

**PROPOSED REGULATION OF THE
STATE BOARD OF PHARMACY**

LCB File No. R120-09

October 13, 2009

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

AUTHORITY: §1, NRS 639.070 and 639.1373.

A REGULATION relating to pharmacy; revising the requirements for a physician assistant to obtain a registration certificate to prescribe and dispense certain medications and devices; and providing other matters properly relating thereto.

Section 1. NAC 639.272 is hereby amended to read as follows:

639.272 1. The application of a physician assistant for:

(a) A registration certificate to prescribe controlled substances, poisons, dangerous drugs and devices or to prescribe poisons, dangerous drugs and devices; or

(b) A registration certificate to prescribe and dispense controlled substances, poisons, dangerous drugs and devices or to prescribe and dispense poisons, dangerous drugs and devices,
↪ must be in writing and filed with the Executive Secretary.

2. Each application for a registration certificate to prescribe controlled substances, poisons, dangerous drugs and devices or to prescribe poisons, dangerous drugs and devices must include:

(a) The name, address, social security number and telephone number of the applicant;

(b) A copy of the license issued by the Board of Medical Examiners or certificate issued by the State Board of Osteopathic Medicine that authorizes the applicant to prescribe controlled substances, poisons, dangerous drugs and devices or to prescribe poisons, dangerous drugs and devices;

- (c) The name, address and telephone number of the applicant's supervising physician; and
- (d) Any other information requested by the Board.

3. Each application for a registration certificate to prescribe and dispense controlled substances, poisons, dangerous drugs and devices or to prescribe and dispense poisons, dangerous drugs and devices must include:

- (a) The name, address, social security number and telephone number of the applicant;
- (b) A copy of the license issued by the Board of Medical Examiners or certificate issued by the State Board of Osteopathic Medicine that authorizes the applicant to prescribe and dispense controlled substances, poisons, dangerous drugs and devices or to prescribe and dispense poisons, dangerous drugs and devices;
- (c) The name, address and telephone number of the applicant's supervising physician; and
- (d) Any other information requested by the Board.

4. Each physician assistant who applies for a registration certificate pursuant to subsection 3 must:

(a) Personally appear before the Board for determination and assignment of the specific authority to be granted to the physician assistant if the physician assistant:

(1) Responded affirmatively to any of the questions on the application regarding his character or competency; or

(2) Is requested to do so by the Board; *and*

(b) ~~Submit a statement, signed by the applicant and a pharmacist who is registered with the Board, indicating that the pharmacist is available to the applicant as a consultant concerning the dispensing of controlled substances, poisons, dangerous drugs and devices; and~~

~~(c)~~ Pass an examination administered by the Board on the law relating to pharmacy.

5. Each physician assistant to whom a registration certificate is issued must be registered to a supervising physician.