c) Any person from assisting any person in the practice of the healing arts licensed under this chapter, except that such person may not insert needles into the skin or prescribe herbal medicine.

Sec. 14. NRS 634A.210 is hereby amended to read as follows:

634A.210 [Traditional Chinese doctors] Doctors of traditional Oriental medicine and doctors of acupuncture shall observe and be subject to all state and municipal regulations relative to reporting all births and deaths in all matters pertaining to the public health.

Sec. 15. NRS 634A.230 is hereby amended to read as follows:

634A.230 A person who represents himself as a practitioner of traditional [Chinese] Oriental medicine, or any branch thereof, and who engages in the practice of traditional [Chinese] Oriental medicine, or any branch thereof, in this state without holding a valid license issued by the board is guilty of a gross misdemeanor.

Sec. 16. NRS 634A.240 is hereby amended to read as follows:

634A.240 1. The board may maintain in any court of competent jurisdiction a suit for an injunction against any person or persons practicing [Chinese] traditional Oriental medicine or any branch thereof without a license.

2. Such an injunction:

(a) May be issued without proof of actual damage sustained by any person, this provision being understood to be a preventive as well as a punitive measure.

(b) Shall not relieve such person from criminal prosecution for practicing without a license.

SUMMARY--Regulates employment of acupuncture assistants. Fiscal  
Note: No. (BDR 54-196)

AN ACT relating to Chinese medicine; regulating the number of  
acupuncture assistants which may be employed or supervised  
by any one doctor of traditional Chinese medicine or doctor  
of acupuncture; and providing other matters properly relat-  
ing thereto.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND  
ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 634A of NRS is hereby amended by adding  
thereto a new section which shall read as follows:

1. Doctors of traditional Chinese medicine and doctors of  
acupuncture may employ or supervise licensed acupuncture assis-  
tants.

2. The board shall establish the number of licensed acupunc-  
ture assistants that doctors of traditional Chinese medicine or  
doctors of acupuncture may employ or supervise. The rules and  
regulations of the board shall not permit more than three  
licensed acupuncture assistants to be employed or supervised by  
any one doctor of traditional Chinese medicine or doctor of acu-  
puncture.