

**LCB File No. R167-09**

**PROPOSED REGULATION OF THE  
BOARD OF MEDICAL EXAMINERS**

**REGULATIONS OF PHYSICIANS AND PHYSICIAN ASSISTANTS  
RELATING TO MEDICAL ASSISTANTS**

**Sec. 1. NAC 630.230 shall be amended to read as follows:**

1. A person who is licensed as a physician or physician assistant shall not:

(a) Falsify records of health care;

(b) Falsify the medical records of a hospital so as to indicate his presence at a time when he was not in attendance or falsify those records to indicate that procedures were performed by him which were in fact not performed by him;

(c) Render professional services to a patient while the physician or physician assistant is under the influence of alcohol or any controlled substance or is in any impaired mental or physical condition;

(d) Acquire any controlled substances from any pharmacy or other source by misrepresentation, fraud, deception or subterfuge;

(e) Prescribe anabolic steroids for any person to increase muscle mass for competitive or athletic purposes;

(f) Make an unreasonable additional charge for tests in a laboratory, radiological services or other services for testing which are ordered by the physician or physician assistant and performed outside his own office;

(g) Prescribe controlled substances listed in schedule II pursuant to NAC 453.520 or schedule III pursuant to NAC 453.530, controlled substance analogs, chorionic gonadotrophic hormones, thyroid preparations or thyroid synthetics for the control of weight;

(h) Allow any person to act as a medical assistant in the treatment of a patient of the physician or physician assistant, unless the medical assistant has sufficient training to provide the assistance;

(i) Fail to provide adequate supervision of a medical assistant who is employed or supervised by the physician or physician assistant;

(j) If the person is a physician, fail to provide adequate supervision of a physician assistant or an advanced practitioner of nursing;

(k) Fail to honor the advance directive of a patient without informing the patient or the surrogate or guardian of the patient, and without documenting in the patient's records the reasons for failing to honor the advance directive of the patient contained therein; or

(l) Engage in the practice of writing prescriptions for controlled substances to treat acute pain or chronic pain in a manner that deviates from the guidelines set forth in the Model Guidelines for the Use of Controlled Substances for the Treatment of Pain adopted by reference in NAC 630.187.

2. As used in this section:

(a) "Acute pain" has the meaning ascribed to it in section 3 of the Model Guidelines for the Use of Controlled Substances for the Treatment of Pain adopted by reference in NAC 630.187.

(b) "Chronic pain" has the meaning ascribed to it in section 3 of the Model Guidelines for the Use of Controlled Substances for the Treatment of Pain adopted by reference in NAC 630.187.

(c) “Controlled substance analog” means:

(1) A substance whose chemical structure is substantially similar to the chemical structure of a controlled substance listed in schedule II pursuant to NAC 453.520 or schedule III pursuant to NAC 453.530; or

(2) A substance which has, is represented as having or is intended to have a stimulant, depressant or hallucinogenic effect on the central nervous system of a person that is substantially similar to, or greater than, the stimulant, depressant or hallucinogenic effect on the central nervous system of a person of a controlled substance listed in schedule II pursuant to NAC 453.520 or schedule III pursuant to NAC 453.530.

~~[(d) “Medical assistant” means any person who:~~

- ~~— (1) Is employed by a physician or physician assistant;~~
- ~~— (2) Is under the direction and supervision of the physician or physician assistant;~~
- ~~— (3) Assists in the care of a patient; and~~
- ~~— (4) Is not required to be certified or licensed by an administrative agency to provide that assistance.]~~

**Sec. 2. NAC chapter 630 shall be amended to add the following new language:**

- 1. “Delegate” means to transfer authority for the performance of a medical task to a medical assistant.*
- 2. “Direct supervision” means oversight exercised by a delegating practitioner who is:  
(a) Personally treating the patient; and  
(b) In the presence of the medical assistant and the patient.*
- 3. “Medical assistant” means an unlicensed person to whom a physician or physician assistant has delegated the performance of a medical task pursuant to this regulation.*
- 4. “On-site supervision” means oversight of a medical assistant exercised by a delegating physician who is present at the site and able to be immediately available in person during the course of the performance of a delegated task. On-site supervision does not require the physician’s presence in the same room with the medical assistant.*
- 5. “Prescription drug” means a drug as defined in NRS 639.007.*

**Sec. 3. NAC chapter 630 shall be amended to add the following new language:**

- 1. A physician or physician assistant may delegate the performance of a medical task to a medical assistant where:  
(a) The physician or physician assistant knows that the medical assistant possesses the knowledge, skill, and training to safely and properly perform the medical task; and  
(b) The medical assistant would not be required to be certified or licensed by an administrative agency to perform that task.*
- 2. A physician or physician assistant shall not delegate a medical task that is not within the authority of that physician’s or physician assistant’s training, expertise, or normal scope of practice.*
- 3. A physician or physician assistant shall not transfer his responsibility for supervising a medical assistant in the performance of a delegated task, except to another physician or physician assistant who has knowingly accepted that responsibility.*
- 4. A physician or physician assistant shall not authorize or permit a medical assistant to whom a medical task is delegated to delegate the performance of that task to another person.*

*5. A physician or physician assistant must provide on-site supervision of a medical assistant for all delegated medical tasks except for the administration of prescription drugs that are not routine vaccinations or immunizations. A physician or physician assistant may delegate to a medical assistant the administration of routine vaccinations and immunizations subject to a written protocol as long as the physician or physician assistant provides on-site supervision of the medical assistant.*

*6. A physician or physician assistant must provide direct supervision to a medical assistant when the physician or physician assistant has delegated to a medical assistant the task of administering a prescription drug that is not a routine vaccination or immunization.*

*7. A physician may not delegate or otherwise allow a medical assistant to administer an anesthetic agent that would render the patient unconscious or semi-conscious.*

*8. The delegating physician or physician assistant retains responsibility for the safety, manner, and efficacy of the performance of the delegated task by the medical assistant.*