

SENATE BILL NO. 261—SENATORS PARKS, KIECKHEFER,
SEGERBLOM, FARLEY, CANCELA; DENIS, RATTI, SPEARMAN
AND WOODHOUSE

MARCH 13, 2017

JOINT SPONSORS: ASSEMBLYMEN YEAGER, BROOKS, CARLTON,
BILBRAY-AXELROD, COHEN; FUMO AND SWANK

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions governing prescribing,
dispensing and administering controlled substances
designed to end the life of a patient. (BDR 40-17)

FISCAL NOTE: Effect on Local Government: No.
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 public health; providing that the cause of death of a person who self-administers a controlled substance designed to end his or her life is the terminal condition with which the person was diagnosed; authorizing a physician to prescribe a controlled substance that is designed to end the life of a patient under certain circumstances; prohibiting persons other than a patient from administering a controlled substance that is designed to end the life of the patient; imposing requirements on certain providers of health care relating to the records of a patient who requests a controlled substance that is designed to end his or her life; providing immunity to certain providers of health care who take certain actions relating to prescribing a controlled substance that is designed to end the life of a patient; prohibiting certain fraudulent or coercive acts for the purpose of causing a person to self-administer a controlled substance that is designed to end the life of the person; authorizing the owner or operator of a health care facility to prohibit certain persons from providing certain services relating to a controlled substance that is designed to end the life of a person; prohibiting a person from conditioning provisions of a will, contract, agreement or policy of life insurance on the request for or acquisition or administration of a controlled substance designed to end the life of the person; prohibiting a person from refusing to sell or provide life insurance or denying benefits to or imposing additional charges against a policyholder or beneficiary because the insured requested or revoked a request for a controlled substance designed to end the life of the person; providing a penalty; and providing other matters properly relating thereto.



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Legislative Counsel's Digest:

1 Existing law authorizes a patient who has been diagnosed with a terminal
2 condition to refuse life-resuscitating or life-sustaining treatment in certain
3 circumstances and establishes certain requirements relating to controlled
4 substances. (NRS 449.691-449.697, 450B.400-450B.590, chapter 453 of NRS)
5 **Section 11** of this bill authorizes a patient to request that his or her physician
6 prescribe a controlled substance that is designed to end the life of the patient if the
7 patient: (1) is at least 18 years of age; (2) has been diagnosed with a terminal
8 condition by at least two physicians; (3) is a resident of this State; (4) has made an
9 informed and voluntary decision to end his or her own life; (5) is competent; and
10 (6) is not requesting the controlled substance because of coercion or undue
11 influence. **Section 12** of this bill prescribes certain requirements concerning the
12 manner in which a patient may request a controlled substance designed to end the
13 life of the patient, including that the patient make two verbal requests and one
14 written request for the controlled substance and that the written request for the
15 controlled substance is signed by two witnesses. **Section 13** of this bill prescribes
16 the form for the written request for the controlled substance. **Section 14** of this bill
17 imposes certain requirements before a physician is allowed to prescribe a controlled
18 substance designed to end the life of a patient, including that the physician: (1)
19 inform the patient of his or her right to revoke a request for the controlled substance
20 at any time; (2) determine and verify that the patient meets the requirements for
21 making such a request; (3) refer the patient to a consulting physician who can
22 confirm the diagnosis, prognosis and competence of the patient; (4) instruct the
23 patient against self-administering the controlled substance in public; and (5)
24 recommend that the patient notify his or her next of kin of the patient's decision to
25 end his or her life. **Section 15** of this bill requires a physician who determines that a
26 patient who has requested a prescription for a controlled substance that is designed
27 to end his or her life may not be competent to refer the patient to a psychiatrist or
28 psychologist and to receive confirmation about the patient's competence.
29 **Sections 16 and 34** of this bill provide that only an attending physician or
30 pharmacist may dispense a controlled substance that is designed to end the life of a
31 patient. **Section 16** also prescribes the manner in which such a controlled substance
32 is to be dispensed. **Section 16.5** of this bill prohibits an attending physician from
33 prescribing a controlled substance that is designed to end the life of a patient based
34 solely on the age or disability of the patient. **Sections 17 and 20** of this bill require
35 certain providers of health care to include certain information concerning requests
36 and prescriptions for and the dispensing of a controlled substance that is designed
37 to end the life of a patient in the medical record of the patient and to report certain
38 information to the Division of Public and Behavioral Health of the Department of
39 Health and Human Services. **Section 20.5** of this bill requires the Division to
40 compile an annual report concerning the implementation of the provisions of this
41 bill authorizing a patient to request a prescription for a controlled substance that is
42 designed to end the life of the patient. **Sections 20 and 31** of this bill provide that
43 such information is otherwise confidential when reported to the Division.
44 **Section 18** of this bill allows a patient, at any time, to revoke a request for a
45 controlled substance that is designed to end his or her life. **Sections 19 and 28** of
46 this bill provide that only the patient to whom a controlled substance designed to
47 end his or her life is prescribed may administer the controlled substance. No other
48 person is allowed to administer the controlled substance to the patient. **Section 19**
49 provides for the disposal of any unused portion of the controlled substance.
50 **Section 21** of this bill exempts certain providers of health care from
51 professional discipline and from civil and criminal liability and provides that such
52 providers do not violate any applicable standard of care for taking certain actions to
53 assist a patient in acquiring a controlled substance designed to end the life of the
54 patient. **Section 22** of this bill provides that a death resulting from the



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55 self-administration of a controlled substance that is designed to end the life of a
56 patient is not suicide or homicide when done in conformance with the provisions of
57 this bill, and **section 1** of this bill requires a death certificate to list the terminal
58 condition of the patient as the cause of death of the person.

59 **Sections 23 and 29** of this bill prohibit a person from preventing or requiring a
60 person to submit or revoke a request for a controlled substance that is designed to
61 end the life of the person as a condition to receiving health care or as a condition in
62 a will or agreement.

63 Existing law makes it a category A felony to administer poison or cause poison
64 to be administered with the intention of causing the death of a person. (NRS
65 200.390) Such a crime is punishable by imprisonment for life with eligibility for
66 parole after 5 years, or by a definite term of 15 years with eligibility for parole after
67 5 years. **Section 24** of this bill makes it a category A felony with the same
68 punishment to engage in certain fraudulent or coercive acts intended to cause a
69 person to self-administer a controlled substance that is designed to end the life of
70 the person.

71 **Section 25** of this bill clarifies that a physician is not required to prescribe a
72 controlled substance that is designed to end the life of a patient or violate certain
73 standards and responsibilities related to that profession. **Section 25** also provides
74 that a pharmacist is not required to fill a prescription for or dispense such a
75 controlled substance. **Section 26** of this bill allows the owner or operator of a health
76 care facility to prohibit an employee or independent contractor of the health care
77 facility or any person who provides services on the premises of the health care
78 facility from providing any services relating to prescribing a controlled substance
79 designed to end the life of a patient while acting within the scope of his or her
80 employment or contract with the facility or while on the premises of the facility.
81 **Section 27** of this bill makes a conforming change to clarify that a physician or
82 pharmacist may dispense a controlled substance that is designed to end the life of a
83 patient in accordance with other provisions governing controlled substances
84 designed to end the life of a patient.

85 **Section 30** of this bill provides that a proposed ward shall not be deemed to be
86 in need of a general or special guardian solely because the proposed ward requested
87 a controlled substance designed to end his or her life or revoked such a request.

88 **Sections 36 and 37** of this bill prohibit insurers from: (1) refusing to sell, provide
89 or issue a policy of life insurance or charging a higher rate because a person makes
90 or revokes a request for a controlled substance designed to end the life of the person
91 or self-administers such a controlled substance; or (2) conditioning life insurance
92 benefits or the payment of claims on whether the insured makes, fails to make or
93 revokes a request for a controlled substance designed to end the life of the insured
94 or self-administers such a controlled substance.

1 WHEREAS, A patient should have the right to self-determination
2 concerning his or her health care decisions based on
3 communications with his or her physician; and

4 WHEREAS, Principles of law having their roots in common law
5 and the United States Constitution that date back to the late 19th
6 century establish the right of every person to the possession and
7 control of his or her own body, free from restraint or interference by
8 others; and



1 WHEREAS, It is necessary to promote awareness and discussion
2 of health care issues in preparation for decisions concerning the end
3 of the life of a person; and

4 WHEREAS, A person should have the right to self-determination
5 concerning medically assisted, informed, voluntary decisions about
6 dying with dignity and avoiding unnecessary suffering; and

7 WHEREAS, A person who suffers from a terminal condition
8 should have the right to determine whether to fight for his or her life
9 using all reasonable care until life's end, to enroll in hospice care, to
10 seek palliative care, to ingest a drug to end his or her life or to take
11 any combination of those actions; now, therefore,

12
13 THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
14 SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:
15

16 **Section 1.** NRS 440.380 is hereby amended to read as follows:

17 440.380 1. ~~The~~ *Except as otherwise provided in subsection*
18 *3, the* medical certificate of death must be signed by the physician,
19 if any, last in attendance on the deceased, or pursuant to regulations
20 adopted by the Board, it may be signed by the attending physician's
21 associate physician, the chief medical officer of the hospital or
22 institution in which the death occurred, or the pathologist who
23 performed an autopsy upon the deceased. The person who signs the
24 medical certificate of death shall specify:

25 (a) The social security number of the deceased.

26 (b) The hour and day on which the death occurred.

27 (c) The cause of death, so as to show the cause of disease or
28 sequence of causes resulting in death, giving first the primary cause
29 of death or the name of the disease causing death, and the
30 contributory or secondary cause, if any, and the duration of each.

31 2. In deaths in hospitals or institutions, or of nonresidents, the
32 physician shall furnish the information required under this section,
33 and may state where, in the physician's opinion, the disease was
34 contracted.

35 *3. The medical certificate of death of a patient who dies after*
36 *self-administering a controlled substance that is designed to end*
37 *the life of the patient in accordance with the provisions of sections*
38 *3 to 26, inclusive, of this act must be signed by the attending*
39 *physician who shall specify the terminal condition with which the*
40 *patient was diagnosed as the cause of death of the patient.*

41 **Sec. 2.** Chapter 453 of NRS is hereby amended by adding
42 thereto the provisions set forth as sections 3 to 26, inclusive of this
43 act.

44 **Sec. 3.** *As used in sections 3 to 26, inclusive, of this act,*
45 *unless the context otherwise requires, the words and terms defined*



1 *in sections 4 to 10, inclusive, of this act have the meanings*
2 *ascribed to them in those sections.*

3 **Sec. 4.** *“Attending physician” means the physician who has*
4 *primary responsibility for the treatment of a terminal condition*
5 *from which a patient suffers.*

6 **Sec. 5.** *“Competent” means that a person has the ability to*
7 *make, communicate and understand the nature of decisions*
8 *concerning his or her health care.*

9 **Sec. 6.** *“Consulting physician” means a physician to whom a*
10 *patient is referred pursuant to subsection 5 of section 14 of this act*
11 *for confirmation of the diagnosis and prognosis of the patient and*
12 *that the patient is competent.*

13 **Sec. 7.** *“Division” means the Division of Public and*
14 *Behavioral Health of the Department of Health and Human*
15 *Services.*

16 **Sec. 8.** *“Health care facility” means any facility licensed*
17 *pursuant to chapter 449 of NRS.*

18 **Sec. 9.** *“Prescription” means an order given individually for*
19 *the person for whom prescribed, directly from the attending*
20 *physician to a pharmacist or indirectly by means of an order*
21 *signed by the attending physician or an electronic transmission*
22 *from the attending physician to a pharmacist.*

23 **Sec. 10.** *“Terminal condition” means an incurable and*
24 *irreversible condition that cannot be cured or modified by any*
25 *known current medical therapy or treatment and which will, in the*
26 *opinion of the attending physician, result in death within 6*
27 *months.*

28 **Sec. 10.5.** *The Legislature hereby finds and declares that:*

29 *1. Patients with terminal conditions who have suffered*
30 *prolonged and unbearable pain as well as the loss of physical*
31 *control at the end of their lives deserve the right to a peaceful and*
32 *dignified death.*

33 *2. Adults diagnosed to be within 6 months of death and of*
34 *sound mental health, as determined by at least two physicians,*
35 *should be allowed to request and receive medication that may be*
36 *self-administered by the patient to peacefully end his or her life.*

37 *3. Other states that have enacted laws that allow patients with*
38 *terminal conditions to choose a dignified death have found*
39 *improvements in palliative and hospice care, including that nearly*
40 *all of such patients participate in hospice care, and that such*
41 *patients are able to die at home surrounded by loved ones and*
42 *friends.*

43 *4. The provisions of sections 3 to 26, inclusive, of this act are*
44 *intended to provide the safeguards, procedures, written*
45 *requirements and reporting functions to allow a safe framework*



1 *for patients with terminal conditions to make a request to end their*
2 *lives so they may have control over their final days.*

3 **Sec. 11.** *A patient may request that his or her attending*
4 *physician prescribe a controlled substance that is designed to end*
5 *the life of the patient if the patient:*

6 *1. Is at least 18 years of age;*

7 *2. Has been diagnosed with a terminal condition by the*
8 *attending physician and at least one consulting physician;*

9 *3. Is a resident of this State;*

10 *4. Has made an informed and voluntary decision to end his*
11 *or her own life;*

12 *5. Is competent; and*

13 *6. Is not requesting the controlled substance because of*
14 *coercion or undue influence.*

15 **Sec. 12.** *1. A patient who wishes to obtain a prescription for*
16 *a controlled substance that is designed to end his or her life must:*

17 *(a) Make two verbal requests for the controlled substance to*
18 *his or her attending physician. The second verbal request must be*
19 *made at least 15 days after the first verbal request and at least 48*
20 *hours after the written request is delivered to the attending*
21 *physician pursuant to paragraph (b).*

22 *(b) Make a written request for the controlled substance in the*
23 *manner prescribed pursuant to section 13 of this act and deliver*
24 *the written request to the attending physician. The written request*
25 *for such a controlled substance must be signed by the patient and*
26 *two witnesses, neither of whom may be the attending physician. At*
27 *least one of the witnesses must be a person who is not:*

28 *(1) Related to the patient by blood, marriage or adoption;*

29 *(2) Entitled to any portion of the estate of the patient upon*
30 *death under a will or by operation of law; or*

31 *(3) An owner, operator or employee of a health care facility*
32 *where the patient is receiving treatment or is a resident.*

33 *(c) Provide to the attending physician proof that the patient is*
34 *a resident of this State, which may include, without limitation:*

35 *(1) A valid driver's license or other identification card*
36 *issued to the patient by this State;*

37 *(2) A voter registration card issued to the patient pursuant*
38 *to NRS 293.517; or*

39 *(3) Evidence that the patient owns or leases property in this*
40 *State.*

41 *2. If a patient resides in a facility for long-term care or a*
42 *facility for hospice care at the time the patient makes a written*
43 *request pursuant to this section, one of the witnesses described in*
44 *paragraph (b) of subsection 1 must be designated to serve as a*



1 *witness by the facility and may include, without limitation, an*
2 *ombudsman, a chaplain or a social worker.*

3 *3. As used in this section:*

4 *(a) "Facility for hospice care" has the meaning ascribed to it*
5 *in NRS 449.0033.*

6 *(b) "Facility for long-term care" has the meaning ascribed to*
7 *it in NRS 427A.028.*

8 **Sec. 13.** *A written request for a controlled substance that is*
9 *designed to end the life of a patient must be in substantially the*
10 *following form:*

11
12 ***REQUEST FOR A CONTROLLED SUBSTANCE***
13 ***THAT IS DESIGNED TO END MY LIFE***

14
15 *I,....., am an adult of sound mind.*

16
17 *I am suffering from....., which my*
18 *attending physician has determined is a terminal condition*
19 *and which has been medically confirmed by a consulting*
20 *physician.*

21
22 *I have been fully informed of my diagnosis, my*
23 *prognosis, the nature of the medication to be prescribed and*
24 *the potential associated risks and expected result of the*
25 *medication and the feasible alternatives, including comfort*
26 *care, hospice care and pain control.*

27
28 *I request that my attending physician prescribe a*
29 *controlled substance that I may self-administer to end my*
30 *life and authorize my attending physician to contact a*
31 *pharmacist to fill the prescription.*

32 ***INITIAL ONE:***

33
34 *..... I have informed my family of my decision and*
35 *taken their opinions into consideration.*

36
37 *..... I have decided not to inform my family of my*
38 *decision.*

39
40 *..... I have no family to inform of my decision.*

41
42 *I understand that I have the right to revoke this request*
43 *at any time.*



I understand the full import of this request, and I expect to die when I take the controlled substance to be prescribed. I further understand that although most deaths occur within 3 hours, my death may take longer and my attending physician has counseled me about this possibility.

I make this request voluntarily and without reservation, and I accept full moral responsibility for my actions.

Signed:

Dated:

DECLARATION OF WITNESSES

By initialing and signing below on or after the date the person named above signs, we declare that the person making and signing the above request:

Witness 1 Witness 2
Initials Initials

- 1. Is personally known to us or has provided proof of identity;*
- 2. Signed this request in our presence on the date of the person's signature;*
- 3. Appears to be of sound mind and not under duress, fraud or undue influence; and*
- 4. Is not a patient for whom either of us is the attending physician.*

Printed Name of Witness 1:

Signature of Witness 1/Date:

Printed Name of Witness 2:

Signature of Witness 2/Date:

NOTE: One witness must not be a relative by blood, marriage or adoption of the person signing this request, must not be entitled to any portion of the person's estate upon death and must not own, operate or be employed at a health care facility where the person is a patient or resident.



1 *If the patient is an inpatient at a facility for long-term care*
2 *or a facility for hospice care, one of the witnesses must be a*
3 *person designated by the facility.*

4 **Sec. 14.** *Before prescribing a controlled substance that is*
5 *designed to end the life of a patient, the attending physician of the*
6 *patient must:*

7 *1. Inform the patient that he or she may revoke a request for*
8 *the controlled substance at any time and provide the patient with*
9 *the opportunity to revoke his or her second verbal request made*
10 *pursuant to subsection 1 of section 12 of this act;*

11 *2. Determine and verify, after each verbal and written request*
12 *for the controlled substance made pursuant to subsection 1 of*
13 *section 12 of this act and immediately before writing the*
14 *prescription, that the patient meets the requirements of*
15 *subsections 4 and 5 of section 11 of this act;*

16 *3. Confirm that the patient meets the requirements of*
17 *subsection 6 of section 11 of this act by discussing with the patient,*
18 *outside the presence of all persons other than an interpreter, if*
19 *required, whether the patient is feeling coerced or unduly*
20 *influenced by another person;*

21 *4. Discuss with the patient:*

22 *(a) The diagnosis and prognosis of the patient;*

23 *(b) All available methods of treating or managing the terminal*
24 *condition of the patient, including, without limitation, comfort*
25 *care, hospice care and pain control;*

26 *(c) The probable effects of the controlled substance; and*

27 *(d) The importance of having another person present when the*
28 *patient self-administers the controlled substance;*

29 *5. Refer the patient to a consulting physician who is qualified*
30 *by reason of specialty or experience to diagnose the terminal*
31 *condition of the patient for examination and receive confirmation*
32 *from that physician of the diagnosis and prognosis of the patient*
33 *and that the patient meets the requirements of subsections 4 and 5*
34 *of section 11 of this act;*

35 *6. Instruct the patient against self-administering the*
36 *controlled substance in a public place; and*

37 *7. Recommend that the patient notify his or her next of kin of*
38 *the patient's decision to end his or her life.*

39 **Sec. 15.** *1. If the attending physician to whom a patient*
40 *makes a request for a controlled substance that is designed to end*
41 *the life of the patient or a consulting physician determines that the*
42 *patient may not be competent, the attending physician:*

43 *(a) Shall refer the patient for examination by a psychiatrist or*
44 *psychologist; and*



1 **(b) Must not prescribe a controlled substance that is designed**
2 **to end the life of the patient unless the psychiatrist or psychologist**
3 **concludes, based on the examination, that the patient is competent**
4 **to make a decision concerning whether to end his or her life.**

5 **2. If a patient is examined pursuant to subsection 1, the**
6 **psychiatrist or psychologist shall report to the attending physician**
7 **his or her determination regarding whether the patient is**
8 **competent to make a decision concerning whether to end his or**
9 **her life.**

10 **Sec. 16. 1. Except as otherwise provided in section 16.5 of**
11 **this act, the attending physician of a patient may prescribe a**
12 **controlled substance that is designed to end the life of the patient**
13 **after the attending physician has ensured that the requirements of**
14 **sections 11 to 15, inclusive, of this act have been met.**

15 **2. After an attending physician prescribes a controlled**
16 **substance that is designed to end the life of a patient, the attending**
17 **physician shall, with the written consent of the patient, contact a**
18 **pharmacist and inform the pharmacist of the prescription. After**
19 **the pharmacist has been notified, the attending physician shall**
20 **give the prescription directly to the pharmacist or electronically**
21 **transmit the prescription directly to the pharmacist.**

22 **3. A controlled substance that is designed to end the life of a**
23 **patient may only be dispensed by a registered pharmacist or by the**
24 **attending physician of the patient. A pharmacist may only**
25 **dispense such a controlled substance pursuant to a valid**
26 **prescription provided by an attending physician in accordance**
27 **with subsection 2 to:**

28 **(a) The patient;**

29 **(b) The attending physician who prescribed the controlled**
30 **substance; or**

31 **(c) An agent of the patient who has been expressly identified to**
32 **the pharmacist as such by the patient.**

33 **4. A pharmacist shall not dispense a controlled substance that**
34 **is designed to end the life of a patient by mail or any other delivery**
35 **service.**

36 **Sec. 16.5. An attending physician shall not prescribe a**
37 **controlled substance that is designed to end the life of a patient**
38 **based solely on the age or disability of the patient.**

39 **Sec. 17. 1. The attending physician of a patient who**
40 **requests a controlled substance that is designed to end the life of**
41 **the patient shall document in the medical record of the patient:**

42 **(a) Each request for such a controlled substance made by the**
43 **patient and each revocation of such a request;**

44 **(b) The diagnosis and the prognosis of the patient provided by**
45 **the attending physician;**



1 (c) Each determination made by the attending physician
2 concerning whether the patient meets the requirements of
3 subsections 4, 5 and 6 of section 11 of this act;

4 (d) Confirmation that:

5 (1) The attending physician offered the patient the
6 opportunity to revoke his or her second verbal request for the
7 controlled substance, as required by subsection 1 of section 14 of
8 this act; and

9 (2) The requirements set forth in sections 3 to 26, inclusive,
10 of this act have been satisfied; and

11 (e) The name, amount and dosage of any controlled substance
12 designed to end the life of the patient that the attending physician
13 prescribes for the patient.

14 2. A consulting physician shall report to the attending
15 physician of the patient and document in the medical record of the
16 patient his or her:

17 (a) Diagnosis and opinion regarding the prognosis of the
18 patient; and

19 (b) Determination concerning whether the patient meets the
20 requirements of subsections 4 and 5 of section 11 of this act.

21 3. A psychiatrist or psychologist to whom a patient is referred
22 pursuant to section 15 of this act shall document in the medical
23 record of the patient his or her determination of whether the
24 patient is competent to make a decision concerning whether to end
25 his or her life.

26 4. If a patient who has requested a controlled substance that
27 is designed to end his or her life changes his or her attending
28 physician, the prior attending physician must, upon the request of
29 the patient or the new attending physician, forward the medical
30 records of the patient to the new attending physician.

31 **Sec. 18.** 1. A patient who requests a controlled substance
32 that is designed to end his or her life may revoke the request at any
33 time, without regard to his or her age or physical or mental
34 condition.

35 2. The revocation of a request for such a controlled substance
36 becomes effective immediately upon the patient communicating
37 the revocation to his or her attending physician. When the patient
38 revokes such a request, the attending physician must document the
39 revocation in the medical record of the patient.

40 **Sec. 19.** 1. Only a patient to whom a controlled substance
41 designed to end his or her life is prescribed may administer the
42 controlled substance. No other person may administer the
43 controlled substance to the patient.



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1 2. *If any amount of a controlled substance that is designed to*
2 *end the life of a patient is not self-administered, it must be*
3 *disposed of in accordance with law.*

4 **Sec. 20.** *1. An attending physician who prescribes a*
5 *controlled substance that is designed to end the life of a patient*
6 *shall:*

7 (a) *Not more than 30 days after prescribing the controlled*
8 *substance, provide to the Division the name and amount of the*
9 *controlled substance prescribed and the purpose for which the*
10 *controlled substance was prescribed; and*

11 (b) *If the patient died from self-administering the controlled*
12 *substance, not more than 30 days after the death of the patient,*
13 *provide to the Division the age of the patient at death, his or her*
14 *level of education, race and sex, the type of insurance under*
15 *which the patient was covered, if any, and the terminal condition*
16 *from which the patient suffered.*

17 2. *A registered pharmacist who dispenses a controlled*
18 *substance that is designed to end the life of a patient shall, not*
19 *more than 30 days after dispensing the controlled substance,*
20 *provide to the Division the name and amount of the controlled*
21 *substance dispensed and the purpose for which the controlled*
22 *substance was dispensed.*

23 3. *The Division may adopt regulations requiring an attending*
24 *physician who prescribes a controlled substance that is designed to*
25 *end the life of a patient pursuant to section 16 of this act or a*
26 *registered pharmacist who dispenses such a controlled substance*
27 *to provide to the Division any other relevant information, except*
28 *that the Division may not require the reporting of any personally*
29 *identifiable information of a patient to whom a controlled*
30 *substance that is designed to end the life of the patient is*
31 *prescribed or dispensed.*

32 4. *Except as otherwise provided in section 20.5 of this act and*
33 *NRS 239.0115, any information or records submitted to the*
34 *Division pursuant to this section are confidential.*

35 **Sec. 20.5.** *The Division shall:*

36 1. *Compile an annual report concerning the implementation*
37 *of the provisions of sections 3 to 26, inclusive, of this act. The*
38 *report must include, for the immediately preceding calendar year:*

39 (a) *The number of patients to whom a controlled substance*
40 *that is designed to end the life of a patient was prescribed;*

41 (b) *The number of patients described in paragraph (a) who*
42 *died and the terminal conditions which were specified as the cause*
43 *of those deaths;*



* S B 2 6 1 R 1 *

1 (c) *The number of deaths in this State resulting from the*
2 *administration of a controlled substance that is designed to end*
3 *the life of a patient per 10,000 deaths in this State;*

4 (d) *The number of physicians who prescribed a controlled*
5 *substance that is designed to end the life of a patient;*

6 (e) *Demographic information for each patient whose death*
7 *was the result of self-administering a controlled substance that is*
8 *designed to end the life of the patient, including the age of the*
9 *patient at death, his or her level of education, race and sex, the*
10 *type of insurance under which the patient was covered, if any, and*
11 *the terminal condition from which the patient suffered; and*

12 (f) *The name of each such controlled substance prescribed to*
13 *end the life of each such patient and the frequency with which*
14 *each such controlled substance was prescribed for that purpose.*

15 2. *On or before February 1 of each year:*

16 (a) *Make the report compiled pursuant to subsection 1 publicly*
17 *available on the Internet website maintained by the Division; and*

18 (b) *Submit the report to the Director of the Legislative Counsel*
19 *Bureau for transmittal to the Legislative Committee on Health*
20 *Care, if the report is submitted in an even-numbered year, or to*
21 *the next session of the Legislature, if the report is submitted in an*
22 *odd-numbered year.*

23 **Sec. 21.** 1. *A physician is not subject to professional*
24 *discipline, does not violate any applicable standard of care and is*
25 *not subject to civil or criminal liability solely because the*
26 *physician takes any action in good faith to comply with sections 3*
27 *to 26, inclusive, of this act.*

28 2. *A psychiatrist or psychologist who examines a patient*
29 *pursuant to section 15 of this act is not subject to professional*
30 *discipline, does not violate any applicable standard of care and is*
31 *not subject to civil or criminal liability solely because he or she*
32 *concludes and reports to the attending physician that the patient is*
33 *competent or not competent.*

34 3. *A registered pharmacist is not subject to professional*
35 *discipline, does not violate any applicable standard of care and is*
36 *not subject to civil or criminal liability solely because the*
37 *pharmacist dispenses a controlled substance that is designed to*
38 *end the life of a patient in good faith to comply with section 16 of*
39 *this act.*

40 **Sec. 22.** 1. *Death resulting from a patient self-*
41 *administering a controlled substance that is designed to end his or*
42 *her life in accordance with the provisions of sections 3 to 26,*
43 *inclusive, of this act does not constitute suicide or homicide.*

44 2. *Any report or other document produced by this State, any*
45 *political subdivision of this State or any agency, board,*



1 *commission, department, officer, employee or agent of this State*
2 *must refer to a request for, acquisition of, prescription of,*
3 *dispensation of and self-administration of a controlled substance*
4 *that is designed to end the life of a patient as a request for,*
5 *acquisition of, prescription of, dispensation of and self-*
6 *administration, as applicable, of a controlled substance that is*
7 *designed to end the life of a patient.*

8 **Sec. 23.** 1. *A person shall not prevent or require a patient*
9 *to make or revoke a request for a controlled substance that is*
10 *designed to end the life of the patient as a condition of receiving*
11 *health care.*

12 2. *Any provision in any contract or agreement entered into on*
13 *or after the effective date of this act, whether written or oral, that*
14 *would affect the right of a patient to take any action in accordance*
15 *with the provisions of sections 3 to 26, inclusive, of this act is*
16 *unenforceable and void.*

17 **Sec. 24.** 1. *It is unlawful for any person to:*

18 (a) *Alter or forge a request for a controlled substance that is*
19 *designed to end the life of another person with the intent of*
20 *causing the death of the person;*

21 (b) *Coerce or exert undue influence on a person to:*

22 (1) *Request a controlled substance that is designed to end*
23 *the life of the person;*

24 (2) *Refrain from revoking a request for a controlled*
25 *substance that is designed to end the life of the person pursuant to*
26 *section 18 of this act; or*

27 (3) *Self-administer a controlled substance designed to end*
28 *the life of the person; or*

29 (c) *Willfully conceal, cancel, deface, obliterate or withhold*
30 *personal knowledge of the revocation by a person of a request for*
31 *a controlled substance that is designed to end the life of the*
32 *person.*

33 2. *Any person who violates this section is guilty of a category*
34 *A felony and shall be punished by imprisonment in the state*
35 *prison:*

36 (a) *For life with the possibility of parole, with eligibility for*
37 *parole beginning when a minimum of 5 years has been served; or*

38 (b) *For a definite term of 15 years, with eligibility for parole*
39 *beginning when a minimum of 5 years has been served.*

40 **Sec. 25.** *The provisions of sections 3 to 26, inclusive, of this*
41 *act do not:*

42 1. *Require an attending physician to prescribe a controlled*
43 *substance that is designed to end the life of a patient or require a*
44 *pharmacist to fill a prescription for or dispense such a controlled*
45 *substance;*



1 2. *Affect the responsibility of a physician to provide treatment*
2 *for a patient's comfort or alleviation of pain; or*

3 3. *Condone, authorize or approve mercy killing, euthanasia*
4 *or assisted suicide.*

5 **Sec. 26.** *1. The owner or operator of a health care facility*
6 *may prohibit:*

7 (a) *Any employee or independent contractor of the health care*
8 *facility from providing any services described in sections 3 to 26,*
9 *inclusive, of this act while acting within the scope of his or her*
10 *employment or contract, as applicable, with the health care*
11 *facility; or*

12 (b) *Any other person, including, without limitation, an*
13 *employee or independent contractor of the health care facility or*
14 *another health care provider who provides services on the*
15 *premises of the health care facility, from providing any services*
16 *described in sections 3 to 26, inclusive, of this act on the premises*
17 *of the health care facility.*

18 2. *An owner or operator of a health care facility who*
19 *prohibits any person from providing services described in sections*
20 *3 to 26, inclusive, of this act shall provide notice of the prohibition*
21 *to:*

22 (a) *Each employee and independent contractor of the health*
23 *care facility; and*

24 (b) *Each health care provider not described in paragraph (a)*
25 *who provides services on the premises of the health care facility,*
26 *including, without limitation, through telehealth as defined in*
27 *NRS 629.515.*

28 3. *The owner or operator of a health care facility may take*
29 *any action authorized by law or authorized pursuant to any*
30 *applicable rule, policy, procedure or contract against any person*
31 *who provides a service prohibited by the owner or operator in*
32 *compliance with subsection 1 while acting within the scope of his*
33 *or her employment or contract, as applicable, or on the premises*
34 *of the health care facility.*

35 **Sec. 27.** NRS 453.256 is hereby amended to read as follows:

36 453.256 1. Except as otherwise provided in subsection 2, a
37 substance included in schedule II must not be dispensed without the
38 written prescription of a practitioner.

39 2. A controlled substance included in schedule II may be
40 dispensed without the written prescription of a practitioner only:

41 (a) In an emergency, as defined by regulation of the Board, upon
42 oral prescription of a practitioner, reduced to writing promptly and
43 in any case within 72 hours, signed by the practitioner and filed by
44 the pharmacy.



* S B 2 6 1 R 1 *

1 (b) Pursuant to an electronic prescription of a practitioner which
2 complies with any regulations adopted by the Board concerning the
3 use of electronic prescriptions.

4 (c) Upon the use of a facsimile machine to transmit the
5 prescription for a substance included in schedule II by a practitioner
6 or a practitioner's agent to a pharmacy for:

7 (1) Direct administration to a patient by parenteral solution;
8 or

9 (2) A resident of a facility for intermediate care or a facility
10 for skilled nursing which is licensed as such by the Division of
11 Public and Behavioral Health of the Department.

12 ➔ A prescription transmitted by a facsimile machine pursuant to
13 this paragraph must be printed on paper which is capable of being
14 retained for at least 2 years. For the purposes of this section, an
15 electronic prescription or a prescription transmitted by facsimile
16 machine constitutes a written prescription. The pharmacy shall keep
17 prescriptions in conformity with the requirements of NRS 453.246.
18 A prescription for a substance included in schedule II must not be
19 refilled.

20 3. Except when dispensed directly by a practitioner, other than
21 a pharmacy, to an ultimate user, a substance included in schedule III
22 or IV which is a dangerous drug as determined under NRS 454.201,
23 must not be dispensed without a written or oral prescription of a
24 practitioner. The prescription must not be filled or refilled more than
25 6 months after the date thereof or be refilled more than five times,
26 unless renewed by the practitioner.

27 4. A substance included in schedule V may be distributed or
28 dispensed only for a medical purpose, including medical treatment
29 or authorized research.

30 5. A practitioner may dispense or deliver a controlled
31 substance to or for a person or animal only for medical treatment or
32 authorized research in the ordinary course of his or her profession.

33 6. No civil or criminal liability or administrative sanction may
34 be imposed on a pharmacist for action taken in good faith in reliance
35 on a reasonable belief that an order purporting to be a prescription
36 was issued by a practitioner in the usual course of professional
37 treatment or in authorized research.

38 7. An individual practitioner may not dispense a substance
39 included in schedule II, III or IV for the practitioner's own personal
40 use except in a medical emergency.

41 8. A person who violates this section is guilty of a category E
42 felony and shall be punished as provided in NRS 193.130.

43 9. As used in this section:

44 (a) "Facsimile machine" means a device which sends or receives
45 a reproduction or facsimile of a document or photograph which is



1 transmitted electronically or telephonically by telecommunications
2 lines.

3 (b) "Medical treatment" includes ~~dispensing~~ :

4 (1) *Dispensing* or administering a narcotic drug for pain,
5 whether or not intractable ~~+~~; and

6 (2) *Dispensing a controlled substance designed to end the*
7 *life of a patient pursuant to the provisions of sections 3 to 26,*
8 *inclusive, of this act.*

9 (c) "Parenteral solution" has the meaning ascribed to it in
10 NRS 639.0105.

11 **Sec. 28.** NRS 453.375 is hereby amended to read as follows:

12 453.375 1. ~~+~~ *Except as otherwise provided in section 19 of*
13 *this act, a* controlled substance may be possessed and administered
14 by the following persons:

15 (a) A practitioner.

16 (b) A registered nurse licensed to practice professional nursing
17 or licensed practical nurse, at the direction of a physician, physician
18 assistant, dentist, podiatric physician or advanced practice registered
19 nurse, or pursuant to a chart order, for administration to a patient at
20 another location.

21 (c) A paramedic:

22 (1) As authorized by regulation of:

23 (I) The State Board of Health in a county whose
24 population is less than 100,000; or

25 (II) A county or district board of health in a county whose
26 population is 100,000 or more; and

27 (2) In accordance with any applicable regulations of:

28 (I) The State Board of Health in a county whose
29 population is less than 100,000;

30 (II) A county board of health in a county whose
31 population is 100,000 or more; or

32 (III) A district board of health created pursuant to NRS
33 439.362 or 439.370 in any county.

34 (d) A respiratory therapist, at the direction of a physician or
35 physician assistant.

36 (e) A medical student, student in training to become a physician
37 assistant or student nurse in the course of his or her studies at an
38 accredited college of medicine or approved school of professional or
39 practical nursing, at the direction of a physician or physician
40 assistant and:

41 (1) In the presence of a physician, physician assistant or a
42 registered nurse; or

43 (2) Under the supervision of a physician, physician assistant
44 or a registered nurse if the student is authorized by the college or



1 school to administer the substance outside the presence of a
2 physician, physician assistant or nurse.

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

7 (f) An ultimate user or any person whom the ultimate user
8 designates pursuant to a written agreement.

9 (g) Any person designated by the head of a correctional
10 institution.

11 (h) A veterinary technician at the direction of his or her
12 supervising veterinarian.

13 (i) In accordance with applicable regulations of the State Board
14 of Health, an employee of a residential facility for groups, as
15 defined in NRS 449.017, pursuant to a written agreement entered
16 into by the ultimate user.

17 (j) In accordance with applicable regulations of the State Board
18 of Pharmacy, an animal control officer, a wildlife biologist or an
19 employee designated by a federal, state or local governmental
20 agency whose duties include the control of domestic, wild and
21 predatory animals.

22 (k) A person who is enrolled in a training program to become a
23 paramedic, respiratory therapist or veterinary technician if the
24 person possesses and administers the controlled substance in the
25 same manner and under the same conditions that apply, respectively,
26 to a paramedic, respiratory therapist or veterinary technician who
27 may possess and administer the controlled substance, and under the
28 direct supervision of a person licensed or registered to perform the
29 respective medical art or a supervisor of such a person.

30 2. As used in this section, "accredited college of medicine"
31 means:

32 (a) A medical school that is accredited by the Liaison
33 Committee on Medical Education of the American Medical
34 Association and the Association of American Medical Colleges or
35 their successor organizations; or

36 (b) A school of osteopathic medicine, as defined in
37 NRS 633.121.

38 **Sec. 29.** NRS 133.065 is hereby amended to read as follows:

39 133.065 **1.** Except *as otherwise provided in subsection 2 or*
40 to the extent that it violates public policy, a testator may:

41 ~~H~~ **(a)** Make a devise conditional upon a devisee's action or
42 failure to take action or upon the occurrence or nonoccurrence of
43 one or more specified events; and

44 ~~F~~ **(b)** Specify the conditions or actions which would
45 disqualify a person from serving or which would constitute cause



1 for removal of a person who is serving in any capacity under the
2 will, including, without limitation, as a personal representative,
3 guardian or trustee.

4 *2. Any provision in a will executed on or after the effective*
5 *date of this act that conditions a devise on any person requesting*
6 *or failing to request a controlled substance designed to end his or*
7 *her life, revoking such a request or self-administering such a*
8 *controlled substance in accordance with the provisions of sections*
9 *3 to 26, inclusive, of this act is unenforceable and void.*

10 **Sec. 30.** NRS 159.054 is hereby amended to read as follows:

11 159.054 1. If the court finds the proposed ward competent
12 and not in need of a guardian, the court shall dismiss the petition.

13 2. If the court finds the proposed ward to be of limited capacity
14 and in need of a special guardian, the court shall enter an order
15 accordingly and specify the powers and duties of the special
16 guardian.

17 3. If the court finds that appointment of a general guardian is
18 required, the court shall appoint a general guardian of the ward's
19 person, estate, or person and estate.

20 *4. A proposed ward shall not be deemed to be in need of a*
21 *general or special guardian based solely upon a request by the*
22 *proposed ward for a controlled substance that is designed to end*
23 *his or her life or the revocation of such a request if made in*
24 *accordance with the provisions of sections 3 to 26, inclusive, of*
25 *this act.*

26 **Sec. 31.** NRS 239.010 is hereby amended to read as follows:

27 239.010 1. Except as otherwise provided in this section and
28 NRS 1.4683, 1.4687, 1A.110, 41.071, 49.095, 62D.420, 62D.440,
29 62E.516, 62E.620, 62H.025, 62H.030, 62H.170, 62H.220, 62H.320,
30 75A.100, 75A.150, 76.160, 78.152, 80.113, 81.850, 82.183, 86.246,
31 86.54615, 87.515, 87.5413, 87A.200, 87A.580, 87A.640, 88.3355,
32 88.5927, 88.6067, 88A.345, 88A.7345, 89.045, 89.251, 90.730,
33 91.160, 116.757, 116A.270, 116B.880, 118B.026, 119.260,
34 119.265, 119.267, 119.280, 119A.280, 119A.653, 119B.370,
35 119B.382, 120A.690, 125.130, 125B.140, 126.141, 126.161,
36 126.163, 126.730, 127.007, 127.057, 127.130, 127.140, 127.2817,
37 130.312, 130.712, 136.050, 159.044, 172.075, 172.245, 176.015,
38 176.0625, 176.09129, 176.156, 176A.630, 178.39801, 178.4715,
39 178.5691, 179.495, 179A.070, 179A.165, 179A.450, 179D.160,
40 200.3771, 200.3772, 200.5095, 200.604, 202.3662, 205.4651,
41 209.392, 209.3925, 209.419, 209.521, 211A.140, 213.010, 213.040,
42 213.095, 213.131, 217.105, 217.110, 217.464, 217.475, 218A.350,
43 218E.625, 218F.150, 218G.130, 218G.240, 218G.350, 228.270,
44 228.450, 228.495, 228.570, 231.069, 231.1473, 233.190, 237.300,
45 239.0105, 239.0113, 239B.030, 239B.040, 239B.050, 239C.140,



1 239C.210, 239C.230, 239C.250, 239C.270, 240.007, 241.020,
2 241.030, 241.039, 242.105, 244.264, 244.335, 250.087, 250.130,
3 250.140, 250.150, 268.095, 268.490, 268.910, 271A.105, 281.195,
4 281A.350, 281A.440, 281A.550, 284.4068, 286.110, 287.0438,
5 289.025, 289.080, 289.387, 289.830, 293.5002, 293.503, 293.558,
6 293B.135, 293D.510, 331.110, 332.061, 332.351, 333.333, 333.335,
7 338.070, 338.1379, 338.16925, 338.1725, 338.1727, 348.420,
8 349.597, 349.775, 353.205, 353A.049, 353A.085, 353A.100,
9 353C.240, 360.240, 360.247, 360.255, 360.755, 361.044, 361.610,
10 365.138, 366.160, 368A.180, 372A.080, 378.290, 378.300, 379.008,
11 385A.830, 385B.100, 387.626, 387.631, 388.1455, 388.259,
12 388.501, 388.503, 388.513, 388.750, 391.035, 392.029, 392.147,
13 392.264, 392.271, 392.850, 394.167, 394.1698, 394.447, 394.460,
14 394.465, 396.3295, 396.405, 396.525, 396.535, 398.403, 408.3885,
15 408.3886, 408.3888, 408.5484, 412.153, 416.070, 422.2749,
16 422.305, 422A.342, 422A.350, 425.400, 427A.1236, 427A.872,
17 432.205, 432B.175, 432B.280, 432B.290, 432B.407, 432B.430,
18 432B.560, 433.534, 433A.360, 439.840, 439B.420, 440.170,
19 441A.195, 441A.220, 441A.230, 442.330, 442.395, 445A.665,
20 445B.570, 449.209, 449.245, 449.720, 450.140, 453.164, 453.720,
21 453A.610, 453A.700, 458.055, 458.280, 459.050, 459.3866,
22 459.555, 459.7056, 459.846, 463.120, 463.15993, 463.240,
23 463.3403, 463.3407, 463.790, 467.1005, 480.365, 481.063, 482.170,
24 482.5536, 483.340, 483.363, 483.575, 483.659, 483.800, 484E.070,
25 485.316, 503.452, 522.040, 534A.031, 561.285, 571.160, 584.655,
26 587.877, 598.0964, 598.098, 598A.110, 599B.090, 603.070,
27 603A.210, 604A.710, 612.265, 616B.012, 616B.015, 616B.315,
28 616B.350, 618.341, 618.425, 622.310, 623.131, 623A.137, 624.110,
29 624.265, 624.327, 625.425, 625A.185, 628.418, 628B.230,
30 628B.760, 629.047, 629.069, 630.133, 630.30665, 630.336,
31 630A.555, 631.368, 632.121, 632.125, 632.405, 633.283, 633.301,
32 633.524, 634.212, 634.214, 634A.185, 635.158, 636.107, 637.085,
33 637B.288, 638.087, 638.089, 639.2485, 639.570, 640.075,
34 640A.220, 640B.730, 640C.400, 640C.745, 640C.760, 640D.190,
35 640E.340, 641.090, 641A.191, 641B.170, 641C.760, 642.524,
36 643.189, 644.446, 645.180, 645.625, 645A.050, 645A.082,
37 645B.060, 645B.092, 645C.220, 645C.225, 645D.130, 645D.135,
38 645E.300, 645E.375, 645G.510, 645H.320, 645H.330, 647.0945,
39 647.0947, 648.033, 648.197, 649.065, 649.067, 652.228, 654.110,
40 656.105, 661.115, 665.130, 665.133, 669.275, 669.285, 669A.310,
41 671.170, 673.430, 675.380, 676A.340, 676A.370, 677.243,
42 679B.122, 679B.152, 679B.159, 679B.190, 679B.285, 679B.690,
43 680A.270, 681A.440, 681B.260, 681B.410, 681B.540, 683A.0873,
44 685A.077, 686A.289, 686B.170, 686C.306, 687A.110, 687A.115,
45 687C.010, 688C.230, 688C.480, 688C.490, 692A.117, 692C.190,



1 692C.3536, 692C.3538, 692C.354, 692C.420, 693A.480, 693A.615,
2 696B.550, 703.196, 704B.320, 704B.325, 706.1725, 706A.230,
3 710.159, 711.600, *and section 20 of this act*, sections 35, 38 and 41
4 of chapter 478, Statutes of Nevada 2011 and section 2 of chapter
5 391, Statutes of Nevada 2013 and unless otherwise declared by law
6 to be confidential, all public books and public records of a
7 governmental entity must be open at all times during office hours to
8 inspection by any person, and may be fully copied or an abstract or
9 memorandum may be prepared from those public books and public
10 records. Any such copies, abstracts or memoranda may be used to
11 supply the general public with copies, abstracts or memoranda of the
12 records or may be used in any other way to the advantage of the
13 governmental entity or of the general public. This section does not
14 supersede or in any manner affect the federal laws governing
15 copyrights or enlarge, diminish or affect in any other manner the
16 rights of a person in any written book or record which is
17 copyrighted pursuant to federal law.

18 2. A governmental entity may not reject a book or record
19 which is copyrighted solely because it is copyrighted.

20 3. A governmental entity that has legal custody or control of a
21 public book or record shall not deny a request made pursuant to
22 subsection 1 to inspect or copy or receive a copy of a public book or
23 record on the basis that the requested public book or record contains
24 information that is confidential if the governmental entity can
25 redact, delete, conceal or separate the confidential information from
26 the information included in the public book or record that is not
27 otherwise confidential.

28 4. A person may request a copy of a public record in any
29 medium in which the public record is readily available. An officer,
30 employee or agent of a governmental entity who has legal custody
31 or control of a public record:

32 (a) Shall not refuse to provide a copy of that public record in a
33 readily available medium because the officer, employee or agent has
34 already prepared or would prefer to provide the copy in a different
35 medium.

36 (b) Except as otherwise provided in NRS 239.030, shall, upon
37 request, prepare the copy of the public record and shall not require
38 the person who has requested the copy to prepare the copy himself
39 or herself.

40 **Sec. 32.** (Deleted by amendment.)

41 **Sec. 33.** (Deleted by amendment.)

42 **Sec. 34.** NRS 639.1375 is hereby amended to read as follows:

43 639.1375 1. Subject to the limitations set forth in NRS
44 632.237 *H and except as otherwise provided in section 16 of this*
45 *act*, an advanced practice registered nurse may dispense controlled



1 substances, poisons, dangerous drugs and devices if the advanced
2 practice registered nurse:

3 (a) Passes an examination administered by the State Board of
4 Nursing on Nevada law relating to pharmacy and submits to the
5 State Board of Pharmacy evidence of passing that examination;

6 (b) Is authorized to do so by the State Board of Nursing in a
7 license issued by that Board; and

8 (c) Applies for and obtains a certificate of registration from the
9 State Board of Pharmacy and pays the fee set by a regulation
10 adopted by the Board. The Board may set a single fee for the
11 collective certification of advanced practice registered nurses in
12 the employ of a public or nonprofit agency and a different fee for
13 the individual certification of other advanced practice registered
14 nurses.

15 2. The State Board of Pharmacy shall consider each application
16 from an advanced practice registered nurse separately, and may:

17 (a) Issue a certificate of registration limiting:

18 (1) The authority of the advanced practice registered nurse to
19 dispense controlled substances, poisons, dangerous drugs and
20 devices;

21 (2) The area in which the advanced practice registered nurse
22 may dispense;

23 (3) The kind and amount of controlled substances, poisons,
24 dangerous drugs and devices which the certificate permits the
25 advanced practice registered nurse to dispense; and

26 (4) The practice of the advanced practice registered nurse
27 which involves controlled substances, poisons, dangerous drugs and
28 devices in any manner which the Board finds necessary to protect
29 the health, safety and welfare of the public;

30 (b) Issue a certificate of registration without any limitation not
31 contained in the license issued by the State Board of Nursing; or

32 (c) Refuse to issue a certificate of registration, regardless of the
33 provisions of the license issued by the State Board of Nursing.

34 3. If a certificate of registration issued pursuant to this section
35 is suspended or revoked, the Board may also suspend or revoke the
36 registration of the physician for and with whom the advanced
37 practice registered nurse is in practice to dispense controlled
38 substances.

39 4. The Board shall adopt regulations setting forth the maximum
40 amounts of any controlled substance, poison, dangerous drug and
41 devices which an advanced practice registered nurse who holds a
42 certificate from the Board may dispense, the conditions under which
43 they must be stored, transported and safeguarded, and the records
44 which each such nurse shall keep. In adopting its regulations, the
45 Board shall consider:



1 (a) The areas in which an advanced practice registered nurse
2 who holds a certificate from the Board can be expected to practice
3 and the populations of those areas;

4 (b) The experience and training of the advanced practice
5 registered nurse;

6 (c) Distances between areas of practice and the nearest hospitals
7 and physicians;

8 (d) Whether the advanced practice registered nurse is authorized
9 to prescribe a controlled substance listed in schedule II pursuant to a
10 protocol approved by a collaborating physician;

11 (e) Effects on the health, safety and welfare of the public; and

12 (f) Other factors which the Board considers important to the
13 regulation of the practice of advanced practice registered nurses who
14 hold certificates from the Board.

15 **Sec. 35.** NRS 639.238 is hereby amended to read as follows:

16 639.238 1. Prescriptions filled and on file in a pharmacy are
17 not a public record. Except as otherwise provided in NRS 439.538
18 and 639.2357, *and section 20 of this act*, a pharmacist shall not
19 divulge the contents of any prescription or provide a copy of any
20 prescription, except to:

21 (a) The patient for whom the original prescription was issued;

22 (b) The practitioner who originally issued the prescription;

23 (c) A practitioner who is then treating the patient;

24 (d) A member, inspector or investigator of the Board or an
25 inspector of the Food and Drug Administration or an agent of the
26 Investigation Division of the Department of Public Safety;

27 (e) An agency of state government charged with the
28 responsibility of providing medical care for the patient;

29 (f) An insurance carrier, on receipt of written authorization
30 signed by the patient or his or her legal guardian, authorizing the
31 release of such information;

32 (g) Any person authorized by an order of a district court;

33 (h) Any member, inspector or investigator of a professional
34 licensing board which licenses a practitioner who orders
35 prescriptions filled at the pharmacy;

36 (i) Other registered pharmacists for the limited purpose of and to
37 the extent necessary for the exchange of information relating to
38 persons who are suspected of:

39 (1) Misusing prescriptions to obtain excessive amounts of
40 drugs; or

41 (2) Failing to use a drug in conformity with the directions for
42 its use or taking a drug in combination with other drugs in a manner
43 that could result in injury to that person;

44 (j) A peace officer employed by a local government for the
45 limited purpose of and to the extent necessary:



1 (1) For the investigation of an alleged crime reported by an
2 employee of the pharmacy where the crime was committed; or

3 (2) To carry out a search warrant or subpoena issued
4 pursuant to a court order; or

5 (k) A county coroner, medical examiner or investigator
6 employed by an office of a county coroner for the purpose of:

7 (1) Identifying a deceased person;

8 (2) Determining a cause of death; or

9 (3) Performing other duties authorized by law.

10 2. Any copy of a prescription for a controlled substance or a
11 dangerous drug as defined in chapter 454 of NRS that is issued to a
12 county coroner, medical examiner or investigator employed by an
13 office of a county coroner must be limited to a copy of the
14 prescription filled or on file for:

15 (a) The person whose name is on the container of the controlled
16 substance or dangerous drug that is found on or near the body of a
17 deceased person; or

18 (b) The deceased person whose cause of death is being
19 determined.

20 3. Except as otherwise provided in NRS 639.2357, any copy of
21 a prescription for a controlled substance or a dangerous drug as
22 defined in chapter 454 of NRS, issued to a person authorized by this
23 section to receive such a copy, must contain all of the information
24 appearing on the original prescription and be clearly marked on its
25 face "Copy, Not Refillable—For Reference Purposes Only." The
26 copy must bear the name or initials of the registered pharmacist who
27 prepared the copy.

28 4. If a copy of a prescription for any controlled substance or a
29 dangerous drug as defined in chapter 454 of NRS is furnished to the
30 customer, the original prescription must be voided and notations
31 made thereon showing the date and the name of the person to whom
32 the copy was furnished.

33 5. As used in this section, "peace officer" does not include:

34 (a) A member of the Police Department of the Nevada System
35 of Higher Education.

36 (b) A school police officer who is appointed or employed
37 pursuant to NRS 391.281.

38 **Sec. 36.** Chapter 688A of NRS is hereby amended by adding
39 thereto a new section to read as follows:

40 ***An insurer shall not:***

41 ***1. Deny a claim under a policy of life insurance or annuity***
42 ***contract, cancel a policy of life insurance or annuity contract or***
43 ***impose an additional charge on a policyholder or beneficiary***
44 ***solely because the insured has, in accordance with the provisions***
45 ***of sections 3 to 26, inclusive, of this act, requested a controlled***



1 *substance designed to end the life of the insured, revoked such a*
2 *request or self-administered such a controlled substance.*

3 *2. Refuse to sell, provide or issue a policy of life insurance or*
4 *annuity contract that covers a person or charge a higher rate to*
5 *cover a person solely because the person has, in accordance with*
6 *the provisions of sections 3 to 26, inclusive, of this act, requested a*
7 *controlled substance designed to end the life of the person or*
8 *revoked such a request.*

9 **Sec. 37.** Chapter 688B of NRS is hereby amended by adding
10 thereto a new section to read as follows:

11 *An insurer shall not:*

12 *1. Deny a claim under a policy of group life insurance,*
13 *cancel a policy of group life insurance or impose an additional*
14 *charge on a policyholder or beneficiary solely because the insured*
15 *has, in accordance with the provisions of sections 3 to 26,*
16 *inclusive, of this act, requested a controlled substance designed to*
17 *end the life of the insured, revoked such a request or self-*
18 *administered such a controlled substance.*

19 *2. Refuse to sell, provide or issue a policy of group life*
20 *insurance that covers a person or charge a higher rate to cover a*
21 *person solely because the person has, in accordance with the*
22 *provisions of sections 3 to 26, inclusive, of this act, requested a*
23 *controlled substance designed to end the life of the person or*
24 *revoked such a request.*

25 **Sec. 38.** NRS 688B.040 is hereby amended to read as follows:

26 688B.040 No policy of group life insurance shall be delivered
27 in this State unless it contains in substance the provisions set forth in
28 NRS 688B.040 to 688B.150, inclusive, *and section 37 of this act* or
29 provisions which in the opinion of the Commissioner are more
30 favorable to the persons insured, or at least as favorable to the
31 persons insured and more favorable to the policyholder; except:

32 1. NRS 688B.100 to 688B.140, inclusive, *and section 37 of*
33 *this act* do not apply to policies issued to a creditor to insure debtors
34 of such creditor;

35 2. The standard provisions required for individual life
36 insurance policies do not apply to group life insurance policies; and

37 3. If the group life insurance policy is on a plan of insurance
38 other than the term plan, it shall contain a nonforfeiture provision or
39 provisions which in the opinion of the Commissioner is or are
40 equitable to the insured persons and to the policyholder; but nothing
41 in this subsection shall be construed to require that group life
42 insurance policies contain the same nonforfeiture provisions as are
43 required for individual life insurance policies.

44 **Sec. 39.** (Deleted by amendment.)

45 **Sec. 40.** (Deleted by amendment.)



- 1 **Sec. 41.** (Deleted by amendment.)
- 2 **Sec. 42.** (Deleted by amendment.)
- 3 **Sec. 43.** (Deleted by amendment.)
- 4 **Sec. 44.** (Deleted by amendment.)
- 5 **Sec. 45.** (Deleted by amendment.)
- 6 **Sec. 46.** (Deleted by amendment.)
- 7 **Sec. 47.** (Deleted by amendment.)
- 8 **Sec. 48.** (Deleted by amendment.)
- 9 **Sec. 49.** (Deleted by amendment.)
- 10 **Sec. 50.** (Deleted by amendment.)
- 11 **Sec. 51.** (Deleted by amendment.)
- 12 **Sec. 52.** (Deleted by amendment.)
- 13 **Sec. 53.** (Deleted by amendment.)
- 14 **Sec. 53.5.** The provisions of subsection 1 of NRS 218D.380
- 15 do not apply to any provision of this act which adds or revises a
- 16 requirement to submit a report to the Legislature.
- 17 **Sec. 54.** This act becomes effective upon passage and
- 18 approval.

