

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

**LCB File No. R075-98**

June 16, 1998

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

AUTHORITY: §§ 2-11, NRS 439.200, 457.065 and 457.240; § 12, NRS 439.200 and 457.065

**Section 1.** Chapter 457 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this regulation.

**Sec. 2.** *1. A medical laboratory that obtains a specimen of human tissue which, upon examination, shows evidence of cancer shall, within 10 working days after the date that the pathology report is completed, provide information concerning its findings to the state health officer using an electronic means approved by the state health officer or his designee.*

*2. The information provided by a medical laboratory pursuant to subsection 1 must include, without limitation:*

*(a) The name, address, date of birth, gender and social security number of the person from whom the specimen was obtained;*

*(b) The name and the address or telephone number of the physician who ordered the examination of the specimen;*

*(c) The name and the address or telephone number of the medical laboratory that examined the specimen;*

*(d) The final diagnosis from the pathology report; and*

*(e) Any other relevant information from the pathology report, including, without limitation:*

- (1) The anatomical site of the lesion;*
- (2) The size of the lesion;*
- (3) The stage of the disease and the grade of tumor;*
- (4) The lesion margin status, if available; and*
- (5) Lymphatic involvement, if available.*

**Sec. 3.** *1. Except as otherwise provided in subsection 3, a physician who has a case in which he diagnoses a patient as having cancer or provides treatment to a patient with cancer shall, within 10 working days after the date of the diagnosis or the date of the first treatment, provide information to the state health officer concerning the case on a form prescribed by the state health officer or his designee, or by an electronic means approved by the state health officer or his designee.*

*2. Information provided by a physician pursuant to subsection 1 must include, without limitation:*

*(a) The name, address, date of birth, gender, race or ethnicity, and social security number of the patient;*

*(b) The name and the address or telephone number of the physician making the report;*

*(c) The final diagnosis from the pathology report; and*

*(d) Any other relevant information from the pathology report, including, without limitation:*

- (1) The anatomical site of the lesion;*
- (2) The size of the lesion;*
- (3) The stage of the disease and the grade of tumor;*

*(4) The lesion margin status, if available; and*

*(5) Lymphatic involvement, if available.*

*3. A physician is not required to provide information pursuant to this section if the patient is directly referred to or has been previously admitted to a hospital, medical laboratory or other facility which is required to report similar information pursuant to this chapter.*

**Sec. 4.** NAC 457.010 is hereby amended to read as follows:

457.010 As used in NAC 457.010 to 457.150, inclusive, *and sections 2 and 3 of this regulation*, unless the context otherwise requires:

1. “Cancer” has the meaning ascribed to it in NRS 457.020.
2. “Health care facility” has the meaning ascribed to it in NRS 457.020.
3. “Health division” means the health division of the department of human resources.
4. “Malignant neoplasm” means a virulent or potentially virulent tumor, regardless of the tissue of origin.
5. *“Medical laboratory” has the meaning ascribed to it in NRS 652.060.*
6. *“Physician” means a physician licensed pursuant to chapter 630 or 633 of NRS.*
7. “Registry” means the office in which the state health officer conducts the program for reporting information on cancer and maintains records containing that information.

**Sec. 5.** NAC 457.050 is hereby amended to read as follows:

457.050 1. **[Information]** *Each health care facility shall provide to the state health officer information concerning malignant neoplasms [must be abstracted] by abstracting information on a form prescribed by the state health officer [.] or his designee.*

2. **[The]** *Except as otherwise provided in subsection 3, each health care facility shall abstract information [must be abstracted] in conformance with the standards for abstracting*

information concerning malignant neoplasms [set forth in the Cancer Program Manual, Edition of January 1991, published by] of the Commission on Cancer of the American College of Surgeons [A free] as set forth in the Registry Operations and Data Standards (ROADS) Manual, 1996 edition, which is hereby adopted by reference, and any subsequent revision or amendment to the standards established by the Commission on Cancer of the American College of Surgeons. A copy of the [edition] manual may be obtained from the American College of Surgeons, [55 East Erie Street,] 633 North Saint Clair Street, Chicago, Illinois [60611.] 60611-3211 for the price of \$25.

3. *The state health officer shall review any revision or amendment to the standards specified in subsection 2 to determine whether the revision or amendment is appropriate for this state. Ten days after the standards specified in subsection 2 are revised or amended, a health care facility shall abstract information in conformance with the revision or amendment unless the state health officer files an objection to the amendment or revision with the state board of health within 10 days after the standards are revised or amended.*

4. A health care facility which does not use the staff of the health division to abstract information from its records shall cause to have abstracted and reported to the health division the malignant neoplasms listed in NAC 457.040 in the manner required by this section.

[4.] 5. If a health care facility with 100 beds or more does not use the staff of the health division to abstract information from its records concerning malignant neoplasms, it shall cause to have abstracted and reported to the health division, pursuant to subsection [3,] 4, the malignant neoplasms listed in NAC 457.040 using an electronic means approved by the state health officer [,] or his designee, unless an exemption from this requirement is granted by the state health officer.

**Sec. 6.** NAC 457.060 is hereby amended to read as follows:

457.060 All documents in the possession of the registry which contain names of patients, physicians [or], hospitals *or medical laboratories* are confidential except the list of names of hospitals which report information to the registry [.] *and the list of names of medical laboratories which report information to the registry.*

**Sec. 7.** NAC 457.070 is hereby amended to read as follows:

457.070 Each employee of the health division who has access to confidential information of the registry shall comply with the following procedures for maintaining the confidentiality of that information:

1. All files containing confidential information, including , *without limitation*, the indexes for access to other files, must be locked when not in use.
2. *All files on a computer containing confidential information, including, without limitation, the indexes for access to other files, must be closed and protected by password when not in use.*
3. *Passwords created pursuant to subsection 2 must be changed at least every 30 days.*
4. All documents containing confidential information must be out of sight when an employee is away from his desk.
- [3.] 5. Keys to the office of the registry may be issued to and used only by employees so authorized by the state health officer.

[4.] 6. The doors to the registry must be locked at all times when the office is vacant.

**Sec. 8.** NAC 457.080 is hereby amended to read as follows:

457.080 Each employee of the health division who takes confidential information of the registry outside the offices of the division shall comply with the following procedures:

1. Any documents *or files on a computer* containing [the] *confidential* information must be kept in the employee's briefcase when the documents *or files on a computer* are not in use.

2. If the employee takes any such [documents] *document or file on a computer* home or to a hotel or motel, he must:

(a) Safeguard it to the greatest extent possible; and

(b) Protect it from view by unauthorized persons.

3. The contents of such a document *or file on a computer* must not be discussed with the employee's relatives or friends.

4. If a briefcase or other container with such a document *or computer file* is to be:

(a) Left in the employee's car, the container must be locked in the trunk of the car.

(b) Taken as baggage on an airplane, bus or other carrier, the container must be kept in the employee's possession and must not be checked with the carrier unless the size or weight of the container precludes its being retained in the employee's possession.

**Sec. 9.** NAC 457.120 is hereby amended to read as follows:

457.120 The state health officer *or person employed in the registry* may provide confidential medical information in the registry concerning a patient's medical treatment for cancer with any health care facility, or registry connected with the facility which has participated or is participating in treating that patient's illness if the person seeking the information:

1. Has been identified in the manner described in NAC 457.130;

2. Furnishes the employee of the registry with specific information, other than the patient's name, which is sufficient to identify the patient without using his name; and

3. Gives assurances to the employee of the registry that the confidentiality of the information will be maintained to the same extent as is required in NAC 457.010 to 457.150, inclusive.

**Sec. 10.** NAC 457.140 is hereby amended to read as follows:

457.140 1. A person who desires to use the confidential records of individual patients or the statistical data of the registry for the purpose of scientific research into cancer must apply in writing to the state health officer. The applicant must:

(a) Set forth in his application:

(1) His qualifications as an epidemiologist, physician or employee of a bona fide program of research into cancer or other qualification for using confidential information and statistical data in the registry; and

(2) A description of the research project in which that information will be used.

(b) Sign a statement, on a form furnished by the state health officer [,] *or his designee*, in which the applicant agrees not to make any copies of the records, and to maintain the confidentiality of the information in the records in the manner required by NAC 457.010 to 457.150, inclusive.

(c) Agree to submit to the state health officer *or his designee* for review and approval any proposed publication which is based on or contains information obtained from the registry.

2. The state health officer *or his designee* must:

(a) Before a researcher is allowed access to information in the registry, make a written finding that he is qualified as a researcher and has a need for the information; and

(b) Before any material based on or containing information from the registry is published by the researcher, examine and give written approval for the proposed publication.

**Sec. 11.** NAC 457.150 is hereby amended to read as follows:

457.150 The state health officer shall charge and collect from:

1. A health care facility, a fee of [~~\$20~~] \$30 for each abstract prepared by the health division from the records of the health care facility and a fee of [~~\$6~~] \$10 for each abstract prepared by the health care facility from its own records.

2. A medical researcher or other person who obtains information from the registry, a fee of [~~\$25~~] \$35 or the actual cost of furnishing the information, whichever is larger.

**Sec. 12.** NAC 457.293 is hereby amended to read as follows:

457.293 1. A holder of a certificate or an applicant for a certificate who has reason to believe that an action taken by the health division pursuant to NAC 457.200 to 457.480, inclusive, is incorrect or based on inadequate knowledge may, within 10 business days after receiving notice of the action, request an informal discussion with the employee responsible for the action and the immediate supervisor of the employee.

2. If the informal discussion does not resolve the problem, the aggrieved person may, within 10 business days after the date scheduled for the informal discussion, submit a written request to the bureau for an informal conference. The informal conference must be scheduled for a date, place and time mutually agreed upon by the aggrieved person and the bureau, except that the informal conference must be held no later than 60 days after the date on which the bureau received the request.

3. Except as otherwise provided in subsection 4, the determination of the bureau resulting from the informal conference cannot be appealed and is the final remedy available to the aggrieved person.

4. An applicant for or holder of a certificate issued pursuant to NAC 457.200 to 457.480, inclusive, who is aggrieved by an action of the health division relating to the denial of an application for or renewal of such a certificate, the withdrawal, suspension or revocation of such a certificate or the assessment of an administrative fine may appeal that action in accordance with NAC 439.300 to 439.395, inclusive, after exhausting the informal procedures set forth in this section, except that the bureau may waive the informal procedures, or any portion thereof, by giving written notice to the aggrieved person.

5. As used in this section, “bureau” means the bureau of health protection services of the health division [of the department of human resources] or its successor.