

SENATE BILL NO. 258—SENATOR HARDY

MARCH 17, 2011

Referred to Committee on Commerce, Labor and Energy

SUMMARY—Makes various changes relating to anesthesiology.
(BDR 54-843)

FISCAL NOTE: Effect on Local Government: Increases or Newly
Provides for Term of Imprisonment in County or City
Jail or Detention Facility.
Effect on the State: Yes.

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

AN ACT relating to anesthesiology; providing for the licensure and regulation of anesthesiologist assistants by the Board of Medical Examiners and the State Board of Osteopathic Medicine; requiring anesthesiologist assistants to work under the direct supervision of a supervising anesthesiologist; establishing the maximum fees for the licensure of anesthesiologist assistants and the renewal or registration of such licenses; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 Existing law provides for the licensure of physician assistants by the Board of
2 Medical Examiners or the State Board of Osteopathic Medicine. Such physician
3 assistants work under the supervision of a physician or an osteopathic physician.
4 (NRS 630.273, 633.433) **Sections 7 and 41** of this bill provide for licensure of
5 anesthesiologist assistants by the Board of Medical Examiners and the State Board
6 of Osteopathic Medicine. **Sections 6, 11, 40 and 45** of this bill provide that such
7 anesthesiologist assistants must work under the direct supervision of an
8 anesthesiologist. **Sections 8 and 42** of this bill require the respective Boards to
9 adopt regulations establishing requirements for the licensure of anesthesiologist
10 assistants, including educational and examination requirements, details of the
11 application and licensure process, the anesthesia services an anesthesiologist
12 assistant may perform and the grounds and procedures for imposing disciplinary
13 action against an anesthesiologist assistant. **Sections 6 and 40** provide that an
14 anesthesiologist assistant may prescribe only those controlled substances that the
15 supervising anesthesiologist is authorized to prescribe. **Sections 22 and 50** of this
16 bill establish the maximum fees for the issuance, renewal or registration of a license
17 to provide anesthesia services. **Sections 23 and 51** of this bill provide for the filing



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18 of certain complaints concerning an anesthesiologist assistant to the appropriate
19 Board. **Sections 24-32** of this bill provide procedures for the investigation of
20 complaints and the taking of disciplinary action by the Board of Medical Examiners
21 against an anesthesiologist assistant. **Sections 33 and 52** of this bill provide that a
22 person who holds himself or herself out as an anesthesiologist assistant without
23 being licensed by the appropriate board of this State is guilty of a category D
24 felony.

25 **Sections 56 and 57** of this bill provide that anesthesiologist assistants are
26 immune from civil liability for rendering medical care in certain emergency
27 situations. **Sections 59-61** of this bill require anesthesiologist assistants to report
28 instances of suspected neglect or abuse of children, older persons and certain
29 vulnerable persons.

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

1 **Section 1.** NRS 629.031 is hereby amended to read as follows:
2 629.031 Except as otherwise provided by a specific statute:

3 1. "Provider of health care" means a physician licensed
4 pursuant to chapter 630, 630A or 633 of NRS, physician assistant,
5 *anesthesiologist assistant*, dentist, licensed nurse, dispensing
6 optician, optometrist, practitioner of respiratory care, registered
7 physical therapist, podiatric physician, licensed psychologist,
8 licensed marriage and family therapist, licensed clinical professional
9 counselor, chiropractor, athletic trainer, perfusionist, doctor of
10 Oriental medicine in any form, medical laboratory director or
11 technician, pharmacist or a licensed hospital as the employer of any
12 such person.

13 2. For the purposes of NRS 629.051, 629.061 and 629.065, the
14 term includes a facility that maintains the health care records of
15 patients.

16 **Sec. 2.** Chapter 630 of NRS is hereby amended by adding
17 thereto the provisions set forth as sections 3 to 11, inclusive, of this
18 act.

19 **Sec. 3.** *"Anesthesia services" means those services and*
20 *activities related to the administration of anesthesia to a patient,*
21 *including, without limitation:*

- 22 1. *Obtaining a patient's preanesthetic health history;*
23 2. *Performing a preanesthetic physical examination;*
24 3. *Pretesting and calibrating anesthesia delivery systems and*
25 *monitors and obtaining information from the systems and*
26 *monitors;*
27 4. *Assisting with the implementation of monitoring*
28 *techniques;*
29 5. *Establishing airway interventions and performing*
30 *ventilatory support;*



1 6. *Administering intermittent vasoactive drugs and starting*
2 *and adjusting vasoactive infusions;*

3 7. *Administering anesthetic, adjuvant and accessory drugs;*

4 8. *Administering blood, blood products and supportive fluids;*

5 9. *Assisting with the performance of epidural and spinal*
6 *anesthetic procedures;*

7 10. *Recording postanesthetic patient progress notes; and*

8 11. *Performing administrative duties as delegated by a*
9 *supervising anesthesiologist.*

10 **Sec. 4.** *“Anesthesiologist assistant” means a person who is a*
11 *graduate of an academic program approved by the Board or who,*
12 *by general education, practical training and experience*
13 *determined to be satisfactory by the Board, is qualified to perform*
14 *anesthesia services under the direct supervision of a supervising*
15 *anesthesiologist.*

16 **Sec. 5.** *“Supervising anesthesiologist” means an active*
17 *physician licensed and in good standing in the State of Nevada*
18 *who is certified as an anesthesiologist by the American Board of*
19 *Anesthesiology or its successor organization and who supervises*
20 *an anesthesiologist assistant.*

21 **Sec. 6.** *1. An anesthesiologist assistant may perform such*
22 *anesthesia services as:*

23 (a) *The anesthesiologist assistant is authorized to perform by*
24 *his or her supervising anesthesiologist; and*

25 (b) *Are within the scope of practice of the supervising*
26 *anesthesiologist.*

27 *2. An anesthesiologist assistant shall not prescribe any*
28 *controlled substance that the supervising anesthesiologist is not*
29 *authorized to prescribe pursuant to state and federal law.*

30 **Sec. 7.** *The Board may issue a license to an applicant who is*
31 *qualified under the regulations of the Board to perform anesthesia*
32 *services under the supervision of a supervising anesthesiologist.*
33 *The application for a license as an anesthesiologist assistant must*
34 *include all information required to complete the application.*

35 **Sec. 8.** *The Board shall adopt regulations establishing the*
36 *requirements for licensure as an anesthesiologist assistant,*
37 *including, without limitation:*

38 1. *The educational and other qualifications of applicants.*

39 2. *The required academic program for applicants.*

40 3. *The procedures for applications for and the issuance of*
41 *licenses.*

42 4. *The tests or examinations of applicants by the Board.*

43 5. *The anesthesia services which an anesthesiologist assistant*
44 *may perform.*

45 6. *The duration, renewal and termination of licenses.*



1 7. *The grounds and procedures for disciplinary action*
2 *against an anesthesiologist assistant, including, without limitation,*
3 *an anesthesiologist assistant misrepresenting his or her education,*
4 *training, licensure or identity.*

5 8. *The direct supervision by a supervising anesthesiologist of*
6 *the anesthesia services performed by an anesthesiologist assistant.*

7 **Sec. 9.** *1. An anesthesiologist assistant shall:*

8 (a) *Keep his or her license available for inspection at his or*
9 *her primary place of business; and*

10 (b) *When engaged in professional duties, identify himself or*
11 *herself as an anesthesiologist assistant.*

12 2. *An anesthesiologist assistant shall not bill a patient*
13 *separately from his or her supervising anesthesiologist.*

14 **Sec. 10.** *1. An anesthesiologist assistant licensed pursuant*
15 *to the provisions of this chapter who is responding to a need for*
16 *medical care created by an emergency or disaster, as declared by a*
17 *governmental entity, may render emergency care that is directly*
18 *related to the emergency or disaster without the supervision of a*
19 *supervising anesthesiologist as required by this chapter. The*
20 *provisions of this subsection apply only for the duration of the*
21 *emergency or disaster.*

22 2. *A supervising anesthesiologist who supervises an*
23 *anesthesiologist assistant who is rendering emergency care that is*
24 *directly related to an emergency or disaster, as described in*
25 *subsection 1, is not required to meet the requirements set forth in*
26 *this chapter for such supervision.*

27 **Sec. 11.** *1. A supervising anesthesiologist shall provide*
28 *direct supervision to his or her anesthesiologist assistant whenever*
29 *the anesthesiologist assistant is performing anesthesia services.*

30 2. *Before beginning to supervise an anesthesiologist*
31 *assistant, a supervising anesthesiologist must communicate to the*
32 *anesthesiologist assistant:*

33 (a) *The scope of practice of the anesthesiologist assistant;*

34 (b) *The access to the supervising anesthesiologist that the*
35 *anesthesiologist assistant will have; and*

36 (c) *Any processes for evaluation that the supervising*
37 *anesthesiologist will use to evaluate the anesthesiologist assistant.*

38 3. *A supervising anesthesiologist shall not delegate to his or*
39 *her anesthesiologist assistant, and the anesthesiologist assistant*
40 *shall not accept, a task that is beyond the anesthesiologist*
41 *assistant's capability to complete safely.*

42 4. *A supervising anesthesiologist shall not supervise more*
43 *than four anesthesiologist assistants at the same time.*

44 **Sec. 12.** NRS 630.003 is hereby amended to read as follows:

45 630.003 1. The Legislature finds and declares that:



1 (a) It is among the responsibilities of State Government to
2 ensure, as far as possible, that only competent persons practice
3 medicine, perfusion, *anesthesia services* and respiratory care within
4 this State;

5 (b) For the protection and benefit of the public, the Legislature
6 delegates to the Board of Medical Examiners the power and duty to
7 determine the initial and continuing competence of physicians,
8 perfusionists, physician assistants, *anesthesiologist assistants* and
9 practitioners of respiratory care who are subject to the provisions of
10 this chapter;

11 (c) The Board must exercise its regulatory power to ensure that
12 the interests of the medical profession do not outweigh the interests
13 of the public;

14 (d) The Board must ensure that unfit physicians, perfusionists,
15 physician assistants, *anesthesiologist assistants* and practitioners of
16 respiratory care are removed from the medical profession so that
17 they will not cause harm to the public; and

18 (e) The Board must encourage and allow for public input into its
19 regulatory activities to further improve the quality of medical
20 practice within this State.

21 2. The powers conferred upon the Board by this chapter must
22 be liberally construed to carry out these purposes for the protection
23 and benefit of the public.

24 **Sec. 13.** NRS 630.005 is hereby amended to read as follows:

25 630.005 As used in this chapter, unless the context otherwise
26 requires, the words and terms defined in NRS 630.007 to 630.026,
27 inclusive, *and sections 3, 4 and 5 of this act* have the meanings
28 ascribed to them in those sections.

29 **Sec. 14.** NRS 630.021 is hereby amended to read as follows:

30 630.021 "Practice of respiratory care" includes:

31 1. Therapeutic and diagnostic use of medical gases, humidity
32 and aerosols and the maintenance of associated apparatus;

33 2. The administration of drugs and medications to the
34 cardiopulmonary system;

35 3. The provision of ventilatory assistance and control;

36 4. Postural drainage and percussion, breathing exercises and
37 other respiratory rehabilitation procedures;

38 5. Cardiopulmonary resuscitation and maintenance of natural
39 airways and the insertion and maintenance of artificial airways;

40 6. Carrying out the written orders of a physician, physician
41 assistant, *anesthesiologist assistant*, certified registered nurse
42 anesthetist or an advanced practitioner of nursing relating to
43 respiratory care;

44 7. Techniques for testing to assist in diagnosis, monitoring,
45 treatment and research related to respiratory care, including the



1 measurement of ventilatory volumes, pressures and flows, collection
2 of blood and other specimens, testing of pulmonary functions and
3 hemodynamic and other related physiological monitoring of the
4 cardiopulmonary system; and

5 8. Training relating to the practice of respiratory care.

6 **Sec. 15.** NRS 630.045 is hereby amended to read as follows:

7 630.045 1. The purpose of licensing physicians,
8 perfusionists, physician assistants, *anesthesiologist assistants* and
9 practitioners of respiratory care is to protect the public health and
10 safety and the general welfare of the people of this State.

11 2. Any license issued pursuant to this chapter is a revocable
12 privilege.

13 **Sec. 16.** NRS 630.047 is hereby amended to read as follows:

14 630.047 1. This chapter does not apply to:

15 (a) A medical officer or perfusionist or practitioner of
16 respiratory care of the Armed Forces or a medical officer or
17 perfusionist or practitioner of respiratory care of any division or
18 department of the United States in the discharge of his or her official
19 duties, including, without limitation, providing medical care in a
20 hospital in accordance with an agreement entered into pursuant to
21 NRS 449.2455;

22 (b) Physicians who are called into this State, other than on a
23 regular basis, for consultation with or assistance to a physician
24 licensed in this State, and who are legally qualified to practice in the
25 state where they reside;

26 (c) Physicians who are legally qualified to practice in the state
27 where they reside and come into this State on an irregular basis to:

28 (1) Obtain medical training approved by the Board from a
29 physician who is licensed in this State; or

30 (2) Provide medical instruction or training approved by the
31 Board to physicians licensed in this State;

32 (d) Any person permitted to practice any other healing art under
33 this title who does so within the scope of that authority, or healing
34 by faith or Christian Science;

35 (e) The practice of respiratory care by a student as part of a
36 program of study in respiratory care that is approved by the Board,
37 or is recognized by a national organization which is approved by the
38 Board to review such programs, if the student is enrolled in the
39 program and provides respiratory care only under the supervision of
40 a practitioner of respiratory care;

41 (f) The practice of respiratory care by a student who:

42 (1) Is enrolled in a clinical program of study in respiratory
43 care which has been approved by the Board;

44 (2) Is employed by a medical facility, as defined in NRS
45 449.0151; and



1 (3) Provides respiratory care to patients who are not in a
2 critical medical condition or, in an emergency, to patients who are in
3 a critical medical condition and a practitioner of respiratory care is
4 not immediately available to provide that care and the student is
5 directed by a physician to provide respiratory care under the
6 supervision of the physician until a practitioner of respiratory care is
7 available;

8 (g) The practice of respiratory care by a person on himself or
9 herself or gratuitous respiratory care provided to a friend or a
10 member of a person's family if the provider of the care does not
11 represent himself or herself as a practitioner of respiratory care;

12 (h) A person who is employed by a physician and provides
13 respiratory care or services as a perfusionist under the supervision of
14 that physician;

15 (i) The maintenance of medical equipment for perfusion ,
16 *anesthesia services* or respiratory care that is not attached to a
17 patient; and

18 (j) A person who installs medical equipment for respiratory care
19 that is used in the home and gives instructions regarding the use of
20 that equipment if the person is trained to provide such services and
21 is supervised by a provider of health care who is acting within the
22 authorized scope of his or her practice.

23 2. This chapter does not repeal or affect any statute of Nevada
24 regulating or affecting any other healing art.

25 3. This chapter does not prohibit:

26 (a) Gratuitous services outside of a medical school or medical
27 facility by a person who is not a physician, perfusionist, physician
28 assistant , *anesthesiologist assistant* or practitioner of respiratory
29 care in cases of emergency.

30 (b) The domestic administration of family remedies.

31 **Sec. 17.** NRS 630.120 is hereby amended to read as follows:

32 630.120 1. The Board shall procure a seal.

33 2. All licenses issued to physicians, perfusionists, physician
34 assistants , *anesthesiologist assistants* and practitioners of
35 respiratory care must bear the seal of the Board and the signatures of
36 its President and Secretary-Treasurer.

37 **Sec. 18.** NRS 630.137 is hereby amended to read as follows:

38 630.137 1. Notwithstanding any other provision of law and
39 except as otherwise provided in this section, the Board shall not
40 adopt any regulations that prohibit or have the effect of prohibiting a
41 physician, perfusionist, physician assistant , *anesthesiologist*
42 *assistant* or practitioner of respiratory care from collaborating or
43 consulting with another provider of health care.

44 2. The provisions of this section do not prevent the Board from
45 adopting regulations that prohibit a physician, perfusionist,



1 physician assistant , *anesthesiologist assistant* or practitioner of
2 respiratory care from aiding or abetting another person in the
3 unlicensed practice of medicine or the unlicensed practice of
4 perfusion , *anesthesia services* or respiratory care.

5 3. As used in this section, “provider of health care” has the
6 meaning ascribed to it in NRS 629.031.

7 **Sec. 19.** NRS 630.167 is hereby amended to read as follows:

8 630.167 In addition to any other requirements set forth in this
9 chapter, each applicant for a license to practice medicine, to practice
10 as a perfusionist, to practice as a physician assistant , *to practice as*
11 *an anesthesiologist assistant* or to practice respiratory care shall
12 submit to the Board a complete set of fingerprints and written
13 permission authorizing the Board to forward the fingerprints to the
14 Central Repository for Nevada Records of Criminal History for
15 submission to the Federal Bureau of Investigation for its report. Any
16 fees or costs charged by the Board for this service pursuant to NRS
17 630.268 are not refundable.

18 **Sec. 20.** NRS 630.197 is hereby amended to read as follows:

19 630.197 1. In addition to any other requirements set forth in
20 this chapter:

21 (a) An applicant for the issuance of a license to practice
22 medicine, to practice as a perfusionist, to practice as a physician
23 assistant , *to practice as an anesthesiologist assistant* or to practice
24 as a practitioner of respiratory care shall include the social security
25 number of the applicant in the application submitted to the Board.

26 (b) An applicant for the issuance or renewal of a license to
27 practice medicine, to practice as a perfusionist, to practice as a
28 physician assistant , *to practice as an anesthesiologist assistant* or
29 to practice as a practitioner of respiratory care shall submit to the
30 Board the statement prescribed by the Division of Welfare and
31 Supportive Services of the Department of Health and Human
32 Services pursuant to NRS 425.520. The statement must be
33 completed and signed by the applicant.

34 2. The Board shall include the statement required pursuant to
35 subsection 1 in:

36 (a) The application or any other forms that must be submitted
37 for the issuance or renewal of the license; or

38 (b) A separate form prescribed by the Board.

39 3. A license to practice medicine, to practice as a perfusionist,
40 to practice as a physician assistant , *to practice as an*
41 *anesthesiologist assistant* or to practice as a practitioner of
42 respiratory care may not be issued or renewed by the Board if the
43 applicant:

44 (a) Fails to submit the statement required pursuant to subsection
45 1; or



1 (b) Indicates on the statement submitted pursuant to subsection
2 1 that the applicant is subject to a court order for the support of a
3 child and is not in compliance with the order or a plan approved by
4 the district attorney or other public agency enforcing the order for
5 the repayment of the amount owed pursuant to the order.

6 4. If an applicant indicates on the statement submitted pursuant
7 to subsection 1 that the applicant is subject to a court order for the
8 support of a child and is not in compliance with the order or a plan
9 approved by the district attorney or other public agency enforcing
10 the order for the repayment of the amount owed pursuant to the
11 order, the Board shall advise the applicant to contact the district
12 attorney or other public agency enforcing the order to determine the
13 actions that the applicant may take to satisfy the arrearage.

14 **Sec. 21.** NRS 630.253 is hereby amended to read as follows:

15 630.253 1. The Board shall, as a prerequisite for the:

- 16 (a) Renewal of a license as a physician assistant; ~~or~~
17 (b) *Renewal of a license as an anesthesiologist assistant; or*
18 (c) Biennial registration of the holder of a license to practice
19 medicine,

20 ➤ require each holder to comply with the requirements for
21 continuing education adopted by the Board.

22 2. These requirements:

23 (a) May provide for the completion of one or more courses of
24 instruction relating to risk management in the performance of
25 medical services.

26 (b) Must provide for the completion of a course of instruction,
27 within 2 years after initial licensure, relating to the medical
28 consequences of an act of terrorism that involves the use of a
29 weapon of mass destruction. The course must provide at least 4
30 hours of instruction that includes instruction in the following
31 subjects:

32 (1) An overview of acts of terrorism and weapons of mass
33 destruction;

34 (2) Personal protective equipment required for acts of
35 terrorism;

36 (3) Common symptoms and methods of treatment associated
37 with exposure to, or injuries caused by, chemical, biological,
38 radioactive and nuclear agents;

39 (4) Syndromic surveillance and reporting procedures for acts
40 of terrorism that involve biological agents; and

41 (5) An overview of the information available on, and the use
42 of, the Health Alert Network.

43 ➤ The Board may thereafter determine whether to include in a
44 program of continuing education additional courses of instruction



1 relating to the medical consequences of an act of terrorism that
2 involves the use of a weapon of mass destruction.

3 3. The Board shall encourage each holder of a license who
4 treats or cares for persons who are more than 60 years of age to
5 receive, as a portion of their continuing education, education in
6 geriatrics and gerontology, including such topics as:

7 (a) The skills and knowledge that the licensee needs to address
8 aging issues;

9 (b) Approaches to providing health care to older persons,
10 including both didactic and clinical approaches;

11 (c) The biological, behavioral, social and emotional aspects of
12 the aging process; and

13 (d) The importance of maintenance of function and
14 independence for older persons.

15 4. As used in this section:

16 (a) "Act of terrorism" has the meaning ascribed to it in
17 NRS 202.4415.

18 (b) "Biological agent" has the meaning ascribed to it in
19 NRS 202.442.

20 (c) "Chemical agent" has the meaning ascribed to it in
21 NRS 202.4425.

22 (d) "Radioactive agent" has the meaning ascribed to it in
23 NRS 202.4437.

24 (e) "Weapon of mass destruction" has the meaning ascribed to it
25 in NRS 202.4445.

26 **Sec. 22.** NRS 630.268 is hereby amended to read as follows:

27 630.268 1. The Board shall charge and collect not more than
28 the following fees:

29		
30	For application for and issuance of a license to	
31	practice as a physician, including a license by	
32	endorsement	\$600
33	For application for and issuance of a temporary,	
34	locum tenens, limited, restricted, authorized	
35	facility, special, special purpose or special event	
36	license	400
37	For renewal of a limited, restricted, authorized	
38	facility or special license.....	400
39	For application for and issuance of a license as a	
40	physician assistant.....	400
41	For biennial registration of a physician assistant	800
42	<i>For application for and issuance of a license as an</i>	
43	<i>anesthesiologist assistant</i>	<i>800</i>
44	<i>For biennial registration of an anesthesiologist</i>	
45	<i>assistant</i>	<i>1,000</i>



1 For biennial registration of a physician.....\$800
2 For application for and issuance of a license as a
3 perfusionist or practitioner of respiratory care.....400
4 For biennial renewal of a license as a perfusionist600
5 For biennial registration of a practitioner of
6 respiratory care.....600
7 For biennial registration for a physician who is on
8 inactive status.....400
9 For written verification of licensure.....50
10 For a duplicate identification card.....25
11 For a duplicate license.....50
12 For computer printouts or labels500
13 For verification of a listing of physicians, per hour20
14 For furnishing a list of new physicians100
15

16 2. In addition to the fees prescribed in subsection 1, the Board
17 shall charge and collect necessary and reasonable fees for the
18 expedited processing of a request or for any other incidental service
19 the Board provides.

20 3. The cost of any special meeting called at the request of a
21 licensee, an institution, an organization, a state agency or an
22 applicant for licensure must be paid for by the person or entity
23 requesting the special meeting. Such a special meeting must not be
24 called until the person or entity requesting it has paid a cash deposit
25 with the Board sufficient to defray all expenses of the meeting.

26 **Sec. 23.** NRS 630.307 is hereby amended to read as follows:

27 630.307 1. Except as otherwise provided in subsection 2, any
28 person may file with the Board a complaint against a physician,
29 perfusionist, physician assistant , *anesthesiologist assistant* or
30 practitioner of respiratory care on a form provided by the Board.
31 The form may be submitted in writing or electronically. If a
32 complaint is submitted anonymously, the Board may accept the
33 complaint but may refuse to consider the complaint if the lack of the
34 identity of the complainant makes processing the complaint
35 impossible or unfair to the person who is the subject of the
36 complaint.

37 2. Any licensee, medical school or medical facility that
38 becomes aware that a person practicing medicine, perfusion ,
39 *anesthesia services* or respiratory care in this State has, is or is
40 about to become engaged in conduct which constitutes grounds for
41 initiating disciplinary action shall file a written complaint with the
42 Board within 30 days after becoming aware of the conduct.

43 3. Any hospital, clinic or other medical facility licensed in this
44 State, or medical society, shall report to the Board any change in the
45 privileges of a physician, perfusionist, physician assistant ,



1 *anesthesiologist assistant* or practitioner of respiratory care to
2 practice while the physician, perfusionist, physician assistant ,
3 *anesthesiologist assistant* or practitioner of respiratory care is under
4 investigation and the outcome of any disciplinary action taken by
5 that facility or society against the physician, perfusionist, physician
6 assistant , *anesthesiologist assistant* or practitioner of respiratory
7 care concerning the care of a patient or the competency of the
8 physician, perfusionist, physician assistant , *anesthesiologist*
9 *assistant* or practitioner of respiratory care within 30 days after the
10 change in privileges is made or disciplinary action is taken. The
11 Board shall report any failure to comply with this subsection by a
12 hospital, clinic or other medical facility licensed in this State to the
13 Health Division of the Department of Health and Human Services.
14 If, after a hearing, the Health Division determines that any such
15 facility or society failed to comply with the requirements of this
16 subsection, the Division may impose an administrative fine of not
17 more than \$10,000 against the facility or society for each such
18 failure to report. If the administrative fine is not paid when due, the
19 fine must be recovered in a civil action brought by the Attorney
20 General on behalf of the Division.

21 4. The clerk of every court shall report to the Board any
22 finding, judgment or other determination of the court that a
23 physician, perfusionist, physician assistant , *anesthesiologist*
24 *assistant* or practitioner of respiratory care:

- 25 (a) Is mentally ill;
- 26 (b) Is mentally incompetent;
- 27 (c) Has been convicted of a felony or any law governing
28 controlled substances or dangerous drugs;
- 29 (d) Is guilty of abuse or fraud under any state or federal program
30 providing medical assistance; or
- 31 (e) Is liable for damages for malpractice or negligence,
32 ↪ within 45 days after such a finding, judgment or determination is
33 made.

34 5. On or before January 15 of each year, the clerk of each court
35 shall submit to the Office of Court Administrator created pursuant to
36 NRS 1.320 a written report compiling the information that the clerk
37 reported during the previous year to the Board regarding physicians
38 pursuant to paragraph (e) of subsection 4.

39 6. The Board shall retain all complaints filed with the Board
40 pursuant to this section for at least 10 years, including, without
41 limitation, any complaints not acted upon.

42 **Sec. 24.** NRS 630.309 is hereby amended to read as follows:

43 630.309 To institute a disciplinary action against a perfusionist,
44 physician assistant , *anesthesiologist assistant* or practitioner of



1 respiratory care, a written complaint, specifying the charges, must
2 be filed with the Board by:

3 1. The Board or a committee designated by the Board to
4 investigate a complaint;

5 2. Any member of the Board; or

6 3. Any other person who is aware of any act or circumstance
7 constituting a ground for disciplinary action set forth in the
8 regulations adopted by the Board.

9 **Sec. 25.** NRS 630.326 is hereby amended to read as follows:

10 630.326 1. If an investigation by the Board regarding a
11 physician, perfusionist, physician assistant , *anesthesiologist*
12 *assistant* or practitioner of respiratory care reasonably determines
13 that the health, safety or welfare of the public or any patient served
14 by the physician, perfusionist, physician assistant , *anesthesiologist*
15 *assistant* or practitioner of respiratory care is at risk of imminent or
16 continued harm, the Board may summarily suspend the license of
17 the physician, perfusionist, physician assistant , *anesthesiologist*
18 *assistant* or practitioner of respiratory care. The order of summary
19 suspension may be issued by the Board, an investigative committee
20 of the Board or the Executive Director of the Board after
21 consultation with the President, Vice President or Secretary-
22 Treasurer of the Board.

23 2. If the Board issues an order summarily suspending the
24 license of a physician, perfusionist, physician assistant ,
25 *anesthesiologist assistant* or practitioner of respiratory care ,
26 pursuant to subsection 1, the Board shall hold a hearing regarding
27 the matter not later than 45 days after the date on which the Board
28 issues the order summarily suspending the license unless the Board
29 and the licensee mutually agree to a longer period.

30 3. If the Board issues an order suspending the license of a
31 physician, perfusionist, physician assistant , *anesthesiologist*
32 *assistant* or practitioner of respiratory care pending proceedings for
33 disciplinary action and requires the physician, perfusionist,
34 physician assistant , *anesthesiologist assistant* or practitioner of
35 respiratory care to submit to a mental or physical examination or an
36 examination testing his or her competence to practice, the
37 examination must be conducted and the results obtained not later
38 than 60 days after the Board issues its order.

39 **Sec. 26.** NRS 630.329 is hereby amended to read as follows:

40 630.329 If the Board issues an order suspending the license of
41 a physician, perfusionist, physician assistant , *anesthesiologist*
42 *assistant* or practitioner of respiratory care pending proceedings for
43 disciplinary action, including, without limitation, a summary
44 suspension pursuant to NRS 233B.127, the court shall not stay that
45 order.



1 **Sec. 27.** NRS 630.336 is hereby amended to read as follows:
2 630.336 1. Any deliberations conducted or vote taken by the
3 Board or any investigative committee of the Board regarding its
4 ordering of a physician, perfusionist, physician assistant ,
5 *anesthesiologist assistant* or practitioner of respiratory care to
6 undergo a physical or mental examination or any other examination
7 designated to assist the Board or committee in determining the
8 fitness of a physician, perfusionist, physician assistant ,
9 *anesthesiologist assistant* or practitioner of respiratory care are not
10 subject to the requirements of NRS 241.020.

11 2. Except as otherwise provided in subsection 3 or 4, all
12 applications for a license to practice medicine, perfusion ,
13 *anesthesia services* or respiratory care, any charges filed by the
14 Board, financial records of the Board, formal hearings on any
15 charges heard by the Board or a panel selected by the Board, records
16 of such hearings and any order or decision of the Board or panel
17 must be open to the public.

18 3. Except as otherwise provided in NRS 239.0115, the
19 following may be kept confidential:

20 (a) Any statement, evidence, credential or other proof submitted
21 in support of or to verify the contents of an application;

22 (b) Any report concerning the fitness of any person to receive or
23 hold a license to practice medicine, perfusion , *anesthesia services*
24 or respiratory care; and

25 (c) Any communication between:

26 (1) The Board and any of its committees or panels; and

27 (2) The Board or its staff, investigators, experts, committees,
28 panels, hearing officers, advisory members or consultants and
29 counsel for the Board.

30 4. Except as otherwise provided in subsection 5 and NRS
31 239.0115, a complaint filed with the Board pursuant to NRS
32 630.307, all documents and other information filed with the
33 complaint and all documents and other information compiled as a
34 result of an investigation conducted to determine whether to initiate
35 disciplinary action are confidential.

36 5. The complaint or other document filed by the Board to
37 initiate disciplinary action and all documents and information
38 considered by the Board when determining whether to impose
39 discipline are public records.

40 6. This section does not prevent or prohibit the Board from
41 communicating or cooperating with any other licensing board or
42 agency or any agency which is investigating a licensee, including a
43 law enforcement agency. Such cooperation may include, without
44 limitation, providing the board or agency with minutes of a closed



1 meeting, transcripts of oral examinations and the results of oral
2 examinations.

3 **Sec. 28.** NRS 630.346 is hereby amended to read as follows:

4 630.346 In any disciplinary hearing:

5 1. The Board, a panel of the members of the Board and a
6 hearing officer are not bound by formal rules of evidence and a
7 witness must not be barred from testifying solely because the
8 witness was or is incompetent. Any fact that is the basis of a finding,
9 conclusion or ruling must be based upon the reliable, probative and
10 substantial evidence on the whole record of the matter.

11 2. Proof of actual injury need not be established.

12 3. A certified copy of the record of a court or a licensing
13 agency showing a conviction or plea of nolo contendere or the
14 suspension, revocation, limitation, modification, denial or surrender
15 of a license to practice medicine, perfusion, *anesthesia services* or
16 respiratory care is conclusive evidence of its occurrence.

17 **Sec. 29.** NRS 630.358 is hereby amended to read as follows:

18 630.358 1. Any person:

19 (a) Whose practice of medicine, perfusion, *anesthesia services*
20 or respiratory care has been limited; or

21 (b) Whose license to practice medicine, perfusion, *anesthesia*
22 *services* or respiratory care has been:

23 (1) Suspended until further order; or

24 (2) Revoked,

25 ↪ by an order of the Board, may apply to the Board for removal of
26 the limitation or restoration of the license.

27 2. In hearing the application, the Board:

28 (a) May require the person to submit to a mental or physical
29 examination or an examination testing his or her competence to
30 practice medicine, perfusion, *anesthesia services* or respiratory care
31 by physicians, perfusionists, *anesthesiologist assistants* or
32 practitioners of respiratory care, as appropriate, or other
33 examinations it designates and submit such other evidence of
34 changed conditions and of fitness as it deems proper;

35 (b) Shall determine whether under all the circumstances the time
36 of the application is reasonable; and

37 (c) May deny the application or modify or rescind its order as it
38 deems the evidence and the public safety warrants.

39 3. The licensee has the burden of proving by clear and
40 convincing evidence that the requirements for restoration of the
41 license or removal of the limitation have been met.

42 4. The Board shall not restore a license unless it is satisfied that
43 the person has complied with all of the terms and conditions set
44 forth in the final order of the Board and that the person is capable of



1 practicing medicine, perfusion , *anesthesia services* or respiratory
2 care in a safe manner.

3 5. To restore a license that has been revoked by the Board, the
4 applicant must apply for a license and take an examination as
5 though the applicant had never been licensed under this chapter.

6 **Sec. 30.** NRS 630.366 is hereby amended to read as follows:

7 630.366 1. If the Board receives a copy of a court order
8 issued pursuant to NRS 425.540 that provides for the suspension of
9 all professional, occupational and recreational licenses, certificates
10 and permits issued to a person who is the holder of a license to
11 practice medicine, to practice as a perfusionist, to practice as a
12 physician assistant , *to practice as an anesthesiologist assistant* or
13 to practice as a practitioner of respiratory care, the Board shall deem
14 the license issued to that person to be suspended at the end of the
15 30th day after the date on which the court order was issued unless
16 the Board receives a letter issued to the holder of the license by the
17 district attorney or other public agency pursuant to NRS 425.550
18 stating that the holder of the license has complied with the subpoena
19 or warrant or has satisfied the arrearage pursuant to NRS 425.560.

20 2. The Board shall reinstate a license to practice medicine, to
21 practice as a perfusionist, to practice as a physician assistant , *to*
22 *practice as an anesthesiologist assistant* or to practice as a
23 practitioner of respiratory care that has been suspended by a district
24 court pursuant to NRS 425.540 if the Board receives a letter issued
25 by the district attorney or other public agency pursuant to NRS
26 425.550 to the person whose license was suspended stating that the
27 person whose license was suspended has complied with the
28 subpoena or warrant or has satisfied the arrearage pursuant to
29 NRS 425.560.

30 **Sec. 31.** NRS 630.388 is hereby amended to read as follows:

31 630.388 1. In addition to any other remedy provided by law,
32 the Board, through its President or Secretary-Treasurer or the
33 Attorney General, may apply to any court of competent jurisdiction:

34 (a) To enjoin any prohibited act or other conduct of a licensee
35 which is harmful to the public;

36 (b) To enjoin any person who is not licensed under this chapter
37 from practicing medicine, perfusion , *anesthesia services* or
38 respiratory care;

39 (c) To limit the practice of a physician, perfusionist, physician
40 assistant , *anesthesiologist assistant* or practitioner of respiratory
41 care, or suspend his or her license to practice;

42 (d) To enjoin the use of the title "P.A.," "P.A.-C.," "*A.A.*,"
43 "R.C.P." or any other word, combination of letters or other
44 designation intended to imply or designate a person as a physician
45 assistant , *anesthesiologist assistant* or practitioner of respiratory



1 care, when not licensed by the Board pursuant to this chapter, unless
2 the use is otherwise authorized by a specific statute; or

3 (e) To enjoin the use of the title "L.P.," "T.L.P.," "licensed
4 perfusionist," "temporarily licensed perfusionist" or any other word,
5 combination of letters or other designation intended to imply or
6 designate a person as a perfusionist, when not licensed by the Board
7 pursuant to this chapter, unless the use is otherwise authorized by a
8 specific statute.

9 2. The court in a proper case may issue a temporary restraining
10 order or a preliminary injunction for the purposes set forth in
11 subsection 1:

12 (a) Without proof of actual damage sustained by any person;

13 (b) Without relieving any person from criminal prosecution for
14 engaging in the practice of medicine, perfusion , *anesthesia services*
15 or respiratory care without a license; and

16 (c) Pending proceedings for disciplinary action by the Board.

17 **Sec. 32.** NRS 630.390 is hereby amended to read as follows:

18 630.390 In seeking injunctive relief against any person for an
19 alleged violation of this chapter by practicing medicine, perfusion ,
20 *anesthesia services* or respiratory care without a license, it is
21 sufficient to allege that the person did, upon a certain day, and in a
22 certain county of this State, engage in the practice of medicine,
23 perfusion , *anesthesia services* or respiratory care without having a
24 license to do so, without alleging any further or more particular facts
25 concerning the same.

26 **Sec. 33.** NRS 630.400 is hereby amended to read as follows:

27 630.400 A person who:

28 1. Presents to the Board as his or her own the diploma, license
29 or credentials of another;

30 2. Gives either false or forged evidence of any kind to the
31 Board;

32 3. Practices medicine, perfusion , *anesthesia services* or
33 respiratory care under a false or assumed name or falsely personates
34 another licensee;

35 4. Except as otherwise provided by a specific statute, practices
36 medicine, perfusion , *anesthesia services* or respiratory care without
37 being licensed under this chapter;

38 5. Holds himself or herself out as a perfusionist or uses any
39 other term indicating or implying that he or she is a perfusionist
40 without being licensed by the Board;

41 6. Holds himself or herself out as a physician assistant or uses
42 any other term indicating or implying that he or she is a physician
43 assistant without being licensed by the Board; ~~{or}~~

44 7. *Holds himself or herself out as an anesthesiologist*
45 *assistant or uses any other term indicating or implying that he or*



1 *she is an anesthesiologist assistant without being licensed by the*
2 *Board; or*

3 8. Holds himself or herself out as a practitioner of respiratory
4 care or uses any other term indicating or implying that he or she is a
5 practitioner of respiratory care without being licensed by the Board,
6 ➤ is guilty of a category D felony and shall be punished as provided
7 in NRS 193.130.

8 **Sec. 34.** NRS 630A.090 is hereby amended to read as follows:
9 630A.090 1. This chapter does not apply to:

10 (a) The practice of dentistry, chiropractic, Oriental medicine,
11 podiatry, optometry, perfusion, *anesthesia services*, respiratory care,
12 faith or Christian Science healing, nursing, veterinary medicine or
13 fitting hearing aids.

14 (b) A medical officer of the Armed Forces or a medical officer
15 of any division or department of the United States in the discharge
16 of his or her official duties, including, without limitation, providing
17 medical care in a hospital in accordance with an agreement entered
18 into pursuant to NRS 449.2455.

19 (c) Licensed or certified nurses in the discharge of their duties as
20 nurses.

21 (d) Homeopathic physicians who are called into this State, other
22 than on a regular basis, for consultation or assistance to any
23 physician licensed in this State, and who are legally qualified to
24 practice in the state or country where they reside.

25 2. This chapter does not repeal or affect any statute of Nevada
26 regulating or affecting any other healing art.

27 3. This chapter does not prohibit:

28 (a) Gratuitous services of a person in case of emergency.

29 (b) The domestic administration of family remedies.

30 4. This chapter does not authorize a homeopathic physician to
31 practice medicine, including allopathic medicine, except as
32 otherwise provided in NRS 630A.040.

33 **Sec. 35.** NRS 632.472 is hereby amended to read as follows:

34 632.472 1. The following persons shall report in writing to
35 the Executive Director of the Board any conduct of a licensee or
36 holder of a certificate which constitutes a violation of the provisions
37 of this chapter:

38 (a) Any physician, dentist, dental hygienist, chiropractor,
39 optometrist, podiatric physician, medical examiner, resident, intern,
40 professional or practical nurse, nursing assistant, perfusionist,
41 physician assistant *or anesthesiologist assistant* licensed pursuant to
42 chapter 630 or 633 of NRS, psychiatrist, psychologist, marriage and
43 family therapist, clinical professional counselor, alcohol or drug
44 abuse counselor, driver of an ambulance, advanced emergency



1 medical technician or other person providing medical services
2 licensed or certified to practice in this State.

3 (b) Any personnel of a medical facility or facility for the
4 dependent engaged in the admission, examination, care or treatment
5 of persons or an administrator, manager or other person in charge of
6 a medical facility or facility for the dependent upon notification by a
7 member of the staff of the facility.

8 (c) A coroner.

9 (d) Any person who maintains or is employed by an agency to
10 provide personal care services in the home.

11 (e) Any person who operates, who is employed by or who
12 contracts to provide services for an intermediary service
13 organization as defined in NRS 427A.0291.

14 (f) Any person who maintains or is employed by an agency to
15 provide nursing in the home.

16 (g) Any employee of the Department of Health and Human
17 Services.

18 (h) Any employee of a law enforcement agency or a county's
19 office for protective services or an adult or juvenile probation
20 officer.

21 (i) Any person who maintains or is employed by a facility or
22 establishment that provides care for older persons.

23 (j) Any person who maintains, is employed by or serves as a
24 volunteer for an agency or service which advises persons regarding
25 the abuse, neglect or exploitation of an older person and refers them
26 to persons and agencies where their requests and needs can be met.

27 (k) Any social worker.

28 2. Every physician who, as a member of the staff of a medical
29 facility or facility for the dependent, has reason to believe that a
30 nursing assistant has engaged in conduct which constitutes grounds
31 for the denial, suspension or revocation of a certificate shall notify
32 the superintendent, manager or other person in charge of the facility.
33 The superintendent, manager or other person in charge shall make a
34 report as required in subsection 1.

35 3. A report may be filed by any other person.

36 4. Any person who in good faith reports any violation of the
37 provisions of this chapter to the Executive Director of the Board
38 pursuant to this section is immune from civil liability for reporting
39 the violation.

40 5. As used in this section, "agency to provide personal care
41 services in the home" has the meaning ascribed to it in
42 NRS 449.0021.



1 **Sec. 36.** Chapter 633 of NRS is hereby amended by adding
2 thereto the provisions set forth as sections 37 to 45, inclusive, of this
3 act.

4 **Sec. 37.** *“Anesthesia services” means those services and*
5 *activities related to the administration of anesthesia to a patient,*
6 *including, without limitation:*

- 7 1. *Obtaining a patient’s preanesthetic health history;*
- 8 2. *Performing a preanesthetic physical examination;*
- 9 3. *Pretesting and calibrating anesthesia delivery systems and*
10 *monitors and obtaining information from the systems and*
11 *monitors;*
- 12 4. *Assisting with the implementation of monitoring*
13 *techniques;*
- 14 5. *Establishing airway interventions and performing*
15 *ventilatory support;*
- 16 6. *Administering intermittent vasoactive drugs and starting*
17 *and adjusting vasoactive infusions;*
- 18 7. *Administering anesthetic, adjuvant and accessory drugs;*
- 19 8. *Administering blood, blood products and supportive fluids;*
- 20 9. *Assisting with the performance of epidural and spinal*
21 *anesthetic procedures;*
- 22 10. *Recording postanesthetic patient progress notes; and*
- 23 11. *Performing administrative duties as delegated by a*
24 *supervising anesthesiologist.*

25 **Sec. 38.** *“Anesthesiologist assistant” means a person who is*
26 *a graduate of an academic program approved by the Board or*
27 *who, by general education, practical training and experience*
28 *determined to be satisfactory by the Board, is qualified to perform*
29 *anesthesia services under the direct supervision of a supervising*
30 *anesthesiologist.*

31 **Sec. 39.** *“Supervising anesthesiologist” means an active*
32 *osteopathic physician licensed and in good standing in the State of*
33 *Nevada who is certified as an anesthesiologist by the specialty*
34 *board of the American Board of Medical Specialties or its*
35 *successor, or the American Osteopathic Association or its*
36 *successor, and who supervises an anesthesiologist assistant.*

37 **Sec. 40.** 1. *An anesthesiologist assistant may perform such*
38 *anesthesia services as:*

39 (a) *The anesthesiologist assistant is authorized to perform by*
40 *his or her supervising anesthesiologist; and*

41 (b) *Are within the scope of practice of the supervising*
42 *anesthesiologist.*

43 2. *An anesthesiologist assistant shall not prescribe any*
44 *controlled substance that the supervising anesthesiologist is not*
45 *authorized to prescribe pursuant to state and federal law.*



1 **Sec. 41.** *The Board may issue a license to an applicant who*
2 *is qualified under the regulations of the Board to perform*
3 *anesthesia services under the supervision of a supervising*
4 *anesthesiologist. The application for a license as an*
5 *anesthesiologist assistant must include all information required to*
6 *complete the application.*

7 **Sec. 42.** *The Board shall adopt regulations establishing the*
8 *requirements for licensure as an anesthesiologist assistant,*
9 *including, without limitation:*

- 10 1. *The educational and other qualifications of applicants.*
- 11 2. *The required academic program for applicants.*
- 12 3. *The procedures for applications for and the issuance of*
13 *licenses.*
- 14 4. *The tests or examinations of applicants by the Board.*
- 15 5. *The anesthesia services which an anesthesiologist assistant*
16 *may perform.*
- 17 6. *The duration, renewal and termination of licenses.*
- 18 7. *The grounds and procedures for disciplinary action*
19 *against an anesthesiologist assistant, including, without limitation,*
20 *an anesthesiologist assistant misrepresenting his or her education,*
21 *training, licensure or identity.*
- 22 8. *The direct supervision by a supervising anesthesiologist of*
23 *the anesthesia services performed by an anesthesiologist assistant.*

24 **Sec. 43.** *1. An anesthesiologist assistant shall:*

25 (a) *Keep his or her license available for inspection at his or*
26 *her primary place of business; and*

27 (b) *When engaged in professional duties, identify himself or*
28 *herself as an anesthesiologist assistant.*

29 2. *An anesthesiologist assistant shall not bill a patient*
30 *separately from his or her supervising anesthesiologist.*

31 **Sec. 44.** *1. An anesthesiologist assistant licensed pursuant*
32 *to the provisions of this chapter who is responding to a need for*
33 *medical care created by an emergency or disaster, as declared by a*
34 *governmental entity, may render emergency care that is directly*
35 *related to the emergency or disaster without the supervision of a*
36 *supervising anesthesiologist, as required by this chapter. The*
37 *provisions of this subsection apply only for the duration of the*
38 *emergency or disaster.*

39 2. *A supervising anesthesiologist who supervises an*
40 *anesthesiologist assistant who is rendering emergency care that is*
41 *directly related to an emergency or disaster, as described in*
42 *subsection 1, is not required to meet the requirements set forth in*
43 *this chapter for such supervision.*



1 **Sec. 45. 1. A supervising anesthesiologist shall provide**
2 *direct supervision to his or her anesthesiologist assistant whenever*
3 *the anesthesiologist assistant is performing anesthesia services.*

4 **2. Before beginning to supervise an anesthesiologist**
5 *assistant, a supervising anesthesiologist must communicate to the*
6 *anesthesiologist assistant:*

7 **(a) The scope of practice of the anesthesiologist assistant;**

8 **(b) The access to the supervising anesthesiologist that the**
9 *anesthesiologist assistant will have; and*

10 **(c) Any processes for evaluation that the supervising**
11 *anesthesiologist will use to evaluate the anesthesiologist assistant.*

12 **3. A supervising anesthesiologist shall not delegate to his or**
13 *her anesthesiologist assistant, and the anesthesiologist assistant*
14 *shall not accept, a task that is beyond the anesthesiologist*
15 *assistant's capability to complete safely.*

16 **4. A supervising anesthesiologist shall not supervise more**
17 *than four anesthesiologist assistants at the same time.*

18 **Sec. 46.** NRS 633.011 is hereby amended to read as follows:

19 633.011 As used in this chapter, unless the context otherwise
20 requires, the words and terms defined in NRS 633.021 to 633.131,
21 inclusive, *and sections 37, 38 and 39 of this act* have the meanings
22 ascribed to them in those sections.

23 **Sec. 47.** NRS 633.151 is hereby amended to read as follows:

24 633.151 The purpose of licensing osteopathic physicians ,
25 ~~[and]~~ physician assistants *and anesthesiologist assistants* is to
26 protect the public health and safety and the general welfare of the
27 people of this State. Any license issued pursuant to this chapter is a
28 revocable privilege, and a holder of such a license does not acquire
29 thereby any vested right.

30 **Sec. 48.** NRS 633.171 is hereby amended to read as follows:

31 633.171 1. This chapter does not apply to:

32 (a) The practice of medicine , *anesthesia services* or perfusion
33 pursuant to chapter 630 of NRS, dentistry, chiropractic, podiatry,
34 optometry, respiratory care, faith or Christian Science healing,
35 nursing, veterinary medicine or fitting hearing aids.

36 (b) A medical officer of the Armed Forces or a medical officer
37 of any division or department of the United States in the discharge
38 of his or her official duties, including, without limitation, providing
39 medical care in a hospital in accordance with an agreement entered
40 into pursuant to NRS 449.2455.

41 (c) Osteopathic physicians who are called into this State, other
42 than on a regular basis, for consultation or assistance to a physician
43 licensed in this State, and who are legally qualified to practice in the
44 state where they reside.



2. This chapter does not repeal or affect any law of this State regulating or affecting any other healing art.

3. This chapter does not prohibit:

(a) Gratuitous services of a person in cases of emergency.

(b) The domestic administration of family remedies.

Sec. 49. NRS 633.301 is hereby amended to read as follows:

633.301 1. The Board shall keep a record of its proceedings relating to licensing and disciplinary actions. Except as otherwise provided in this section, the record must be open to public inspection at all reasonable times and contain the name, known place of business and residence, and the date and number of the license of every osteopathic physician, ~~and every~~ physician assistant *and anesthesiologist assistant* licensed under this chapter.

2. Except as otherwise provided in this section and NRS 239.0115, a complaint filed with the Board, all documents and other information filed with the complaint and all documents and other information compiled as a result of an investigation conducted to determine whether to initiate disciplinary action against a person are confidential, unless the person submits a written statement to the Board requesting that such documents and information be made public records.

3. The charging documents filed with the Board to initiate disciplinary action pursuant to chapter 622A of NRS and all other documents and information considered by the Board when determining whether to impose discipline are public records.

4. The provisions of this section do not prohibit the Board from communicating or cooperating with or providing any documents or other information to any other licensing board or any other agency that is investigating a person, including, without limitation, a law enforcement agency.

Sec. 50. NRS 633.501 is hereby amended to read as follows:

633.501 The Board shall charge and collect fees not to exceed the following amounts:

1. Application and initial license fee for an osteopathic physician.....	\$800
2. Annual license renewal fee for an osteopathic physician.....	500
3. Temporary license fee	500
4. Special or authorized facility license fee.....	200
5. Special event license fee.....	200
6. Special or authorized facility license renewal fee	200
7. Reexamination fee.....	200
8. Late payment fee	300
9. Application and initial license fee for a physician assistant.....	400



1 10. Annual license renewal fee for a physician assistant\$400
2 11. *Application and initial license fee for an*
3 *anesthesiologist assistant.....500*
4 12. *Annual license renewal fee for an anesthesiologist*
5 *assistant.....500*
6 13. Inactive license fee200

7 **Sec. 51.** NRS 633.533 is hereby amended to read as follows:

8 633.533 1. Except as otherwise provided in subsection 2, any
9 person may file with the Board a complaint against an osteopathic
10 physician on a form provided by the Board. The form may be
11 submitted in writing or electronically. If a complaint is submitted
12 anonymously, the Board may accept the complaint but may refuse to
13 consider the complaint if the lack of the identity of the complainant
14 makes processing the complaint impossible or unfair to the person
15 who is the subject of the complaint.

16 2. Any licensee, medical school or medical facility that
17 becomes aware that a person practicing osteopathic medicine in this
18 State has, is or is about to become engaged in conduct which
19 constitutes grounds for initiating disciplinary action shall file a
20 written complaint with the Board within 30 days after becoming
21 aware of the conduct.

22 3. Any hospital, clinic or other medical facility licensed in this
23 State, or medical society, shall report to the Board any change in an
24 osteopathic physician’s privileges to practice osteopathic medicine
25 while the osteopathic physician is under investigation and the
26 outcome of any disciplinary action taken by that facility or society
27 against the osteopathic physician concerning the care of a patient or
28 the competency of the osteopathic physician within 30 days after the
29 change in privileges is made or disciplinary action is taken. The
30 Board shall report any failure to comply with this subsection by a
31 hospital, clinic or other medical facility licensed in this State to the
32 Health Division of the Department of Health and Human Services.
33 If, after a hearing, the Health Division determines that any such
34 facility or society failed to comply with the requirements of this
35 subsection, the Division may impose an administrative fine of not
36 more than \$10,000 against the facility or society for each such
37 failure to report. If the administrative fine is not paid when due, the
38 fine must be recovered in a civil action brought by the Attorney
39 General on behalf of the Division.

40 4. The clerk of every court shall report to the Board any
41 finding, judgment or other determination of the court that an
42 osteopathic physician , ~~or~~ physician assistant ~~or~~ *or*
43 *anesthesiologist assistant:*

- 44 (a) Is a person with mental illness;
- 45 (b) Is a person with mental incompetence;



1 (c) Has been convicted of a felony or any law governing
2 controlled substances or dangerous drugs;

3 (d) Is guilty of abuse or fraud under any state or federal program
4 providing medical assistance; or

5 (e) Is liable for damages for malpractice or negligence,
6 ↪ within 45 days after such a finding, judgment or determination is
7 made.

8 5. On or before January 15 of each year, the clerk of every
9 court shall submit to the Office of Court Administrator created
10 pursuant to NRS 1.320 a written report compiling the information
11 that the clerk reported during the previous year to the Board
12 regarding osteopathic physicians pursuant to paragraph (e) of
13 subsection 4.

14 **Sec. 52.** NRS 633.741 is hereby amended to read as follows:

15 633.741 A person who:

16 1. Except as otherwise provided in NRS 629.091, practices
17 osteopathic medicine:

18 (a) Without a license to practice osteopathic medicine valid
19 under this chapter; or

20 (b) Beyond the limitations ordered upon his or her practice by
21 the Board or the court;

22 2. Presents as his or her own the diploma, license or credentials
23 of another;

24 3. Gives either false or forged evidence of any kind to the
25 Board or any of its members in connection with an application for a
26 license;

27 4. Files for record the license issued to another, falsely
28 claiming himself or herself to be the person named in the license, or
29 falsely claiming himself or herself to be the person entitled to the
30 license;

31 5. Practices osteopathic medicine under a false or assumed
32 name or falsely personates another licensee of a like or different
33 name;

34 6. Holds himself or herself out as a physician assistant or who
35 uses any other term indicating or implying that he or she is a
36 physician assistant, unless the person has been licensed by the Board
37 as provided in this chapter; ~~or~~

38 7. *Holds himself or herself out as an anesthesiologist*
39 *assistant or who uses any other term indicating or implying that*
40 *he or she is an anesthesiologist assistant, unless the person has*
41 *been licensed by the Board as provided in this chapter; or*

42 8. Supervises a person as a physician assistant *or an*
43 *anesthesiologist assistant* before ~~such~~ the person is licensed as
44 provided in this chapter,



1 ↳ is guilty of a category D felony and shall be punished as provided
2 in NRS 193.130.

3 **Sec. 53.** NRS 639.0125 is hereby amended to read as follows:

4 639.0125 “Practitioner” means:

5 1. A physician, dentist, veterinarian or podiatric physician who
6 holds a license to practice his or her profession in this State;

7 2. A hospital, pharmacy or other institution licensed, registered
8 or otherwise permitted to distribute, dispense, conduct research with
9 respect to or administer drugs in the course of professional practice
10 or research in this State;

11 3. An advanced practitioner of nursing who has been
12 authorized to prescribe controlled substances, poisons, dangerous
13 drugs and devices;

14 4. A physician assistant *or an anesthesiologist assistant* who:

15 (a) Holds a license issued by the Board of Medical Examiners;
16 and

17 (b) Is authorized by the Board to possess, administer, prescribe
18 or dispense controlled substances, poisons, dangerous drugs or
19 devices under the supervision of a physician as required by chapter
20 630 of NRS;

21 5. A physician assistant *or an anesthesiologist assistant* who:

22 (a) Holds a license issued by the State Board of Osteopathic
23 Medicine; and

24 (b) Is authorized by the Board to possess, administer, prescribe
25 or dispense controlled substances, poisons, dangerous drugs or
26 devices under the supervision of an osteopathic physician as
27 required by chapter 633 of NRS; or

28 6. An optometrist who is certified by the Nevada State Board
29 of Optometry to prescribe and administer therapeutic
30 pharmaceutical agents pursuant to NRS 636.288, when the
31 optometrist prescribes or administers therapeutic pharmaceutical
32 agents within the scope of his or her certification.

33 **Sec. 54.** NRS 639.1373 is hereby amended to read as follows:

34 639.1373 1. A physician assistant *or anesthesiologist*
35 *assistant* licensed pursuant to chapter 630 or 633 of NRS may, if
36 authorized by the Board, possess, administer, prescribe or dispense
37 controlled substances, or possess, administer, prescribe or dispense
38 poisons, dangerous drugs or devices in or out of the presence of his
39 or her supervising physician *or supervising anesthesiologist* only to
40 the extent and subject to the limitations specified in the registration
41 certificate issued to the physician assistant *or the anesthesiologist*
42 *assistant* by the Board pursuant to this section.

43 2. Each physician assistant *or anesthesiologist assistant*
44 licensed pursuant to chapter 630 or 633 of NRS who is authorized
45 by his or her physician assistant’s *or anesthesiologist assistant’s*



1 license issued by the Board of Medical Examiners or by the State
2 Board of Osteopathic Medicine, respectively, to possess, administer,
3 prescribe or dispense controlled substances, or to possess,
4 administer, prescribe or dispense poisons, dangerous drugs or
5 devices must apply for and obtain a registration certificate from the
6 Board, pay a fee to be set by regulations adopted by the Board and
7 pass an examination administered by the Board on the law relating
8 to pharmacy before the physician assistant *or anesthesiologist*
9 *assistant* can possess, administer, prescribe or dispense controlled
10 substances, or possess, administer, prescribe or dispense poisons,
11 dangerous drugs or devices.

12 3. The Board shall consider each application separately and
13 may, even though the physician assistant's *or anesthesiologist*
14 *assistant's* license issued by the Board of Medical Examiners or by
15 the State Board of Osteopathic Medicine authorizes the physician
16 assistant *or anesthesiologist assistant* to possess, administer,
17 prescribe or dispense controlled substances, or to possess,
18 administer, prescribe or dispense poisons, dangerous drugs and
19 devices:

20 (a) Refuse to issue a registration certificate;

21 (b) Issue a registration certificate limiting the authority of the
22 physician assistant *or anesthesiologist assistant* to possess,
23 administer, prescribe or dispense controlled substances, or to
24 possess, administer, prescribe or dispense poisons, dangerous drugs
25 or devices, the area in which the physician assistant *or*
26 *anesthesiologist assistant* may possess controlled substances,
27 poisons, dangerous drugs and devices, or the kind and amount of
28 controlled substances, poisons, dangerous drugs and devices; or

29 (c) Issue a registration certificate imposing other limitations or
30 restrictions which the Board feels are necessary and required to
31 protect the health, safety and welfare of the public.

32 4. If the registration of the physician assistant *or the*
33 *anesthesiologist assistant* licensed pursuant to chapter 630 or 633 of
34 NRS is suspended or revoked, the *supervising* physician's *or*
35 *supervising anesthesiologist's* controlled substance registration may
36 also be suspended or revoked.

37 5. The Board shall adopt regulations controlling the maximum
38 amount to be administered, possessed and dispensed, and the
39 storage, security, recordkeeping and transportation of controlled
40 substances and the maximum amount to be administered, possessed,
41 prescribed and dispensed and the storage, security, recordkeeping
42 and transportation of poisons, dangerous drugs and devices by
43 physician assistants *and anesthesiologist assistants* licensed
44 pursuant to chapter 630 or 633 of NRS. In the adoption of those



1 regulations, the Board shall consider, but is not limited to, the
2 following:

3 (a) The area in which the physician assistant *or anesthesiologist*
4 *assistant* is to operate;

5 (b) The population of that area;

6 (c) The experience and training of the physician assistant ~~[]~~ *or*
7 *anesthesiologist assistant*;

8 (d) The distance to the nearest hospital and physician; and

9 (e) The effect on the health, safety and welfare of the public.

10 6. For the purposes of this section ~~[, the term “supervising”]~~:

11 (a) *“Supervising anesthesiologist”* includes a *supervising*
12 *anesthesiologist as defined in section 5 or 39 of this act.*

13 (b) *“Supervising physician”* includes a *supervising physician as*
14 *defined in NRS 630.025 or a supervising osteopathic physician as*
15 *defined in ~~[chapter 633 of NRS.]~~ NRS 633.123.*

16 **Sec. 55.** NRS 652.210 is hereby amended to read as follows:

17 652.210 1. Except as otherwise provided in subsection 2 and
18 NRS 126.121, no person other than a licensed physician, a licensed
19 optometrist, a licensed practical nurse, a registered nurse, a
20 perfusionist, a physician assistant *or an anesthesiologist assistant*
21 licensed pursuant to chapter 630 or 633 of NRS, a certified
22 intermediate emergency medical technician, a certified advanced
23 emergency medical technician, a practitioner of respiratory care
24 licensed pursuant to chapter 630 of NRS or a licensed dentist may
25 manipulate a person for the collection of specimens.

26 2. The technical personnel of a laboratory may collect blood,
27 remove stomach contents, perform certain diagnostic skin tests or
28 field blood tests or collect material for smears and cultures.

29 **Sec. 56.** NRS 41.504 is hereby amended to read as follows:

30 41.504 1. Any physician, physician assistant ,
31 *anesthesiologist assistant* or registered nurse who in good faith
32 gives instruction or provides supervision to an emergency medical
33 attendant, physician assistant , *anesthesiologist assistant* or
34 registered nurse, at the scene of an emergency or while transporting
35 an ill or injured person from the scene of an emergency, is not liable
36 for any civil damages as a result of any act or omission, not
37 amounting to gross negligence, in giving that instruction or
38 providing that supervision.

39 2. An emergency medical attendant, physician assistant,
40 *anesthesiologist assistant*, registered nurse or licensed practical
41 nurse who obeys an instruction given by a physician, physician
42 assistant, *anesthesiologist assistant*, registered nurse or licensed
43 practical nurse and thereby renders emergency care, at the scene of
44 an emergency or while transporting an ill or injured person from the
45 scene of an emergency, is not liable for any civil damages as a result



1 of any act or omission, not amounting to gross negligence, in
2 rendering that emergency care.

3 3. As used in this section, “emergency medical attendant”
4 means a person licensed as an attendant or certified as an emergency
5 medical technician, intermediate emergency medical technician or
6 advanced emergency medical technician pursuant to chapter 450B
7 of NRS.

8 **Sec. 57.** NRS 41.505 is hereby amended to read as follows:

9 41.505 1. Any person licensed under the provisions of
10 chapter 630, 632 or 633 of NRS and any person who holds an
11 equivalent license issued by another state, who renders emergency
12 care or assistance, including, without limitation, emergency
13 obstetrical care or assistance, in an emergency, gratuitously and in
14 good faith, is not liable for any civil damages as a result of any act
15 or omission, not amounting to gross negligence, by that person in
16 rendering the emergency care or assistance or as a result of any
17 failure to act, not amounting to gross negligence, to provide or
18 arrange for further medical treatment for the injured or ill person.
19 This section does not excuse a physician, physician assistant ,
20 *anesthesiologist assistant* or nurse from liability for damages
21 resulting from that person’s acts or omissions which occur in a
22 licensed medical facility relative to any person with whom there is a
23 preexisting relationship as a patient.

24 2. Any person licensed under the provisions of chapter 630,
25 632 or 633 of NRS and any person who holds an equivalent license
26 issued by another state who:

27 (a) Is retired or otherwise does not practice on a full-time basis;
28 and

29 (b) Gratuitously and in good faith, renders medical care within
30 the scope of that person’s license to an indigent person,
31 ➤ is not liable for any civil damages as a result of any act or
32 omission by that person, not amounting to gross negligence or
33 reckless, willful or wanton conduct, in rendering that care.

34 3. Any person licensed to practice medicine under the
35 provisions of chapter 630 or 633 of NRS or licensed to practice
36 dentistry under the provisions of chapter 631 of NRS who renders
37 care or assistance to a patient for a governmental entity or a
38 nonprofit organization is not liable for any civil damages as a result
39 of any act or omission by that person in rendering that care or
40 assistance if the care or assistance is rendered gratuitously, in good
41 faith and in a manner not amounting to gross negligence or reckless,
42 willful or wanton conduct.

43 4. As used in this section, “gratuitously” has the meaning
44 ascribed to it in NRS 41.500.



1 **Sec. 58.** NRS 200.471 is hereby amended to read as follows:
2 200.471 1. As used in this section:

3 (a) "Assault" means:

4 (1) Unlawfully attempting to use physical force against
5 another person; or

6 (2) Intentionally placing another person in reasonable
7 apprehension of immediate bodily harm.

8 (b) "Officer" means:

9 (1) A person who possesses some or all of the powers of a
10 peace officer;

11 (2) A person employed in a full-time salaried occupation of
12 fire fighting for the benefit or safety of the public;

13 (3) A member of a volunteer fire department;

14 (4) A jailer, guard or other correctional officer of a city or
15 county jail;

16 (5) A justice of the Supreme Court, district judge, justice of
17 the peace, municipal judge, magistrate, court commissioner, master
18 or referee, including a person acting pro tempore in a capacity listed
19 in this subparagraph; or

20 (6) An employee of the State or a political subdivision of the
21 State whose official duties require the employee to make home
22 visits.

23 (c) "Provider of health care" means a physician, a perfusionist ,
24 ~~or~~ a physician assistant *or an anesthesiologist assistant* licensed
25 pursuant to chapter 630 of NRS, a practitioner of respiratory care, a
26 homeopathic physician, an advanced practitioner of homeopathy, a
27 homeopathic assistant, an osteopathic physician, a physician
28 assistant *or an anesthesiologist assistant* licensed pursuant to
29 chapter 633 of NRS, a podiatric physician, a podiatry hygienist, a
30 physical therapist, a medical laboratory technician, an optometrist, a
31 chiropractor, a chiropractor's assistant, a doctor of Oriental
32 medicine, a nurse, a student nurse, a certified nursing assistant, a
33 nursing assistant trainee, a dentist, a dental hygienist, a pharmacist,
34 an intern pharmacist, an attendant on an ambulance or air
35 ambulance, a psychologist, a social worker, a marriage and family
36 therapist, a marriage and family therapist intern, a clinical
37 professional counselor, a clinical professional counselor intern and
38 an emergency medical technician.

39 (d) "School employee" means a licensed or unlicensed person
40 employed by a board of trustees of a school district pursuant to
41 NRS 391.100.

42 (e) "Sporting event" has the meaning ascribed to it in
43 NRS 41.630.

44 (f) "Sports official" has the meaning ascribed to it in
45 NRS 41.630.



1 (g) "Taxicab" has the meaning ascribed to it in NRS 706.8816.

2 (h) "Taxicab driver" means a person who operates a taxicab.

3 (i) "Transit operator" means a person who operates a bus or
4 other vehicle as part of a public mass transportation system.

5 2. A person convicted of an assault shall be punished:

6 (a) If paragraph (c) or (d) does not apply to the circumstances of
7 the crime and the assault is not made with the use of a deadly
8 weapon or the present ability to use a deadly weapon, for a
9 misdemeanor.

10 (b) If the assault is made with the use of a deadly weapon or the
11 present ability to use a deadly weapon, for a category B felony by
12 imprisonment in the state prison for a minimum term of not less
13 than 1 year and a maximum term of not more than 6 years, or by a
14 fine of not more than \$5,000, or by both fine and imprisonment.

15 (c) If paragraph (d) does not apply to the circumstances of the
16 crime and if the assault is committed upon an officer, a provider of
17 health care, a school employee, a taxicab driver or a transit operator
18 who is performing his or her duty or upon a sports official based on
19 the performance of his or her duties at a sporting event and the
20 person charged knew or should have known that the victim was an
21 officer, a provider of health care, a school employee, a taxicab
22 driver, a transit operator or a sports official, for a gross
23 misdemeanor, unless the assault is made with the use of a deadly
24 weapon or the present ability to use a deadly weapon, then for a
25 category B felony by imprisonment in the state prison for a
26 minimum term of not less than 1 year and a maximum term of not
27 more than 6 years, or by a fine of not more than \$5,000, or by both
28 fine and imprisonment.

29 (d) If the assault is committed upon an officer, a provider of
30 health care, a school employee, a taxicab driver or a transit operator
31 who is performing his or her duty or upon a sports official based on
32 the performance of his or her duties at a sporting event by a
33 probationer, a prisoner who is in lawful custody or confinement or a
34 parolee, and the probationer, prisoner or parolee charged knew or
35 should have known that the victim was an officer, a provider of
36 health care, a school employee, a taxicab driver, a transit operator or
37 a sports official, for a category D felony as provided in NRS
38 193.130, unless the assault is made with the use of a deadly weapon
39 or the present ability to use a deadly weapon, then for a category B
40 felony by imprisonment in the state prison for a minimum term of
41 not less than 1 year and a maximum term of not more than 6 years,
42 or by a fine of not more than \$5,000, or by both fine and
43 imprisonment.



1 **Sec. 59.** NRS 200.5093 is hereby amended to read as follows:

2 200.5093 1. Any person who is described in subsection 4 and
3 who, in a professional or occupational capacity, knows or has
4 reasonable cause to believe that an older person has been abused,
5 neglected, exploited or isolated shall:

6 (a) Except as otherwise provided in subsection 2, report the
7 abuse, neglect, exploitation or isolation of the older person to:

8 (1) The local office of the Aging and Disability Services
9 Division of the Department of Health and Human Services;

10 (2) A police department or sheriff's office;

11 (3) The county's office for protective services, if one exists
12 in the county where the suspected action occurred; or

13 (4) A toll-free telephone service designated by the Aging and
14 Disability Services Division of the Department of Health and
15 Human Services; and

16 (b) Make such a report as soon as reasonably practicable but not
17 later than 24 hours after the person knows or has reasonable cause to
18 believe that the older person has been abused, neglected, exploited or
19 isolated.

20 2. If a person who is required to make a report pursuant to
21 subsection 1 knows or has reasonable cause to believe that the
22 abuse, neglect, exploitation or isolation of the older person involves
23 an act or omission of the Aging and Disability Services Division,
24 another division of the Department of Health and Human Services
25 or a law enforcement agency, the person shall make the report to an
26 agency other than the one alleged to have committed the act or
27 omission.

28 3. Each agency, after reducing a report to writing, shall forward
29 a copy of the report to the Aging and Disability Services Division of
30 the Department of Health and Human Services and the Unit for the
31 Investigation and Prosecution of Crimes.

32 4. A report must be made pursuant to subsection 1 by the
33 following persons:

34 (a) Every physician, dentist, dental hygienist, chiropractor,
35 optometrist, podiatric physician, medical examiner, resident, intern,
36 professional or practical nurse, physician assistant *or*
37 *anesthesiologist assistant* licensed pursuant to chapter 630 or 633 of
38 NRS, perfusionist, psychiatrist, psychologist, marriage and family
39 therapist, clinical professional counselor, clinical alcohol and drug
40 abuse counselor, alcohol and drug abuse counselor, athletic trainer,
41 driver of an ambulance, advanced emergency medical technician or
42 other person providing medical services licensed or certified to
43 practice in this State, who examines, attends or treats an older
44 person who appears to have been abused, neglected, exploited or
45 isolated.



1 (b) Any personnel of a hospital or similar institution engaged in
2 the admission, examination, care or treatment of persons or an
3 administrator, manager or other person in charge of a hospital or
4 similar institution upon notification of the suspected abuse, neglect,
5 exploitation or isolation of an older person by a member of the staff
6 of the hospital.

7 (c) A coroner.

8 (d) Every person who maintains or is employed by an agency to
9 provide personal care services in the home.

10 (e) Every person who maintains or is employed by an agency to
11 provide nursing in the home.

12 (f) Every person who operates, who is employed by or who
13 contracts to provide services for an intermediary service
14 organization as defined in NRS 427A.0291.

15 (g) Any employee of the Department of Health and Human
16 Services.

17 (h) Any employee of a law enforcement agency or a county's
18 office for protective services or an adult or juvenile probation
19 officer.

20 (i) Any person who maintains or is employed by a facility or
21 establishment that provides care for older persons.

22 (j) Any person who maintains, is employed by or serves as a
23 volunteer for an agency or service which advises persons regarding
24 the abuse, neglect, exploitation or isolation of an older person and
25 refers them to persons and agencies where their requests and needs
26 can be met.

27 (k) Every social worker.

28 (l) Any person who owns or is employed by a funeral home or
29 mortuary.

30 5. A report may be made by any other person.

31 6. If a person who is required to make a report pursuant to
32 subsection 1 knows or has reasonable cause to believe that an older
33 person has died as a result of abuse, neglect or isolation, the person
34 shall, as soon as reasonably practicable, report this belief to the
35 appropriate medical examiner or coroner, who shall investigate the
36 cause of death of the older person and submit to the appropriate
37 local law enforcement agencies, the appropriate prosecuting
38 attorney, the Aging and Disability Services Division of the
39 Department of Health and Human Services and the Unit for the
40 Investigation and Prosecution of Crimes his or her written findings.
41 The written findings must include the information required pursuant
42 to the provisions of NRS 200.5094, when possible.

43 7. A division, office or department which receives a report
44 pursuant to this section shall cause the investigation of the report to
45 commence within 3 working days **⏪ after receiving the report.** A



1 copy of the final report of the investigation conducted by a division,
2 office or department, other than the Aging and Disability Services
3 Division of the Department of Health and Human Services, must be
4 forwarded within 30 days after the completion of the report to the:

5 (a) Aging and Disability Services Division;

6 (b) Repository for Information Concerning Crimes Against
7 Older Persons created by NRS 179A.450; and

8 (c) Unit for the Investigation and Prosecution of Crimes.

9 8. If the investigation of a report results in the belief that an
10 older person is abused, neglected, exploited or isolated, the Aging
11 and Disability Services Division of the Department of Health and
12 Human Services or the county's office for protective services may
13 provide protective services to the older person if the older person is
14 able and willing to accept them.

15 9. A person who knowingly and willfully violates any of the
16 provisions of this section is guilty of a misdemeanor.

17 10. As used in this section, "Unit for the Investigation and
18 Prosecution of Crimes" means the Unit for the Investigation and
19 Prosecution of Crimes Against Older Persons in the Office of the
20 Attorney General created pursuant to NRS 228.265.

21 **Sec. 60.** NRS 200.50935 is hereby amended to read as
22 follows:

23 200.50935 1. Any person who is described in subsection 3
24 and who, in a professional or occupational capacity, knows or has
25 reasonable cause to believe that a vulnerable person has been
26 abused, neglected, exploited or isolated shall:

27 (a) Report the abuse, neglect, exploitation or isolation of the
28 vulnerable person to a law enforcement agency; and

29 (b) Make such a report as soon as reasonably practicable but not
30 later than 24 hours after the person knows or has reasonable cause to
31 believe that the vulnerable person has been abused, neglected,
32 exploited or isolated.

33 2. If a person who is required to make a report pursuant to
34 subsection 1 knows or has reasonable cause to believe that the
35 abuse, neglect, exploitation or isolation of the vulnerable person
36 involves an act or omission of a law enforcement agency, the person
37 shall make the report to a law enforcement agency other than the
38 one alleged to have committed the act or omission.

39 3. A report must be made pursuant to subsection 1 by the
40 following persons:

41 (a) Every physician, dentist, dental hygienist, chiropractor,
42 optometrist, podiatric physician, medical examiner, resident, intern,
43 professional or practical nurse, perfusionist, physician assistant *or*
44 *anesthesiologist assistant* licensed pursuant to chapter 630 or 633 of
45 NRS, psychiatrist, psychologist, marriage and family therapist,



1 clinical professional counselor, clinical alcohol and drug abuse
2 counselor, alcohol and drug abuse counselor, athletic trainer, driver
3 of an ambulance, advanced emergency medical technician or other
4 person providing medical services licensed or certified to practice in
5 this State, who examines, attends or treats a vulnerable person who
6 appears to have been abused, neglected, exploited or isolated.

7 (b) Any personnel of a hospital or similar institution engaged in
8 the admission, examination, care or treatment of persons or an
9 administrator, manager or other person in charge of a hospital or
10 similar institution upon notification of the suspected abuse, neglect,
11 exploitation or isolation of a vulnerable person by a member of the
12 staff of the hospital.

13 (c) A coroner.

14 (d) Every person who maintains or is employed by an agency to
15 provide nursing in the home.

16 (e) Any employee of the Department of Health and Human
17 Services.

18 (f) Any employee of a law enforcement agency or an adult or
19 juvenile probation officer.

20 (g) Any person who maintains or is employed by a facility or
21 establishment that provides care for vulnerable persons.

22 (h) Any person who maintains, is employed by or serves as a
23 volunteer for an agency or service which advises persons regarding
24 the abuse, neglect, exploitation or isolation of a vulnerable person
25 and refers them to persons and agencies where their requests and
26 needs can be met.

27 (i) Every social worker.

28 (j) Any person who owns or is employed by a funeral home or
29 mortuary.

30 4. A report may be made by any other person.

31 5. If a person who is required to make a report pursuant to
32 subsection 1 knows or has reasonable cause to believe that a
33 vulnerable person has died as a result of abuse, neglect or isolation,
34 the person shall, as soon as reasonably practicable, report this belief
35 to the appropriate medical examiner or coroner, who shall
36 investigate the cause of death of the vulnerable person and submit to
37 the appropriate local law enforcement agencies and the appropriate
38 prosecuting attorney his or her written findings. The written findings
39 must include the information required pursuant to the provisions of
40 NRS 200.5094, when possible.

41 6. A law enforcement agency which receives a report pursuant
42 to this section shall immediately initiate an investigation of the
43 report.

44 7. A person who knowingly and willfully violates any of the
45 provisions of this section is guilty of a misdemeanor.



1 **Sec. 61.** NRS 432B.220 is hereby amended to read as follows:
2 432B.220 1. Any person who is described in subsection 4
3 and who, in his or her professional or occupational capacity, knows
4 or has reasonable cause to believe that a child has been abused or
5 neglected shall:

6 (a) Except as otherwise provided in subsection 2, report the
7 abuse or neglect of the child to an agency which provides child
8 welfare services or to a law enforcement agency; and

9 (b) Make such a report as soon as reasonably practicable but not
10 later than 24 hours after the person knows or has reasonable cause to
11 believe that the child has been abused or neglected.

12 2. If a person who is required to make a report pursuant to
13 subsection 1 knows or has reasonable cause to believe that the abuse
14 or neglect of the child involves an act or omission of:

15 (a) A person directly responsible or serving as a volunteer for or
16 an employee of a public or private home, institution or facility
17 where the child is receiving child care outside of the home for a
18 portion of the day, the person shall make the report to a law
19 enforcement agency.

20 (b) An agency which provides child welfare services or a law
21 enforcement agency, the person shall make the report to an agency
22 other than the one alleged to have committed the act or omission,
23 and the investigation of the abuse or neglect of the child must be
24 made by an agency other than the one alleged to have committed the
25 act or omission.

26 3. Any person who is described in paragraph (a) of subsection
27 4 who delivers or provides medical services to a newborn infant and
28 who, in his or her professional or occupational capacity, knows or
29 has reasonable cause to believe that the newborn infant has been
30 affected by prenatal illegal substance abuse or has withdrawal
31 symptoms resulting from prenatal drug exposure shall, as soon as
32 reasonably practicable but not later than 24 hours after the person
33 knows or has reasonable cause to believe that the newborn infant is
34 so affected or has such symptoms, notify an agency which provides
35 child welfare services of the condition of the infant and refer each
36 person who is responsible for the welfare of the infant to an agency
37 which provides child welfare services for appropriate counseling,
38 training or other services. A notification and referral to an agency
39 which provides child welfare services pursuant to this subsection
40 shall not be construed to require prosecution for any illegal action.

41 4. A report must be made pursuant to subsection 1 by the
42 following persons:

43 (a) A physician, dentist, dental hygienist, chiropractor,
44 optometrist, podiatric physician, medical examiner, resident, intern,
45 professional or practical nurse, physician assistant *or*



1 ***anesthesiologist assistant*** licensed pursuant to chapter 630 or 633 of
2 NRS, perfusionist, psychiatrist, psychologist, marriage and family
3 therapist, clinical professional counselor, clinical alcohol and drug
4 abuse counselor, alcohol and drug abuse counselor, clinical social
5 worker, athletic trainer, advanced emergency medical technician or
6 other person providing medical services licensed or certified in this
7 State.

8 (b) Any personnel of a hospital or similar institution engaged in
9 the admission, examination, care or treatment of persons or an
10 administrator, manager or other person in charge of a hospital or
11 similar institution upon notification of suspected abuse or neglect of
12 a child by a member of the staff of the hospital.

13 (c) A coroner.

14 (d) A member of the clergy, practitioner of Christian Science or
15 religious healer, unless the person has acquired the knowledge of the
16 abuse or neglect from the offender during a confession.

17 (e) A social worker and an administrator, teacher, librarian or
18 counselor of a school.

19 (f) Any person who maintains or is employed by a facility or
20 establishment that provides care for children, children's camp or
21 other public or private facility, institution or agency furnishing care
22 to a child.

23 (g) Any person licensed to conduct a foster home.

24 (h) Any officer or employee of a law enforcement agency or an
25 adult or juvenile probation officer.

26 (i) An attorney, unless the attorney has acquired the knowledge
27 of the abuse or neglect from a client who is or may be accused of the
28 abuse or neglect.

29 (j) Any person who maintains, is employed by or serves as a
30 volunteer for an agency or service which advises persons regarding
31 abuse or neglect of a child and refers them to persons and agencies
32 where their requests and needs can be met.

33 (k) Any person who is employed by or serves as a volunteer for
34 an approved youth shelter. As used in this paragraph, "approved
35 youth shelter" has the meaning ascribed to it in NRS 244.422.

36 (l) Any adult person who is employed by an entity that provides
37 organized activities for children.

38 5. A report may be made by any other person.

39 6. If a person who is required to make a report pursuant to
40 subsection 1 knows or has reasonable cause to believe that a child
41 has died as a result of abuse or neglect, the person shall, as soon as
42 reasonably practicable, report this belief to an agency which
43 provides child welfare services or a law enforcement agency. If such
44 a report is made to a law enforcement agency, the law enforcement
45 agency shall notify an agency which provides child welfare services



1 and the appropriate medical examiner or coroner of the report. If
2 such a report is made to an agency which provides child welfare
3 services, the agency which provides child welfare services shall
4 notify the appropriate medical examiner or coroner of the report.
5 The medical examiner or coroner who is notified of a report
6 pursuant to this subsection shall investigate the report and submit
7 his or her written findings to the appropriate agency which provides
8 child welfare services, the appropriate district attorney and a law
9 enforcement agency. The written findings must include, if
10 obtainable, the information required pursuant to the provisions of
11 subsection 2 of NRS 432B.230.

12 **Sec. 62.** NRS 441A.110 is hereby amended to read as follows:

13 441A.110 “Provider of health care” means a physician, nurse
14 or veterinarian licensed in accordance with state law or a physician
15 assistant *or anesthesiologist assistant* licensed pursuant to chapter
16 630 or 633 of NRS.

17 **Sec. 63.** NRS 441A.334 is hereby amended to read as follows:

18 441A.334 As used in this section and NRS 441A.335 and
19 441A.336, “provider of health care” means a physician, nurse, ~~for~~
20 physician assistant *or anesthesiologist assistant* licensed in
21 accordance with state law.

22 **Sec. 64.** NRS 453.038 is hereby amended to read as follows:

23 453.038 “Chart order” means an order entered on the chart of a
24 patient:

25 1. In a hospital, facility for intermediate care or facility for
26 skilled nursing which is licensed as such by the Health Division of
27 the Department; or

28 2. Under emergency treatment in a hospital by a physician,
29 advanced practitioner of nursing, dentist or podiatric physician, or
30 on the written or oral order of a physician, physician assistant *or*
31 *anesthesiologist assistant* licensed pursuant to chapter 630 or 633 of
32 NRS, advanced practitioner of nursing, dentist or podiatric
33 physician authorizing the administration of a drug to the patient.

34 **Sec. 65.** NRS 453.091 is hereby amended to read as follows:

35 453.091 1. “Manufacture” means the production, preparation,
36 propagation, compounding, conversion or processing of a substance,
37 either directly or indirectly by extraction from substances of natural
38 origin, or independently by means of chemical synthesis, or by a
39 combination of extraction and chemical synthesis, and includes any
40 packaging or repackaging of the substance or labeling or relabeling
41 of its container.

42 2. “Manufacture” does not include the preparation,
43 compounding, packaging or labeling of a substance by a pharmacist,
44 physician, physician assistant *or anesthesiologist assistant* licensed



1 pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician,
2 advanced practitioner of nursing or veterinarian:

3 (a) As an incident to the administering or dispensing of a
4 substance in the course of his or her professional practice; or

5 (b) By an authorized agent under his or her supervision, for the
6 purpose of, or as an incident to, research, teaching or chemical
7 analysis and not for sale.

8 **Sec. 66.** NRS 453.126 is hereby amended to read as follows:

9 453.126 "Practitioner" means:

10 1. A physician, dentist, veterinarian or podiatric physician who
11 holds a license to practice his or her profession in this State and is
12 registered pursuant to this chapter.

13 2. An advanced practitioner of nursing who holds a certificate
14 from the State Board of Nursing and a certificate from the State
15 Board of Pharmacy authorizing him or her to dispense or to
16 prescribe and dispense controlled substances.

17 3. A scientific investigator or a pharmacy, hospital or other
18 institution licensed, registered or otherwise authorized in this State
19 to distribute, dispense, conduct research with respect to, to
20 administer, or use in teaching or chemical analysis, a controlled
21 substance in the course of professional practice or research.

22 4. A euthanasia technician who is licensed by the Nevada State
23 Board of Veterinary Medical Examiners and registered pursuant to
24 this chapter, while he or she possesses or administers sodium
25 pentobarbital pursuant to his or her license and registration.

26 5. A physician assistant *or anesthesiologist assistant* who:

27 (a) Holds a license from the Board of Medical Examiners; and

28 (b) Is authorized by the Board to possess, administer, prescribe
29 or dispense controlled substances under the supervision of a
30 physician as required by chapter 630 of NRS.

31 6. A physician assistant *or anesthesiologist assistant* who:

32 (a) Holds a license from the State Board of Osteopathic
33 Medicine; and

34 (b) Is authorized by the Board to possess, administer, prescribe
35 or dispense controlled substances under the supervision of an
36 osteopathic physician as required by chapter 633 of NRS.

37 7. An optometrist who is certified by the Nevada State Board
38 of Optometry to prescribe and administer therapeutic
39 pharmaceutical agents pursuant to NRS 636.288, when the
40 optometrist prescribes or administers therapeutic pharmaceutical
41 agents within the scope of his or her certification.

42 **Sec. 67.** NRS 453.128 is hereby amended to read as follows:

43 453.128 1. "Prescription" means:

44 (a) An order given individually for the person for whom
45 prescribed, directly from a physician, physician assistant licensed



1 pursuant to chapter 630 or 633 of NRS, *anesthesiologist assistant*
2 *licensed pursuant to chapter 630 or 633 of NRS*, dentist, podiatric
3 physician, optometrist, advanced practitioner of nursing or
4 veterinarian, or his or her agent, to a pharmacist or indirectly by
5 means of an order signed by the practitioner or an electronic
6 transmission from the practitioner to a pharmacist; or

7 (b) A chart order written for an inpatient specifying drugs which
8 he or she is to take home upon his or her discharge.

9 2. The term does not include a chart order written for an
10 inpatient for use while he or she is an inpatient.

11 **Sec. 68.** NRS 453.226 is hereby amended to read as follows:

12 453.226 1. Every practitioner or other person who dispenses
13 any controlled substance within this State or who proposes to
14 engage in the dispensing of any controlled substance within this
15 State shall obtain biennially a registration issued by the Board in
16 accordance with its regulations.

17 2. A person registered by the Board in accordance with the
18 provisions of NRS 453.011 to 453.552, inclusive, to dispense or
19 conduct research with controlled substances may possess, dispense
20 or conduct research with those substances to the extent authorized
21 by the registration and in conformity with the other provisions of
22 those sections.

23 3. The following persons are not required to register and may
24 lawfully possess and distribute controlled substances pursuant to the
25 provisions of NRS 453.011 to 453.552, inclusive:

26 (a) An agent or employee of a registered dispenser of a
27 controlled substance if he or she is acting in the usual course of his
28 or her business or employment;

29 (b) A common or contract carrier or warehouseman, or an
30 employee thereof, whose possession of any controlled substance is
31 in the usual course of business or employment;

32 (c) An ultimate user or a person in possession of any controlled
33 substance pursuant to a lawful order of a physician, physician
34 assistant licensed pursuant to chapter 630 or 633 of NRS,
35 *anesthesiologist assistant licensed pursuant to chapter 630 or 633*
36 *of NRS*, dentist, advanced practitioner of nursing, podiatric
37 physician or veterinarian or in lawful possession of a schedule V
38 substance; or

39 (d) A physician who:

40 (1) Holds a locum tenens license issued by the Board of
41 Medical Examiners or a temporary license issued by the State Board
42 of Osteopathic Medicine; and

43 (2) Is registered with the Drug Enforcement Administration
44 at a location outside this State.



1 4. The Board may waive the requirement for registration of
2 certain dispensers if it finds it consistent with the public health and
3 safety.

4 5. A separate registration is required at each principal place of
5 business or professional practice where the applicant dispenses
6 controlled substances.

7 6. The Board may inspect the establishment of a registrant or
8 applicant for registration in accordance with the Board's regulations.

9 **Sec. 69.** NRS 453.336 is hereby amended to read as follows:

10 453.336 1. A person shall not knowingly or intentionally
11 possess a controlled substance, unless the substance was obtained
12 directly from, or pursuant to, a prescription or order of a physician,
13 physician assistant licensed pursuant to chapter 630 or 633 of NRS,
14 *anesthesiologist assistant licensed pursuant to chapter 630 or 633*
15 *of NRS*, dentist, podiatric physician, optometrist, advanced
16 practitioner of nursing or veterinarian while acting in the course of
17 his or her professional practice, or except as otherwise authorized by
18 the provisions of NRS 453.005 to 453.552, inclusive.

19 2. Except as otherwise provided in subsections 3 and 4 and in
20 NRS 453.3363, and unless a greater penalty is provided in NRS
21 212.160, 453.3385, 453.339 or 453.3395, a person who violates this
22 section shall be punished:

23 (a) For the first or second offense, if the controlled substance is
24 listed in schedule I, II, III or IV, for a category E felony as provided
25 in NRS 193.130.

26 (b) For a third or subsequent offense, if the controlled substance
27 is listed in schedule I, II, III or IV, or if the offender has previously
28 been convicted two or more times in the aggregate of any violation
29 of the law of the United States or of any state, territory or district
30 relating to a controlled substance, for a category D felony as
31 provided in NRS 193.130, and may be further punished by a fine of
32 not more than \$20,000.

33 (c) For the first offense, if the controlled substance is listed in
34 schedule V, for a category E felony as provided in NRS 193.130.

35 (d) For a second or subsequent offense, if the controlled
36 substance is listed in schedule V, for a category D felony as
37 provided in NRS 193.130.

38 3. Unless a greater penalty is provided in NRS 212.160,
39 453.337 or 453.3385, a person who is convicted of the possession of
40 flunitrazepam or gamma-hydroxybutyrate, or any substance for
41 which flunitrazepam or gamma-hydroxybutyrate is an immediate
42 precursor, is guilty of a category B felony and shall be punished by
43 imprisonment in the state prison for a minimum term of not less
44 than 1 year and a maximum term of not more than 6 years.



1 4. Unless a greater penalty is provided pursuant to NRS
2 212.160, a person who is convicted of the possession of 1 ounce or
3 less of marijuana:

4 (a) For the first offense, is guilty of a misdemeanor and shall be:

5 (1) Punished by a fine of not more than \$600; or

6 (2) Examined by an approved facility for the treatment of
7 abuse of drugs to determine whether the person is a drug addict and
8 is likely to be rehabilitated through treatment and, if the examination
9 reveals that the person is a drug addict and is likely to be
10 rehabilitated through treatment, assigned to a program of treatment
11 and rehabilitation pursuant to NRS 453.580.

12 (b) For the second offense, is guilty of a misdemeanor and shall
13 be:

14 (1) Punished by a fine of not more than \$1,000; or

15 (2) Assigned to a program of treatment and rehabilitation
16 pursuant to NRS 453.580.

17 (c) For the third offense, is guilty of a gross misdemeanor and
18 shall be punished as provided in NRS 193.140.

19 (d) For a fourth or subsequent offense, is guilty of a category E
20 felony and shall be punished as provided in NRS 193.130.

21 5. As used in this section, "controlled substance" includes
22 flunitrazepam, gamma-hydroxybutyrate and each substance for
23 which flunitrazepam or gamma-hydroxybutyrate is an immediate
24 precursor.

25 **Sec. 70.** NRS 453.371 is hereby amended to read as follows:

26 453.371 As used in NRS 453.371 to 453.552, inclusive:

27 1. "Advanced practitioner of nursing" means a person who
28 holds a certificate of recognition granted pursuant to NRS 632.237
29 and is registered with the Board.

30 2. *"Anesthesiologist assistant" means a person who is*
31 *registered with the Board and:*

32 (a) *Holds a license issued pursuant to section 7 of this act; or*

33 (b) *Holds a license issued pursuant to section 41 of this act.*

34 3. "Medical intern" means a medical graduate acting as an
35 assistant in a hospital for the purpose of clinical training.

36 ~~[3-]~~ 4. "Pharmacist" means a person who holds a certificate of
37 registration issued pursuant to NRS 639.127 and is registered with
38 the Board.

39 ~~[4-]~~ 5. "Physician," "dentist," "podiatric physician,"
40 "veterinarian" and "euthanasia technician" mean persons authorized
41 by a license to practice their respective professions in this State who
42 are registered with the Board.

43 ~~[5-]~~ 6. "Physician assistant" means a person who is registered
44 with the Board and:



- 1 (a) Holds a license issued pursuant to NRS 630.273; or
- 2 (b) Holds a license issued pursuant to NRS 633.433.

3 **Sec. 71.** NRS 453.375 is hereby amended to read as follows:

4 453.375 A controlled substance may be possessed and
5 administered by the following persons:

6 1. A practitioner.

7 2. A registered nurse licensed to practice professional nursing
8 or licensed practical nurse, at the direction of a physician, physician
9 assistant, *anesthesiologist assistant*, dentist, podiatric physician or
10 advanced practitioner of nursing, or pursuant to a chart order, for
11 administration to a patient at another location.

12 3. An advanced emergency medical technician:

13 (a) As authorized by regulation of:

14 (1) The State Board of Health in a county whose population
15 is less than 100,000; or

16 (2) A county or district board of health in a county whose
17 population is 100,000 or more; and

18 (b) In accordance with any applicable regulations of:

19 (1) The State Board of Health in a county whose population
20 is less than 100,000;

21 (2) A county board of health in a county whose population is
22 100,000 or more; or

23 (3) A district board of health created pursuant to NRS
24 439.362 or 439.370 in any county.

25 4. A respiratory therapist, at the direction of a physician or
26 physician assistant.

27 5. A medical student, student in training to become a physician
28 assistant or student nurse in the course of his or her studies at an
29 approved college of medicine or school of professional or practical
30 nursing, at the direction of a physician or physician assistant and:

31 (a) In the presence of a physician, physician assistant or a
32 registered nurse; or

33 (b) Under the supervision of a physician, physician assistant or a
34 registered nurse if the student is authorized by the college or school
35 to administer the substance outside the presence of a physician,
36 physician assistant or nurse.

37 ↪ A medical student or student nurse may administer a controlled
38 substance in the presence or under the supervision of a registered
39 nurse alone only if the circumstances are such that the registered
40 nurse would be authorized to administer it personally.

41 6. An ultimate user or any person whom the ultimate user
42 designates pursuant to a written agreement.

43 7. Any person designated by the head of a correctional
44 institution.



1 8. A veterinary technician at the direction of his or her
2 supervising veterinarian.

3 9. In accordance with applicable regulations of the State Board
4 of Health, an employee of a residential facility for groups, as
5 defined in NRS 449.017, pursuant to a written agreement entered
6 into by the ultimate user.

7 10. In accordance with applicable regulations of the State
8 Board of Pharmacy, an animal control officer, a wildlife biologist or
9 an employee designated by a federal, state or local governmental
10 agency whose duties include the control of domestic, wild and
11 predatory animals.

12 11. A person who is enrolled in a training program to become
13 an advanced emergency medical technician, respiratory therapist or
14 veterinary technician if the person possesses and administers the
15 controlled substance in the same manner and under the same
16 conditions that apply, respectively, to an advanced emergency
17 medical technician, respiratory therapist or veterinary technician
18 who may possess and administer the controlled substance, and under
19 the direct supervision of a person licensed or registered to perform
20 the respective medical art or a supervisor of such a person.

21 **Sec. 72.** NRS 453.381 is hereby amended to read as follows:

22 453.381 1. In addition to the limitations imposed by NRS
23 453.256 and 453.3611 to 453.3648, inclusive, a physician, physician
24 assistant, *anesthesiologist assistant*, dentist, advanced practitioner
25 of nursing or podiatric physician may prescribe or administer
26 controlled substances only for a legitimate medical purpose and in
27 the usual course of his or her professional practice, and he or she
28 shall not prescribe, administer or dispense a controlled substance
29 listed in schedule II for himself or herself, his or her spouse or his or
30 her children except in cases of emergency.

31 2. A veterinarian, in the course of his or her professional
32 practice only, and not for use by a human being, may prescribe,
33 possess and administer controlled substances, and the veterinarian
34 may cause them to be administered by a veterinary technician under
35 the direction and supervision of the veterinarian.

36 3. A euthanasia technician, within the scope of his or her
37 license, and not for use by a human being, may possess and
38 administer sodium pentobarbital.

39 4. A pharmacist shall not fill an order which purports to be a
40 prescription if the pharmacist has reason to believe that it was not
41 issued in the usual course of the professional practice of a physician,
42 physician assistant, *anesthesiologist assistant*, dentist, advanced
43 practitioner of nursing, podiatric physician or veterinarian.

44 5. Any person who has obtained from a physician, physician
45 assistant, *anesthesiologist assistant*, dentist, advanced practitioner



1 of nursing, podiatric physician or veterinarian any controlled
2 substance for administration to a patient during the absence of the
3 physician, physician assistant, dentist, advanced practitioner of
4 nursing, podiatric physician or veterinarian shall return to him or her
5 any unused portion of the substance when it is no longer required by
6 the patient.

7 6. A manufacturer, wholesale supplier or other person legally
8 able to furnish or sell any controlled substance listed in schedule II
9 shall not provide samples of such a controlled substance to
10 registrants.

11 7. A salesperson of any manufacturer or wholesaler of
12 pharmaceuticals shall not possess, transport or furnish any
13 controlled substance listed in schedule II.

14 8. A person shall not dispense a controlled substance in
15 violation of a regulation adopted by the Board.

16 **Sec. 73.** NRS 453.391 is hereby amended to read as follows:

17 453.391 A person shall not:

18 1. Unlawfully take, obtain or attempt to take or obtain a
19 controlled substance or a prescription for a controlled substance
20 from a manufacturer, wholesaler, pharmacist, physician, physician
21 assistant, *anesthesiologist assistant*, dentist, advanced practitioner
22 of nursing, veterinarian or any other person authorized to
23 administer, dispense or possess controlled substances.

24 2. While undergoing treatment and being supplied with any
25 controlled substance or a prescription for any controlled substance
26 from one practitioner, knowingly obtain any controlled substance or
27 a prescription for a controlled substance from another practitioner
28 without disclosing this fact to the second practitioner.

29 **Sec. 74.** NRS 454.00958 is hereby amended to read as
30 follows:

31 454.00958 "Practitioner" means:

32 1. A physician, dentist, veterinarian or podiatric physician who
33 holds a valid license to practice his or her profession in this State.

34 2. A pharmacy, hospital or other institution licensed or
35 registered to distribute, dispense, conduct research with respect to or
36 to administer a dangerous drug in the course of professional practice
37 in this State.

38 3. When relating to the prescription of poisons, dangerous
39 drugs and devices:

40 (a) An advanced practitioner of nursing who holds a certificate
41 from the State Board of Nursing and a certificate from the State
42 Board of Pharmacy permitting him or her so to prescribe; ~~for~~

43 (b) *An anesthesiologist assistant who holds a license from the*
44 *Board of Medical Examiners or the State Board of Osteopathic*



1 *Medicine and a certificate from the State Board of Pharmacy*
2 *permitting him or her so to prescribe; or*

3 (c) A physician assistant who holds a license from the Board of
4 Medical Examiners and a certificate from the State Board of
5 Pharmacy permitting him or her so to prescribe.

6 4. An optometrist who is certified to prescribe and administer
7 dangerous drugs pursuant to NRS 636.288 when the optometrist
8 prescribes or administers dangerous drugs which are within the
9 scope of his or her certification.

10 **Sec. 75.** NRS 454.213 is hereby amended to read as follows:

11 454.213 A drug or medicine referred to in NRS 454.181 to
12 454.371, inclusive, may be possessed and administered by:

13 1. A practitioner.

14 2. A physician assistant *or anesthesiologist assistant* licensed
15 pursuant to chapter 630 or 633 of NRS, at the direction of his or her
16 supervising physician *or supervising anesthesiologist*, or a licensed
17 dental hygienist acting in the office of and under the supervision of
18 a dentist.

19 3. Except as otherwise provided in subsection 4, a registered
20 nurse licensed to practice professional nursing or licensed practical
21 nurse, at the direction of a prescribing physician, physician assistant
22 licensed pursuant to chapter 630 or 633 of NRS, *anesthesiologist*
23 *assistant licensed pursuant to chapter 630 or 633 of NRS*, dentist,
24 podiatric physician or advanced practitioner of nursing, or pursuant
25 to a chart order, for administration to a patient at another location.

26 4. In accordance with applicable regulations of the Board, a
27 registered nurse licensed to practice professional nursing or licensed
28 practical nurse who is:

29 (a) Employed by a health care agency or health care facility that
30 is authorized to provide emergency care, or to respond to the
31 immediate needs of a patient, in the residence of the patient; and

32 (b) Acting under the direction of the medical director of that
33 agency or facility who works in this State.

34 5. Except as otherwise provided in subsection 6, an
35 intermediate emergency medical technician or an advanced
36 emergency medical technician, as authorized by regulation of the
37 State Board of Pharmacy and in accordance with any applicable
38 regulations of:

39 (a) The State Board of Health in a county whose population is
40 less than 100,000;

41 (b) A county board of health in a county whose population is
42 100,000 or more; or

43 (c) A district board of health created pursuant to NRS 439.362
44 or 439.370 in any county.



1 6. An intermediate emergency medical technician or an
2 advanced emergency medical technician who holds an endorsement
3 issued pursuant to NRS 450B.1975, under the direct supervision of a
4 local health officer or a designee of the local health officer pursuant
5 to that section.

6 7. A respiratory therapist employed in a health care facility.
7 The therapist may possess and administer respiratory products only
8 at the direction of a physician.

9 8. A dialysis technician, under the direction or supervision of a
10 physician or registered nurse only if the drug or medicine is used for
11 the process of renal dialysis.

12 9. A medical student or student nurse in the course of his or her
13 studies at an approved college of medicine or school of professional
14 or practical nursing, at the direction of a physician and:

15 (a) In the presence of a physician or a registered nurse; or

16 (b) Under the supervision of a physician or a registered nurse if
17 the student is authorized by the college or school to administer the
18 drug or medicine outside the presence of a physician or nurse.

19 ➔ A medical student or student nurse may administer a dangerous
20 drug in the presence or under the supervision of a registered nurse
21 alone only if the circumstances are such that the registered nurse
22 would be authorized to administer it personally.

23 10. Any person designated by the head of a correctional
24 institution.

25 11. An ultimate user or any person designated by the ultimate
26 user pursuant to a written agreement.

27 12. A nuclear medicine technologist, at the direction of a
28 physician and in accordance with any conditions established by
29 regulation of the Board.

30 13. A radiologic technologist, at the direction of a physician
31 and in accordance with any conditions established by regulation of
32 the Board.

33 14. A chiropractic physician, but only if the drug or medicine
34 is a topical drug used for cooling and stretching external tissue
35 during therapeutic treatments.

36 15. A physical therapist, but only if the drug or medicine is a
37 topical drug which is:

38 (a) Used for cooling and stretching external tissue during
39 therapeutic treatments; and

40 (b) Prescribed by a licensed physician for:

41 (1) Iontophoresis; or

42 (2) The transmission of drugs through the skin using
43 ultrasound.

44 16. In accordance with applicable regulations of the State
45 Board of Health, an employee of a residential facility for groups, as



1 defined in NRS 449.017, pursuant to a written agreement entered
2 into by the ultimate user.

3 17. A veterinary technician at the direction of his or her
4 supervising veterinarian.

5 18. In accordance with applicable regulations of the Board, a
6 registered pharmacist who:

7 (a) Is trained in and certified to carry out standards and practices
8 for immunization programs;

9 (b) Is authorized to administer immunizations pursuant to
10 written protocols from a physician; and

11 (c) Administers immunizations in compliance with the
12 "Standards of Immunization Practices" recommended and approved
13 by the United States Public Health Service Advisory Committee on
14 Immunization Practices.

15 19. A person who is enrolled in a training program to become a
16 physician assistant *or anesthesiologist assistant* licensed pursuant to
17 chapter 630 or 633 of NRS, dental hygienist, intermediate
18 emergency medical technician, advanced emergency medical
19 technician, respiratory therapist, dialysis technician, nuclear
20 medicine technologist, radiologic technologist, physical therapist or
21 veterinary technician if the person possesses and administers the
22 drug or medicine in the same manner and under the same conditions
23 that apply, respectively, to a physician assistant *or anesthesiologist*
24 *assistant* licensed pursuant to chapter 630 or 633 of NRS, dental
25 hygienist, intermediate emergency medical technician, advanced
26 emergency medical technician, respiratory therapist, dialysis
27 technician, nuclear medicine technologist, radiologic technologist,
28 physical therapist or veterinary technician who may possess and
29 administer the drug or medicine, and under the direct supervision of
30 a person licensed or registered to perform the respective medical art
31 or a supervisor of such a person.

32 **Sec. 76.** NRS 454.215 is hereby amended to read as follows:

33 454.215 A dangerous drug may be dispensed by:

34 1. A registered pharmacist upon the legal prescription from a
35 practitioner or to a pharmacy in a correctional institution upon the
36 written order of the prescribing practitioner in charge;

37 2. A pharmacy in a correctional institution, in case of
38 emergency, upon a written order signed by the chief medical officer;

39 3. A practitioner, or a physician assistant *or anesthesiologist*
40 *assistant* licensed pursuant to chapter 630 or 633 of NRS if
41 authorized by the Board;

42 4. A registered nurse, when the nurse is engaged in the
43 performance of any public health program approved by the Board;

44 5. A medical intern in the course of his or her internship;



1 6. An advanced practitioner of nursing who holds a certificate
2 from the State Board of Nursing and a certificate from the State
3 Board of Pharmacy permitting him or her to dispense dangerous
4 drugs;

5 7. A registered nurse employed at an institution of the
6 Department of Corrections to an offender in that institution;

7 8. A registered pharmacist from an institutional pharmacy
8 pursuant to regulations adopted by the Board; or

9 9. A registered nurse to a patient at a rural clinic that is
10 designated as such pursuant to NRS 433.233 and that is operated by
11 the Division of Mental Health and Developmental Services of the
12 Department of Health and Human Services if the nurse is providing
13 mental health services at the rural clinic,

14 ↪ except that no person may dispense a dangerous drug in violation
15 of a regulation adopted by the Board.

16 **Sec. 77.** NRS 454.221 is hereby amended to read as follows:

17 454.221 1. A person who furnishes any dangerous drug
18 except upon the prescription of a practitioner is guilty of a category
19 D felony and shall be punished as provided in NRS 193.130, unless
20 the dangerous drug was obtained originally by a legal prescription.

21 2. The provisions of this section do not apply to the furnishing
22 of any dangerous drug by:

23 (a) A practitioner to his or her patients;

24 (b) A physician assistant *or anesthesiologist assistant* licensed
25 pursuant to chapter 630 or 633 of NRS if authorized by the Board;

26 (c) A registered nurse while participating in a public health
27 program approved by the Board, or an advanced practitioner of
28 nursing who holds a certificate from the State Board of Nursing and
29 a certificate from the State Board of Pharmacy permitting him or her
30 to dispense dangerous drugs;

31 (d) A manufacturer or wholesaler or pharmacy to each other or
32 to a practitioner or to a laboratory under records of sales and
33 purchases that correctly give the date, the names and addresses of
34 the supplier and the buyer, the drug and its quantity;

35 (e) A hospital pharmacy or a pharmacy so designated by a
36 county health officer in a county whose population is 100,000 or
37 more, or by a district health officer in any county within its
38 jurisdiction or, in the absence of either, by the State Health Officer
39 or the State Health Officer's designated Medical Director of
40 Emergency Medical Services, to a person or agency described in
41 subsection 3 of NRS 639.268 to stock ambulances or other
42 authorized vehicles or replenish the stock; or

43 (f) A pharmacy in a correctional institution to a person
44 designated by the Director of the Department of Corrections to



1 administer a lethal injection to a person who has been sentenced to
2 death.

3 **Sec. 78.** This act becomes effective upon passage and approval
4 for the purpose of adopting regulations and performing any
5 preliminary administrative tasks that are necessary to carry out the
6 provisions of this act, and on January 1, 2012, for all other purposes.

⑩



* S B 2 5 8 *