

LCB File No. R139-07

**PROPOSED REGULATION OF THE  
STATE BOARD OF HEALTH**

**EMERGENCY MEDICAL SERVICES  
CENTERS FOR THE TREATMENT OF TRAUMA**

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

The following sections have not been revised or modified: NAC 450B.010 thru 450B.780; 450B.798, 450B.814, 450B.838, 450B.852 and 450B.950 thru 450B.960

**Section 1.** Chapter 450B of NAC is hereby amended by adding thereto the provisions set forth as section 2 through 23 inclusive, of this regulation.

**Section 2.** *“Verification review” defined. “Verification review” means the process by which the American College of Surgeons or equivalent medical organization or agency approved by the board confirms that the hospital is performing as a trauma center and meets the criteria contained in “Resources for Optimal Care of the Injured Patient”.*

**Section 3.** NAC 450B.786 is hereby amended to read as follows:  
**NAC 450B.786 “Center for the treatment of trauma” defined.** “Center for the treatment of trauma” means a general hospital licensed in this state which has been designated as a level I, II ~~or [ ]~~ III ~~[or IV]~~ center by the administrator of the health division, pursuant to the provisions of NAC 450B.780 to 450B.875, inclusive.

**Section 4.** NAC 450B.792 is hereby amended to read as follows:  
**NAC 450B.792 “Implementation” defined.** “Implementation” means the development and activation of a plan to provide treatment for trauma by a designated center for the treatment of trauma or pediatric ~~[regional resource]~~ center for the treatment of trauma.

**Section 5.** NAC 450B.794 is hereby amended to read as follows:  
**NAC 450B.794 “Injury severity score” defined.** “Injury severity score” means a number given retrospectively for the quantification of injury to a patient based upon anatomical and physiological considerations as described in the *Journal of Trauma, Vol. 14, 1974* ~~[World Journal of Surgery, Vol. 7, 1983]~~, at pages *187 to 196*, ~~[12 to 18]~~ inclusive.

**Section 6.** NAC 450B.799 is hereby amended to read as follows:

**NAC 450B.799 “Pediatric ~~[regional resource]~~ center for the treatment of trauma” defined.** “Pediatric ~~[regional resource]~~ center for the treatment of trauma” means a facility that is designated by the administrator of the health division to provide comprehensive surgical,

medical and nursing care to persons who are less than 15 years of age, *pursuant to the provisions of NAC 450B.780 to 450B.875.*

**Section 7.** NAC 450B.804 is hereby amended to read as follows:

**NAC 450B.804 “Receiving hospital” defined.** “Receiving hospital” means a hospital licensed in this state with emergency services which has not been designated as a center for the treatment of trauma or pediatric ~~[regional resource]~~ center for the treatment of trauma, but which has been ~~[formally]~~ assigned a role by the health division in the system of providing treatment for trauma.

**Section 8.** NAC 450B.808 is hereby amended to read as follows:

**NAC 450B.808 “Service area” defined.** “Service area” means the geographical area described by a center for the treatment of trauma or pediatric ~~[regional resource]~~ center for the treatment of trauma in its plan for providing treatment for trauma as the area served by that center.

**Section 9.** NAC 450B.810 is hereby amended to read as follows:

**NAC 450B.810 “System for providing treatment for trauma” defined.** “System for providing treatment for trauma” means a formally organized arrangement of resources providing health care which is described in writing by a center for the treatment of trauma or pediatric ~~[regional resource]~~ center for the treatment of trauma and approved by the health division, whereby patients with ~~[major]~~ trauma are treated at a designated center for the treatment of trauma or pediatric ~~[resource]~~ center for the treatment of trauma

**Section 10.** NAC 450B.816 is hereby amended to read as follows:

**NAC 450B.816 Adoption of publications by reference.** (NRS 450B.120, 450B.237)

***1. The State Board of Health hereby adopts by reference:***

~~[1. The World Journal of Surgery, Vol. 7, 1983, is hereby adopted by reference. The publication may be obtained from R.J.A. Goris, M.D., University Medical Center Saint Radboud, Nijmegen, The Netherlands, for the price of \$1.40 per copy.]~~

***(a) [2.] Resources for Optimal Care of the Injured Patient, [1999 edition, is hereby adopted by reference.] in the form most recently published by the American College of Surgeons, unless the Board gives notice that the most recent revision is not suitable for this State pursuant to subsection 2. A copy of the [The] publication may be obtained from the American College of Surgeons, 633 North Saint Clair Street, Chicago, Illinois 60611-3211, for the price of \$20 plus shipping and handling [ \$15].***

***(b) Guidelines for Design and Construction of Hospital and Health Care Facilities, in the form most recently published by American Institute of Architects, unless the Board gives notice that the most recent revision is not suitable for this State pursuant to subsection 2. A copy of the guidelines may be obtained from the American Institute of Architects at the AIA Store, 1735 New York Avenue, NW, Washington, D.C. 20006-5292, at the Internet address <http://www.aia.org> or by telephone at (800) 242-3837, for the price of \$52.50 for members or \$75 for nonmembers, plus \$9 for shipping and handling.***

***2. The State Board of Health will review each revision of the publications adopted by reference pursuant to subsection 1 to ensure its suitability for this State. If the board determines that a revision is not suitable for this State, the Board will hold a public hearing to review its determination within 6 months after the date of the publication of the revision and give notice of that hearing. If, after the hearing, the Board does not revise its determination,***

*the Board will give notice within 30 days after the hearing that the revision is not suitable for this State. If the Board does not give such notice, the revision becomes part of the publication adopted by reference pursuant to subsection 1.*

**Section 11.** NAC 450B.819 is hereby amended to read as follows:

**NAC 450B.819 Submission, contents and rejection of applications for designation ~~for renewal of designation~~; requests for verification.** (NRS 450B.120, 450B.237)

*1. A hospital applying for designation as a level I, II or III center for the treatment of trauma or as a pediatric center for the treatment of trauma, must submit an application in the format specified and the fee prescribed.*

*2. The application must be submitted to the health division and a written request for verification made to the American College of Surgeons, or another equivalent medical organization or agency approved by the board at least 6 months before the date of the verification review conducted pursuant to NAC 450B.820.*

~~*1. The health division shall reject an application from a hospital wishing to be designated as a center for the treatment of trauma or as a pediatric regional resource center for the treatment of trauma.*~~

~~*2. or to renew such a designation if the application is incomplete or if the hospital has not received prior approval to add services in accordance with NRS 449.087.*~~

*3. Any hospital in a county whose population is 400,000 or more must include a letter for provisional authorization from the board of health for that county.*

*4. Within 30 days after receipt of an application for designation as a center for the treatment of trauma or a pediatric center for the treatment of trauma, the health division shall:*

*(a) Review application and verify information contained within; and*

*(b) Upon review notify the applicant, in writing, if any section of the application is incomplete or unclear.*

*5. An application must include the following information:*

*(a) A description of the qualifications of the hospital's personnel to provide care for patients with trauma;*

*(b) A description of the facilities and equipment to be used to provide care for patients with trauma;*

*(c) A description of how the hospital's facilities and personnel comply with or exceed the standards set forth in chapters 5 and 23 of *Resources for Optimal Care of the Injured Patient* or, if applying for designation as a pediatric ~~regional resource~~ center for the treatment of trauma, the standards set forth in chapters 5, 10 and 23 of *Resources for Optimal Care of the Injured Patient*;*

*(d) A description of the hospital's service area to be served.*

*(e) ~~(d)~~ A statement submitted by the medical director of the proposed program for the treatment of trauma that indicates that the hospital has adequate facilities, equipment, personnel, and policies and procedures to provide care for patients with trauma at the level requested;*

*(f) ~~(e)~~ A statement submitted by the chief operating officer of the hospital that the hospital is committed to maintaining sufficient personnel and equipment to provide care for patients with trauma at the level requested; and*

*(g) ~~(f)~~ Written policies for:*

*(1) ~~The activation of the trauma team;~~*

~~{(2)}~~ The transfer of patients with trauma to other centers for the treatment of trauma which have been designated at a higher level, a pediatric ~~{regional resource}~~ center for the treatment of trauma or other specialized facilities; and

(2) ~~{(3)}~~ Performing evaluations and assessments to ensure that the quality of care for patients with trauma meets the standards set forth in chapter 16 of *Resources for Optimal Care of the Injured Patient*.

~~{3. A hospital applying for designation as a level I, II, III or IV center for the treatment of trauma or as a pediatric regional resource center for the treatment of trauma, or for the renewal of such a designation, must submit an application to the health division in a form approved by the division. Except as otherwise provided in subsection 4, the application must be submitted to the health division and a written request for verification made to the American College of Surgeons, or another equivalent medical organization or agency approved by the board at least 6 months before:~~

~~—(a) The date of the survey of the hospital conducted pursuant to NAC 450B.820 if the application is for an initial designation as a level I or II center for the treatment of trauma or as a pediatric regional resource center for the treatment of trauma; or~~

~~—(b) The date of the expiration of the designation if the application is for the renewal of a designation of a level I or II center for the treatment of trauma.]~~

~~{4. If the application is for an initial designation as a level III center for the treatment of trauma or for an initial designation or the renewal of a designation as a level IV center for the treatment of trauma, the application must be submitted to the health division 6 months before the date of the survey by the staff of the health division.]~~

**Section 12.** NAC 450B.820 is hereby amended to read as follows:

**NAC 450B.820 *Verification review required* {Surveys} for designation as centers; {verification required}.** (NRS 450B.120, 450B.237)

1. *Prior to the initial designation or renewal of designation, a verification review must be conducted by American College of Surgeons or equivalent medical organization or agency approved by the board.* ~~{Persons appointed to conduct surveys of proposed centers for the treatment of trauma or pediatric regional resource centers for the treatment of trauma must:~~

~~—(a) Be knowledgeable in systems for providing treatment for trauma, affiliated with a level I, II, III or IV center for the treatment of trauma which has been verified by the American College of Surgeons or, in the case of a pediatric regional resource center for the treatment of trauma, affiliated with a pediatric regional resource center which has been verified by the American College of Surgeons; and~~

~~—(b) Declare no conflict of interest.~~

~~2. Except as otherwise provided in subsection 4, the survey team for a level I, II, III or IV center for the treatment of trauma or a pediatric regional resource center for the treatment of trauma must be:~~

~~—(a) Appointed by the American College of Surgeons or an equivalent medical organization or agency approved by the board; and~~

~~—(b) Composed of:~~

~~—(1) If the survey team is appointed to conduct a survey for an initial designation or the renewal of a designation as a level I or II center for the treatment of trauma or for the renewal of a designation as a level III center for the treatment of trauma, two trauma surgeons or a trauma surgeon and a surgical subspecialist;~~

~~—(2) If the survey team is appointed to conduct a survey for an initial designation or the renewal of a designation as a pediatric regional resource center for the treatment of trauma, two pediatric trauma surgeons or a pediatric trauma surgeon and a pediatric surgical subspecialist; or~~

~~—(3) If the survey team is appointed to conduct a survey for the renewal of a designation of a level IV center for the treatment of trauma, two general surgeons or a general surgeon and a physician with experience in the assessment of injured patients.~~

~~—3. The health division shall appoint members of its staff to act as staff for the survey team.~~

~~—4. For a hospital that applies for an initial designation as a level III or IV center for the treatment of trauma, the administrator shall appoint members of the staff of the health division to conduct the survey of the proposed center. The survey must:~~

~~—(a) Consist of a review of the personnel, equipment and program criteria set forth in the hospital's application which meets the standards set forth in chapters 5, 16 and 23 of *Resources for Optimal Care of the Injured Patient*; and~~

~~—(b) Be conducted at the site of the proposed center for the treatment of trauma.]~~

2 [5]. The cost of:

(a) A *verification review* [survey] by the American College of Surgeons, or an equivalent medical organization or agency approved by the board, to verify the proposed center's capability as a level I, II or III center for the treatment of trauma or a pediatric [regional resource] center for the treatment of trauma [; or]

~~—(b) A survey requested by the administrator of the division of health for the renewal of a designation as a level IV center for the treatment of trauma,]~~

must be borne by the hospital applying for a designation or the renewal of a designation.

3. [6] A [Except as otherwise provided in subsection 7, a] hospital must not be designated as a center for the treatment of trauma or a pediatric [regional resource] center for the treatment of trauma if it does not receive a verification from the American College of Surgeons or an equivalent medical organization or agency approved by the board.

4. *The health division shall have appropriate staff present during the pre-review meetings and on-site reviews conducted by the American College of Surgeons, or an equivalent medical organization or agency approved by the board.*

~~[7. A hospital may comply with the requirements for:~~

~~—(a) An initial designation as a level III center for the treatment of trauma; or~~

~~—(b) An initial designation or the renewal of a designation as a level IV center for the treatment of trauma,~~

~~without meeting the requirements of subsection 6 if the staff that conducts the survey pursuant to subsection 4 finds that the hospital has the personnel, equipment and program criteria required to meet the standards set forth in chapters 5, 16 and 23 of *Resources for Optimal Care of the Injured Patient*.]~~

**Section 13.** NAC 450B.8205 is hereby amended to read as follows:

**NAC 450B.8205 Prerequisites to renewal of designation.** (NRS 450B.120, 450B.237)

1. Before the designation of a level I, II *or* [;]III [or IV] center for the treatment of trauma or a pediatric [regional resource] center for the treatment of trauma is renewed, an application for renewal must be submitted to the health division and a *verification review* [survey] of the center must be conducted.

2. The **verification review** ~~[survey]~~ team for the renewal of a designation as a level I, II or III center for the treatment of trauma or for a pediatric ~~[regional resource]~~ center for the treatment of trauma must be:

(a) Appointed by the American College of Surgeons or an equivalent medical organization or agency approved by the board. ~~[-; and]~~

~~[(b) Composed of:~~

~~— (1) If the survey team is for a level I, II or III center for the treatment of trauma, two trauma surgeons or a trauma surgeon and a surgical subspecialist; or~~

~~— (2) If the survey team is for a pediatric regional resource center for the treatment of trauma, two pediatric trauma surgeons or a pediatric trauma surgeon and a pediatric surgical subspecialist.]~~

~~[3. The survey team for the renewal of a designation as a level IV center for the treatment of trauma must be:~~

~~— (a) Appointed by the administrator of the health division or a person designated by him; and~~

~~— (b) Composed of two general surgeons or a general surgeon and a physician with experience in the care of injured patients.]~~

3. ~~[4]~~ A level I, II or III center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma must:

(a) At least 6 months before its designation expires, submit:

(1) An application for renewal to the health division that contains a proposal for continuing the hospital's designation;

*(2) Any hospital in a county whose population is 400,000 or more must include a letter for provisional authorization from the board of health for that county;*

*(3) Provide evidence of compliance pursuant to NAC 450B.768; and*

(4) ~~[(2)]~~ A written request for verification to the American College of Surgeons or an equivalent medical organization or agency approved by the board;

(b) Arrange for the **verification review** ~~[survey]~~ to be conducted directly with the agency which will conduct the **review** ~~[survey]~~; and

(c) Notify the health division of the date of the **review** ~~[survey]~~.

~~[5. A level IV center for the treatment of trauma must, at least 6 months before its designation expires, submit:~~

~~— (a) An application for renewal to the health division that contains a proposal for continuing the hospital's designation; and~~

~~— (b) A written request for verification to the administrator of the health division or a person designated by him.]~~

4. ~~[6]~~ The cost of the **review** ~~[survey]~~ must be borne by the center for the treatment of trauma or pediatric ~~[regional resource]~~ center for the treatment of trauma.

5. ~~[7]~~ The designation of a hospital as a level I, II or III center for the treatment of trauma or as a pediatric ~~[regional resource]~~ center for the treatment of trauma must not be renewed unless the hospital receives verification from the American College of Surgeons, or an equivalent medical organization or agency approved by the board, which indicates that the hospital has complied with the standards for a level I, II or III center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma set forth in chapters 5, 10, 16 and 23 of *Resources for Optimal Care of the Injured Patient*.

~~[8. The designation of a hospital as a level IV center for the treatment of trauma must not be renewed unless the hospital receives verification from the survey team appointed by the~~

~~administrator of the health division or a person designated by him for the renewal of a hospital as a level IV center for the treatment of trauma which indicates that the hospital has complied with the standards set forth in chapters 5, 10, 16 and 23 of *Resources for Optimal Care of the Injured Patient.*]~~

**Section 14.** NAC 450B.824 is hereby amended to read as follows:

**NAC 450B.824 Notice of decision regarding application for designation or renewal of designation.** The health division shall give written notice of its decision to any hospital which submits an application for designation as a center for the treatment of trauma or as a pediatric ~~[regional resource]~~ center for the treatment of trauma or for the renewal of such a designation.

**Section 15.** NAC 450B.826 is hereby amended to read as follows:

**NAC 450B.826 Duration of designation and renewal of designation; provisional designation.** (NRS 450B.120, 450B.237)

1. Except as otherwise provided in subsection 4, the initial designation of a level I, ~~[or] II or III~~ center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma is valid for the period verified by the American College of Surgeons or the medical organization or agency which conducted the *verification review* ~~[survey]~~ required by NAC 450B.820, but for not more than 3 years.

~~[2. The initial designation of a level III center for the treatment of trauma or the initial designation or renewal of a designation of a level IV center for the treatment of trauma is valid for the period established by the health division, but for not more than 2 years.]~~

2. ~~[3]~~ The renewal of a designation of a level I, II or III center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma is valid for the period verified by the American College of Surgeons, or an equivalent medical organization approved by the board, but not for more than 3 years.

3. ~~[4]~~ If the health division finds that extenuating circumstances exist while an application for the renewal of a designation is pending and that the withholding of the renewal of the designation may have a detrimental impact on the health of the public, it may recommend to the administrator of the health division that a provisional designation be issued. The administrator may issue a provisional designation for not more than 1 year on an application for the renewal of a level I, II ~~or [;] III [or IV]~~ center for the treatment of trauma *or a pediatric center for the treatment of trauma*. The administrator may impose such conditions on the issuance of the provisional designation as he deems necessary.

**Section 16.** NAC 450B.828 is hereby amended to read as follows:

**NAC 450B.828 Addition of centers to system of providing treatment for trauma.**

1. A center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma may be added to the system of providing treatment for trauma on the basis of a demonstrated change in need, including a change in the population and the number of patients in the area being served, if the addition is made pursuant to the requirements of NRS 449.087 and NAC 450B.780 to 450B.875, inclusive.

2. *Additional centers for the treatment of trauma shall be designated according to a graduated process wherein initial designation shall be granted as level III only.*

**Section 17.** NAC 450B.830 is hereby amended to read as follows:

**NAC 450B.830 Discontinuance of designation by center; withdrawal of or refusal to renew designation.** (NRS 450B.120, 450B.237)

1. If a center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma does not wish to continue to be designated as such, it must submit a notice to the administrator of the health division at least 6 months before it discontinues the provision of services as a center for the treatment of trauma or as a pediatric ~~[regional resource]~~ center for the treatment of trauma.

2. The health division may withdraw or refuse to renew the designation of a center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma if the center:

(a) Fails to comply with the requirements of its designation or fails to maintain the standard of care which meets the requirements of chapters 5, 10, 16 and 23 of *Resources for Optimal Care of the Injured Patient*; or

(b) Does not receive verification from the American College of Surgeons, or an equivalent medical organization approved by the board, indicating that it has complied with the criteria established for a level I, II or III center for the treatment of trauma or a pediatric ~~[regional resource]~~ center for the treatment of trauma set forth in chapters 5, 10, 16 and 23 of *Resources for Optimal Care of the Injured Patient*.

**Section 18.** NAC 450B.832 is hereby amended to read as follows:

**NAC 450B.832 Fees for designation and renewal of designation; exception.**

1. A hospital applying for a designation as a level I, ~~[or]~~ *II or III* center for the treatment of trauma or to renew such a designation must pay a fee of *\$3,000* ~~[\$12,500]~~ at the time it submits its application to the health division.

~~[2. A hospital applying for designation as a level III center for the treatment of trauma or to renew its designation must pay a fee of \$3,000 at the time it submits its application to the health division.]~~

2. ~~[3]~~ A hospital applying for designation as a pediatric ~~[regional resource]~~ center for the treatment of trauma *or to renew such a designation* must pay a fee of *\$3,000* ~~[\$25,000]~~ at the time it submits its application to the health division.

~~[4. A hospital applying for designation as a level IV center for the treatment of trauma or to renew its designation is not required to submit a fee with its application to the health division.]~~

**Section 19.** NAC 450B.834 is hereby amended to read as follows:

**NAC 450B.834 Grounds for suspension or revocation of designation.** The health division may suspend or revoke the designation of a center on the following grounds:

1. Any violation of any provision of NAC 450B.780 to 450B.875, inclusive, by the center for the treatment of trauma or pediatric ~~[regional resource]~~ center for the treatment of trauma.

2. Any conduct or practice detrimental to the health and safety of the patients or employees of the facility.

**Section 20.** NAC 450B.836 is hereby amended to read as follows:

**NAC 450B.836 Notice of intent to deny, suspend or revoke designation; summary suspension of designation; appeal of action.** (NRS 450B.120, 450B.237)



1. Except as otherwise provided in this section, if the health division intends to deny, suspend or revoke a designation, it shall follow the requirements set forth in NAC 439.300 to 439.395, inclusive.

2. Advance notice is not required to be given if the health division determines that the protection of the public health requires immediate action. If it so determines, the health division may order a summary suspension of the designation pending proceedings for revocation or other action.

3. If a center for the treatment of trauma or pediatric ~~[regional resource]~~ center for the treatment of trauma wishes to contest the enforcement action of the health division taken pursuant to this section, it must follow the procedure for appeals set forth in NAC 439.300 to 439.395, inclusive.

**Section 21.** NAC 450B.845 is hereby amended to read as follows:

**NAC 450B.845 Pediatric ~~[regional resource]~~ center for the treatment of trauma:**

**Requirements for designation.** (NRS 450B.120, 450B.237) To be designated as a pediatric ~~[regional resource]~~ center for the treatment of trauma, a licensed general hospital or licensed medical-surgical hospital must:

1. Meet all of the criteria for a pediatric ~~[regional resource]~~ center for the treatment of trauma set forth in chapters 5, 10, 16 and 23 of *Resources for Optimal Care of the Injured Patient*.

2. Meet the minimum criteria for a level I *or level II* center for the treatment of trauma and demonstrate a commitment to the treatment of persons who are less than 15 years of age in accordance with chapters 10 and 23 of *Resources for Optimal Care of the Injured Patient*.

3. Receive a verification from the American College of Surgeons, or an equivalent organization approved by the board, that confirms that the center meets the standards for a pediatric ~~[regional resource]~~ center for the treatment of trauma.

**Section 22.** NAC 450B.866 is hereby amended to read as follows:

**NAC 450B.866 Level III center: Requirements for designation.** (NRS 450B.120, 450B.237) To be designated as a level III center for the treatment of trauma, a licensed general hospital must:

~~1. Be located more than 30 minutes from a designated level I or II center for the treatment of trauma.~~

~~2. Operate a service for the treatment of trauma or maintain a multidisciplinary committee to provide for the implementation of the requirements of NAC 450B.780 to 450B.875, inclusive.]~~

1. ~~[3]~~ Comply with all of the criteria for a level III center for the treatment of trauma set forth in chapters 16 and 23 and Appendix D of *Resources for Optimal Care of the Injured Patient*.

2 ~~[4]. If the hospital is applying for the renewal of a designation as a level III center for the treatment of trauma,~~ Receive a verification from the American College of Surgeons, or an equivalent medical organization approved by the board, that confirms that the center complies with the standards for a level III center for the treatment of trauma.

**Section 23.** NAC 450B.875 is hereby amended to read as follows:

**NAC 450B.875 Establishment of programs to ensure quality of care.** Each level I, II *and* ~~[,]III [and IV]~~ center for the treatment of trauma and each pediatric ~~[regional resource]~~ center for the treatment of trauma must establish a program for performing evaluations and assessments to

ensure the quality of care for patients with trauma. The program must meet the standards set forth in chapter 16 of *Resources for Optimal Care of the Injured Patient*.

NAC 450B.782 thru 450B.784, 450B.788 thru 450Bb.790, 450B.796, 450B.800 thru 450B.802, 450B.806, 450B.812, 450B.818, 450B.8215 and 450B.871 are hereby repealed.

### TEXT OF REPEALED SECTIONS

**NAC 450B.782 “Advanced Trauma Life Support” defined.** “Advanced Trauma Life Support” means the course of advanced trauma life support theory and techniques sponsored by the American College of Surgeons.

**NAC 450B.784 “Burn center” defined.** “Burn center” means a licensed hospital with specialized services for the treatment of injuries resulting from burns.

**NAC 450B.788 “Emergency department” defined.** “Emergency department” means the area of a general hospital licensed in this state which customarily receives patients in need of emergency medical evaluation and care.

**NAC 450B.790 “Immediately available” defined.** “Immediately available” means the ability to respond without conflicting duties or responsibilities and without delay when notified, arriving within the specified area of a center for the treatment of trauma or pediatric [regional resource] center for the treatment of trauma when a patient arrives pursuant to the policies and procedures of the center.

**NAC 450B.796 “Patient with a major trauma” defined.** (NRS 450B.120, 450B.237) “Patient with a major trauma” means a person who has sustained an acute injury which has:

1. The potential of being fatal or producing a major disability; and
2. A revised trauma score of less than 11 or an injury severity score that is greater than 15.

As used in this section, “revised trauma score” has the meaning ascribed to it in NAC 450B.760.

**NAC 450B.800 “Promptly available” defined.** “Promptly available” means the ability to be within the area receiving patients with trauma, the emergency department, the operating room or any other specified area of a center for the treatment of trauma or pediatric [regional resource] center for the treatment of trauma within a period of time which is medically prudent and proportionate to the patient’s clinical condition pursuant to the policies and procedures of the center as set forth in the center’s application for designation as a center for the treatment of trauma or pediatric [regional resource] center for the treatment of trauma or any revision of such an application that is approved by the health division.

**NAC 450B.802 “Qualified specialist” defined.** “Qualified specialist” means a physician licensed in this state who has taken postgraduate medical training, or has completed other specified requirements, and is certified in the corresponding specialty recognized by the American Board of Medical Specialties within 5 years after becoming eligible for certification or

within 5 years after joining a trauma team if more than 5 years have elapsed since becoming eligible for certification.

**NAC 450B.806 “Senior resident” defined.** “Senior resident” means a physician licensed in this state who:

1. Is in the last year of his residency for that specialty under consideration;
2. Can initiate treatment, including surgery, if the clinical situation demands; and
3. Is in training as a member of the residency program of a designated center for the treatment of trauma or pediatric regional resource center for the treatment of trauma which is approved by the appropriate Residency Review Committee of the Accreditation on Graduate Medical Education.

The term includes a resident in general surgery if he has completed 3 years of his residency.

**NAC 450B.812 “Trauma team” defined.** “Trauma team” means the group of persons who have been chosen by a designated center for the treatment of trauma or pediatric [regional resource] center for the treatment of trauma to render care to patients with trauma and are lead by a general surgeon credentialed in trauma care or, in the case of a pediatric [regional resource] center for the treatment of trauma, a pediatric surgeon credentialed in trauma care.

**NAC 450B.818 Development of process for accepting applications for designation or renewal of designation.**

1. The health division shall develop a process for accepting an application from a hospital wishing to be designated as a center for the treatment of trauma or as a pediatric regional resource center for the treatment of trauma or to renew such a designation.

2. The process must include written approval by the health division in advance of the application in accordance with NRS 449.087 and descriptive information concerning:

- (a) The number of copies of the application which must be submitted to the health division;
- (b) Standardized reporting requirements and the records required to be maintained; and
- (c) Required supporting information and documents, including written agreements to ensure responses by the trauma teams.

3. The health division’s process for reviewing applications must include surveys of the proposed center and interviews with personnel at all hospitals which submit complete applications.

**NAC 450B.8215 Disqualification of member of survey team for bias or prejudice.**

1. A member of a survey team shall not participate in a survey if he has an actual bias or prejudice for or against the center for the treatment of trauma or pediatric regional resource center for the treatment of trauma which is being surveyed. Actual bias or prejudice may be found if the member of the survey team:

(a) Is related within the third degree of consanguinity or affinity to an officer, director, chief of staff or major shareholder of the center being surveyed; or

(b) Has, or has had within the 3 preceding years, a contractual relationship with the center being surveyed, including, but not limited to, a contractual relationship to act as an employee, independent contractor, consultant, lessee or lessor for the center or any other contractual relationship from which the member of the survey team derived a financial benefit.

2. A center for the treatment of trauma or pediatric regional resource center for the treatment of trauma may request the administrator of the health division to disqualify a member of the survey team for actual bias or prejudice. The center seeking the disqualification must, within 10 working days after receiving the names of the members of the survey team, file an affidavit with the administrator specifying the facts upon which the disqualification is sought. The affidavit must be:

- (a) Personally delivered to the office of the administrator; and
- (b) Accompanied by a certificate stating that the affidavit is being filed in good faith and not for the purpose of delaying the survey.

3. If the administrator disqualifies a member of a survey team:

(a) Appointed to conduct a survey for an initial designation or the renewal of a designation as a level I or II center for the treatment of trauma or as a pediatric regional resource center for the treatment of trauma or the renewal of a designation as a level III center for the treatment of trauma, he shall request the agency conducting the survey to appoint a new member to the survey team.

(b) Appointed to conduct a survey for an initial designation as a level III center for the treatment of trauma or an initial designation or the renewal of a designation as a level IV center for the treatment of trauma, he shall appoint a new member to the survey team.

**NAC 450B.871 Level IV center: Requirements for designation. (NRS 450B.120, 450B.237)**

To be designated as a level IV center for the treatment of trauma, a licensed general hospital must:

1. Be located more than 30 minutes from a designated level I, II or III center for the treatment of trauma;
2. Meet all of the criteria for a level IV center for the treatment of trauma set forth in chapters 16 and 23 and Appendix D of *Resources for Optimal Care of the Injured Patient*;
3. Ensure that a nurse with experience and training in the care of patients with trauma is present at the hospital at all times;
4. Ensure that there is an adequate number of physicians with experience and training in the treatment of patients with trauma who will be immediately available to provide medical treatment to the patients in the hospital; and
5. Have the ability to perform computer axial tomography (CAT) scans or otherwise assess the patient's traumatic injuries and determine the medical center to which the patient will be transferred.