Senate Bill No. 91-Committee on Commerce and Labor

CHAPTER.....

AN ACT relating to medicine; changing the designation of physician's assistant; revising the scope of authority and duties of the board of medical examiners; providing for the issuance of special purpose licenses; requiring the board of medical examiners to regulate the practice of respiratory care; requiring practitioners of respiratory care to be licensed by the board of medical examiners; revising the qualifications and requirements relating to licensure of physicians and physicians' assistants; revising the duties and scope of authority of persons licensed by the board of medical examiners; making certain actions subject to disciplinary action by the board of medical examiners; revising provisions governing the imposition of disciplinary action against licensees; establishing and revising certain fees; increasing certain penalties; and providing other matters properly relating thereto.

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

Section 1. Chapter 630 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 9, inclusive, of this act.

Sec. 2. "Practice of respiratory care" includes:

- 1. Therapeutic and diagnostic use of medical gases, humidity and aerosols and the maintenance of associated apparatus;
- 2. The administration of drugs and medications to the cardiopulmonary system;

3. The provision of ventilatory assistance and control;

- 4. Postural drainage and percussion, breathing exercises and other respiratory rehabilitation procedures;
- 5. Cardiopulmonary resuscitation and maintenance of natural airways and the insertion and maintenance of artificial airways;
- 6. Carrying out the written orders of a physician, physician assistant, certified registered nurse anesthetist or an advanced practitioner of nursing relating to respiratory care;
- 7. Techniques for testing to assist in diagnosis, monitoring, treatment and research related to respiratory care, including the measurement of ventilatory volumes, pressures and flows, collection of blood and other specimens, testing of pulmonary functions and hemodynamic and other related physiological monitoring of the cardiopulmonary system; and

- 8. Training relating to the practice of respiratory care.
 Sec. 3. "Practitioner of respiratory care" means a person who is:
- 1. Certified to engage in the practice of respiratory care by the National Board for Respiratory Care or its successor organization; and

2. Licensed by the board.

- Sec. 4. "Respiratory care" means the treatment, management, diagnostic testing, control and care of persons with deficiencies and abnormalities associated with the cardiopulmonary system. The term includes inhalation and respiratory therapy.
- Sec. 5. For the purposes of this chapter, any act that constitutes the practice of medicine shall be deemed to occur at the place where the patient is located at the time the act is performed.

- Sec. 6. The practice of respiratory care must be performed under the direction of or pursuant to a prescription from a physician licensed to practice in this state, any other state, any territory of the United States or the District of Columbia.
- Sec. 7. 1. Every person who wishes to practice respiratory care in this state must:
 - (a) Have a high school diploma or general equivalency diploma;
- (b) Complete an educational program for respiratory care which has been approved by the National Board for Respiratory Care or its successor organization;
- (c) Pass the examination as an entry-level or advanced practitioner of respiratory care administered by the National Board for Respiratory Care or its successor organization;
- (d) Be certified by the National Board for Respiratory Care or its successor organization; and
- (e) Be licensed to practice respiratory care by the board and have paid the required fee for licensure.
 - 2. Except as otherwise provided in subsection 3, a person shall not:
 - (a) Practice respiratory care; or
- (b) Hold himself out as qualified to practice respiratory care, in this state without complying with the provisions of subsection 1.
- 3. Any person who has completed the educational requirements set forth in paragraphs (a) and (b) of subsection 1 may practice respiratory care pursuant to a program of practical training as an intern in respiratory care for not more than 12 months after completing those educational requirements.
- Sec. 8. An application for a license as a practitioner of respiratory care must include the social security number of the applicant.
- Sec. 9. The board shall adopt regulations regarding the licensure of practitioners of respiratory care, including, without limitation:
 - 1. Educational and other qualifications of applicants;
- 2. Required academic programs which applicants must successfully complete;
 - 3. Procedures for applying for and issuing licenses;
 - Tests or examinations of applicants by the board;
- The types of medical services that a practitioner of respiratory care may perform, except that a practitioner of respiratory care may not perform those specific functions and duties delegated or otherwise restricted by specific statute to persons licensed as dentists, chiropractors, podiatric physicians, optometrists, physicians, osteopathic physicians or hearing aid specialists pursuant to this chapter or chapter 631, 633, 634, 635, 636 or 637A of NRS, as appropriate;
 - The duration, renewal and termination of licenses; and
- The grounds and procedures for disciplinary actions against practitioners of respiratory care.
- **Sec. 10.** NRS 630.003 is hereby amended to read as follows: 630.003 The legislature finds and declares that it is among the responsibilities of state government to ensure, as far as possible, that only competent persons practice medicine *and respiratory care* within this state. For this purpose, the legislature delegates to the board of medical

examiners the duty of determining the initial and continuing competence of doctors of medicine, physician assistants and practitioners of respiratory care in this state. The powers conferred upon the board by this chapter must be liberally construed to carry out this purpose.

Sec. 11. NRS 630.005 is hereby amended to read as follows:

630.005 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 630.010 to 630.025, inclusive, and sections 2, 3 and 4 of this act have the meanings ascribed to them in those

Sec. 12. NRS 630.015 is hereby amended to read as follows:

630.015 ["Physician's] "Physician assistant" means a person who is a graduate of an academic program approved by the board or who, by general education, practical training and experience determined to be satisfactory by the board, is qualified to perform medical services under the supervision of a supervising physician and who has been issued a license by the board.

Sec. 13. NRS 630.025 is hereby amended to read as follows:

"Supervising physician" means an active physician licensed 630.025 in the State of Nevada [who cosigns the application for licensure of a physician's assistant and who employs and supervises [the physician's] a physician assistant.

Sec. 14. NRS 630.045 is hereby amended to read as follows:

630.045 The purpose of licensing physicians [and physicians'] physician assistants and practitioners of respiratory care is to protect the public health and safety and the general welfare of the people of this state. Any license issued pursuant to this chapter is a revocable privilege and no holder of such a license acquires thereby any vested right.

Sec. 15. NRS 630.047 is hereby amended to read as follows: 630.047 1. This chapter does not apply to:

- (a) A medical officer or practitioner of respiratory care of the armed services or a medical officer or practitioner of respiratory care of any division or department of the United States in the discharge of his official duties; [for which a license is not required;]
- (b) Physicians who are called into this state, other than on a regular basis, for consultation with or assistance to a physician licensed in this state, and who are legally qualified to practice in the state where they reside;
- (c) Physicians who are legally qualified to practice in the state where they reside and come into this state on an irregular basis to:
- (1) Obtain medical training approved by the board from a physician who is licensed in this state; or
- (2) Provide medical instruction or training approved by the board to physicians licensed in this state; [and]
- (d) Any person permitted to practice any other healing art under this Title who does so within the scope of that authority, or healing by faith or Christian Science [-];
- (e) The practice of respiratory care by a student as part of a program of study in respiratory care that is approved by the board, or is recognized by a national organization which is approved by the board to review such programs, if the student is enrolled in the program and

provides respiratory care only under the supervision of a practitioner of respiratory care;

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

- (1) Is enrolled in a clinical program of study in respiratory care which has been approved by the board;
- (2) Is employed by a medical facility, as defined in NRS 449.0151; and
- (3) Provides respiratory care to patients who are not in a critical medical condition or, in an emergency, to patients who are in a critical medical condition and a practitioner of respiratory care is not immediately available to provide that care and the student is directed by a physician to provide respiratory care under his supervision until a practitioner or respiratory care is available;

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

(h) A cardiopulmonary perfusionist who is under the supervision of a

surgeon or an anesthesiologist;

- (i) A person who is employed by a physician and provides respiratory care under the supervision of that physician;
- (j) The maintenance of medical equipment for respiratory care that is not attached to a patient; and
- (k) A person who installs medical equipment for respiratory care that is used in the home and gives instructions regarding the use of that equipment if the person is trained to provide such services and is supervised by a provider of health care who is acting within the authorized scope of his practice.
- 2. This chapter does not repeal or affect any statute of Nevada regulating or affecting any other healing art.

This chapter does not prohibit:

(a) Gratuitous services outside of a medical school or medical facility by a person who is not a physician, physician assistant or practitioner of respiratory care in cases of emergency.

(b) The domestic administration of family remedies.

Sec. 16. NRS 630.120 is hereby amended to read as follows:

630.120 1. The board shall procure a seal.

2. All licenses issued to physicians [and physicians'], physician assistants and practitioners of respiratory care must bear the seal of the board and the signatures of its president and secretary-treasurer.

Sec. 17. NRS 630.160 is hereby amended to read as follows:

- 630.160 1. Every person desiring to practice medicine must, before beginning to practice, procure from the board a license authorizing him to practice.
- 2. Except as otherwise provided in NRS 630.161 or 630.164, a license may be issued to any person who:
- (a) Is a citizen of the United States or is lawfully entitled to remain and work in the United States;
- (b) Has received the degree of Doctor of Medicine from a medical school:

- (1) Approved by the Liaison Committee on Medical Education of the American Medical Association and Association of American Medical Colleges; or
- (2) Which provides a course of professional instruction equivalent to that provided in medical schools in the United States approved by the Liaison Committee on Medical Education;
 - (c) Has passed:
- (1) All parts of the examination given by the National Board of Medical Examiners;
 - (2) All parts of the Federation Licensing Examination;
 - (3) All parts of the United States Medical Licensing Examination;
- (4) All parts of a licensing examination given by any state or territory of the United States, if the applicant is certified by a specialty board of the American Board of Medical Specialties;
- (5) All parts of the examination to become a licentiate of the Medical Council of Canada; or
- (6) Any combination of the examinations specified in subparagraphs (1), (2) and (3) that the board determined to be sufficient;
 - (d) Has completed [3 years of:
 - (1) Graduate education 36 months of progressive postgraduate:
- (1) Education as a resident in the United States or Canada in a program approved by the board, the Accreditation Council for Graduate Medical Education of the American Medical Association or the Coordinating Council of Medical Education of the Canadian Medical Association; or
- (2) Fellowship training in the United States or Canada approved by the board or the Accreditation Council for Graduate Medical Education; and
- (e) Passes a written or oral examination, or both, as to his qualifications to practice medicine and provides the board with a description of the clinical program completed demonstrating that the applicant's clinical training met the requirements of paragraph (b) of this subsection.
 - **Sec. 18.** NRS 630.164 is hereby amended to read as follows:
- 630.164 1. A board of county commissioners may petition the board of medical examiners to waive the [requirements] requirement of paragraph (d) of subsection 2 of NRS 630.160 for any applicant intending to practice medicine in a medically underserved area of that county as that term is defined by regulation by the [officer of rural health of the University of Nevada School of Medicine.] board of medical examiners. The board of medical examiners may waive that requirement and issue a license if the applicant:
- (a) Has completed at least 1 year of training as a resident in the United States or Canada in a program approved by the board, the Accreditation Council for Graduate Medical Education of the American Medical Association or the Coordinating Council of Medical Education of the Canadian Medical Association, respectively;
- (b) Has a minimum of 5 years of practical medical experience as a licensed allopathic physician or such other equivalent training as the board deems appropriate; and

- (c) Meets all other conditions and requirements for a license to practice medicine.
- 2. Any person licensed pursuant to subsection 1 must be issued a license to practice medicine in this state restricted to practice in the medically underserved area of the county which petitioned for the waiver only. He may apply to the board of medical examiners for renewal of that restricted license every 2 years after he is licensed.
- 3. Any person holding a restricted license pursuant to subsection 1 who completes 3 years of [such] full-time practice under the restricted license may apply to the board for an unrestricted license. In considering an application for an unrestricted license pursuant to this subsection, the board shall require the applicant to meet all statutory requirements for licensure in effect at the time of application except the requirement of paragraph (d) of subsection 2 of NRS 630.160.

Sec. 19. NRS 630.197 is hereby amended to read as follows:

- 630.197 1. An applicant for the issuance or renewal of a license to practice medicine, for to practice as a sphysician assistant or to practice as a practitioner of respiratory care shall submit to the board the statement prescribed by the welfare division of the department of human resources pursuant to NRS 425.520. The statement must be completed and signed by the applicant.
- 2. The board shall include the statement required pursuant to subsection 1 in:
- (a) The application or any other forms that must be submitted for the issuance or renewal of the license; or
 - (b) A separate form prescribed by the board.
- 3. A license to practice medicine, [or] to practice as a [physician's] physician assistant or to practice as a practitioner of respiratory care may not be issued or renewed by the board if the applicant:
 - (a) Fails to submit the statement required pursuant to subsection 1; or
- (b) Indicates on the statement submitted pursuant to subsection 1 that he is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.
- 4. If an applicant indicates on the statement submitted pursuant to subsection 1 that he is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, the board shall advise the applicant to contact the district attorney or other public agency enforcing the order to determine the actions that the applicant may take to satisfy the arrearage.

Sec. 20. NRS 630.253 is hereby amended to read as follows:

630.253 The board shall, as a prerequisite for the:

- Renewal of a license as a [physician's] physician assistant; or
 Biennial registration of the holder of a license to practice medicine,

require each holder to comply with the requirements for continuing education adopted by the board. These requirements may provide for the completion of one or more courses of instruction relating to risk management in the performance of medical services.

Sec. 21. NRS 630.261 is hereby amended to read as follows:

630.261 1. [The board may, unless] Except as otherwise provided in [this section or] NRS 630.161, the board may issue: [, renew or modify:]

- (a) A locum tenens license, to be effective not more than 3 months after issuance, to any physician who is licensed and in good standing in another state, who meets the requirements for licensure in this state and who is of good moral character and reputation. The purpose of this license is to enable an eligible physician to serve as a substitute for another physician who is licensed to practice medicine in this state and who is absent from his practice for reasons deemed sufficient by the board. A license issued pursuant to the provisions of this paragraph is not renewable.
- (b) A special license to a licensed physician of another state to come into this state to care for or assist in the treatment of his own patient in association with a physician licensed in this state. A special license issued pursuant to the provisions of this paragraph is limited to the care of a specific patient. The physician licensed in this state has the primary responsibility for the care of that patient.

(c) A restricted license for a specified period if the board determines the applicant needs supervision or restriction.

- (d) A temporary license for a specified period if the physician is licensed and in good standing in another state *and meets the requirements for licensure in this state*, and *if* the board determines that it is necessary in order to provide medical services for a community without adequate medical care. A temporary license issued pursuant to the provisions of this paragraph is not renewable.
- (e) A special purpose license to a physician who is licensed in another state to permit the use of equipment that transfers information concerning the medical condition of a patient in this state across state lines electronically, telephonically or by fiber optics if the physician:
- Holds a full and unrestricted license to practice medicine in that state;
- (2) Has not had any disciplinary or other action taken against him by any state or other jurisdiction; and
- (3) Meets the requirement set forth in paragraph (d) of subsection 2 of NRS 630.160.
- 2. Except as otherwise provided in this section, the board may renew or modify any license issued pursuant to subsection 1.
- 3. Every physician who is licensed pursuant to [the provisions of] subsection 1 and who accepts the privilege of practicing medicine in this state pursuant to the provisions of the license shall be deemed to have given his consent to the revocation of the license at any time by the board for any of the grounds provided in NRS 630.161 or 630.301 to 630.3065, inclusive.
 - **Sec. 22.** NRS 630.265 is hereby amended to read as follows:
- 630.265 1. Except as otherwise provided in NRS 630.161, the board may issue to a qualified applicant a limited license to practice medicine as a resident physician in a graduate program approved by the Accreditation Council for Graduate Medical Education if he is:

- (a) A graduate of an accredited medical school in the United States or Canada; or
- (b) A graduate of a foreign medical school and has received the standard certificate of the Educational Commission for Foreign Medical Graduates or a written statement from that commission that he passed the examination given by it.
- 2. The medical school or other institution sponsoring the program shall provide the board with written confirmation that the applicant has been appointed to a position in the program and is a citizen of the United States or lawfully entitled to remain and work in the United States. Such a license remains valid only while the licensee is actively practicing medicine in the residency program and is legally entitled to work and remain in the United
- 3. The board may issue such a limited license for not more than 1 year but may renew the license H if the applicant for the limited license meets the requirements set forth by the board by regulation.
- 4. The holder of a limited license may practice medicine only in connection with his duties as a resident physician or under such conditions as are approved by the director of the program and the board.
- 5. The holder of a limited license granted pursuant to this section may be frevoked disciplined by the board at any time for any of the grounds provided in NRS 630.161 or 630.301 to 630.3065, inclusive.

Sec. 23. NRS 630.271 is hereby amended to read as follows:

- 630.271 1. A [physician's] physician assistant may perform such medical services as he is authorized to perform [pursuant to the terms of a license issued to him by the board, if those services are rendered under the supervision and control of al by his supervising physician.
- 2. The board *and supervising physician* shall limit the authority of a [physician's] physician assistant to prescribe controlled substances to those schedules of controlled substances [which his] that the supervising physician is authorized to prescribe pursuant to state and federal law.

Sec. 24. NRS 630.273 is hereby amended to read as follows:

630.273 The board may issue a license to an applicant who is qualified under the regulations of the board to perform medical services under the supervision of a supervising physician. The application for a license as a [physician's] physician assistant must include the social security number of the applicant. [and be cosigned by the supervising physician.]
Sec. 25. NRS 630.275 is hereby amended to read as follows:

630.275 The board shall adopt regulations regarding the licensure of a cian's physician assistant, including, but not limited to:

- The educational and other qualifications of applicants.
- The required academic program for applicants.
- The procedures for applications for and the issuance of licenses.
- The tests or examinations of applicants by the board.
- The medical services which a [physician's] physician assistant may perform, except that he may not perform those specific functions and duties delegated or restricted by law to persons licensed as dentists, chiropractors, podiatric physicians and optometrists under chapters 631, 634, 635 and 636, respectively, of NRS, or as hearing aid specialists.
 - 6. The duration, renewal and termination of licenses.

- 7. The grounds and procedures respecting disciplinary actions against icians'] *physician* assistants.
- 8. The supervision of medical services of a physician's physician assistant by a supervising physician.

 Sec. 26. NRS 630.288 is hereby amended to read as follows:

- 630.288 1. Each holder of a license to practice medicine must, on or before July 1 of each alternate year:
 - (a) Submit the statement required pursuant to NRS 630.197; and
- (b) Pay to the secretary-treasurer of the board the applicable fee for biennial registration. This fee must be collected for the period for which a physician is licensed.
- 2. When a holder of a license fails to pay the fee for biennial registration and submit the statement required pursuant to NRS 630.197 after they become due, his license to practice medicine in this state is automatically suspended. The holder may, within 2 years after the date his license is suspended, upon payment of twice the amount of the current fee for biennial registration to the secretary-treasurer and submission of the statement required pursuant to NRS 630.197 and after he is found to be in good standing and qualified under the provisions of this chapter, be reinstated to practice.
- 3. The board shall make such reasonable attempts as are practicable to notify a licensee:
- (a) At least once that his fee for biennial registration and the statement required pursuant to NRS 630.197 are due; and

(b) That his license is suspended.

A copy of this notice must be sent to the Drug Enforcement Administration of the United States Department of Justice or its successor agency.

Sec. 27. NRS 630.290 is hereby amended to read as follows: 630.290 1. The board shall charge and collect not more The board shall charge and collect not more than the following fees:

For application for and issuance of a license [by written	
examination, in addition to the actual cost to the board	
of the examination to practice as a physician	\$600
For application for and issuance of a temporary, locum	
tenens, limited, restricted , <i>special</i> or special <i>purpose</i>	
license	[300] 400
For renewal of a limited, restricted or special license	[200] 400
For application for and issuance of a license as a	
[physician's] physician assistant	[300] 400
For [renewal of a license as a physician's] biennial	
registration of a physician assistant	[300] 800
For biennial registration <i>of a physician</i>	800
For application for and issuance of a license as a	
practitioner of respiratory care	
For biennial registration of a practitioner of respiratory	
care	600
For biennial registration for a physician who is [retired,]	
on inactive status for not practicing medicine in	
Nevada	200] 400
For written verification of licensure	50

For a duplicate identification card	25
For a duplicate license	
For computer printouts or labels	
For verification of a listing of physicians, per hour	20
For furnishing a list of new physicians	1501 100

2. In addition to the fees prescribed in subsection 1, the board shall charge and collect [:

- (a) A fee to reimburse it for the cost of the United States Medical Licensing Examination; and
- (b) Necessary necessary and reasonable fees for its other services.
- 3. The cost of any special meeting called at the request of a [licensed] physician, licensee, an institution, an organization, a state agency or an applicant for licensure must be paid for by the person or entity requesting the special meeting. Such a special meeting must not be called until the person or entity requesting it has paid a cash deposit with the board sufficient to defray all expenses of the meeting.

Sec. 28. NRS 630.301 is hereby amended to read as follows: 630.301 The following acts, among others, constitute grounds for initiating disciplinary action or denying licensure:

- 1. Conviction of a felony, any offense involving moral turpitude or any offense relating to the practice of medicine or the ability to practice medicine. A plea of nolo contendere is a conviction for the purposes of this
- 2. Conviction of violating any of the provisions of NRS 616D.200, 616D.220, 616D.240, 616D.300, 616D.310, or 616D.350 to 616D.440, inclusive.
- 3. The *revocation*, suspension, modification or limitation of the license to practice any type of medicine by any other jurisdiction or the surrender of the license or discontinuing the practice of medicine while under investigation by any licensing authority, a medical facility, a branch of the Armed Services of the United States, an insurance company, an agency of the Federal Government or an employer.
- 4. Malpractice, which may be evidenced by claims settled against a practitioner.
- 5. The engaging by a practitioner in any sexual activity with a patient who is currently being treated by the practitioner.
- 6. Disruptive behavior with physicians, hospital personnel, patients, members of the families of patients or any other persons if the behavior interferes with patient care or has an adverse impact on the quality of care rendered to a patient.
- 7. The engaging in conduct that violates the trust of a patient and exploits the relationship between the physician and the patient for financial or other personal gain.
- 8. The failure to offer appropriate procedures or studies, to protest inappropriate denials by organizations for managed care, to provide necessary services or to refer a patient to an appropriate provider, when such a failure occurs with the intent of positively influencing the financial well-being of the practitioner or an insurer.

- 9. The engaging in conduct that brings the medical profession into disrepute, including, without limitation, conduct that violates any provision of a national code of ethics adopted by the board by regulation.
- 10. The engaging in sexual contact with the surrogate of a patient or other key persons related to a patient, including, without limitation, a spouse, parent or legal guardian, which exploits the relationship between the physician and the patient in a sexual manner.

 Sec. 29. NRS 630.3062 is hereby amended to read as follows:

 630.3062 The following acts, among others, constitute grounds for

initiating disciplinary action or denying licensure:

1. Failure to maintain timely, legible, accurate and complete medical records relating to the diagnosis, treatment and care of a patient.

2. Altering medical records of a patient.

- Making or filing a report which the licensee knows to be false, failing to file a record or report as required by law or willfully obstructing or inducing another to obstruct such filing.
- 4. Failure to make the medical records of a patient available for inspection and copying as provided in NRS 629.061.
- 5. Failure to report any claim for malpractice or negligence filed against the licensee and the subsequent disposition thereof within 90 days after the:
 - (a) Claim is filed; and
 - (b) Disposition of the claim.
- 6. Failure to report any person the licensee knows, or has reason to know, is in violation of the provisions of this chapter or the regulations of the board.

Sec. 30. NRS 630.3066 is hereby amended to read as follows:

- 630.3066 A physician is not subject to disciplinary action solely for prescribing or administering to a patient under his care
- 1. Amygdalin (laetrile), if the patient has consented in writing to the use of the substance.
- Procaine hydrochloride with preservatives and stabilizers (Gerovital
- A controlled substance which is listed in schedule II, III, IV or V by the state board of pharmacy pursuant to NRS 453.146, if the controlled substance is lawfully prescribed or administered for the treatment of intractable pain in accordance with facepted standards for the practice of medicine. regulations adopted by the board.
 - Sec. 31. NRS 630.307 is hereby amended to read as follows:
- 630.307 1. Any person, medical school or medical facility that becomes aware that a person practicing medicine or respiratory care in this state has, is or is about to become engaged in conduct which constitutes grounds for initiating disciplinary action shall *forthwith* file a written complaint with the board.
- 2. Any hospital, clinic or other medical facility licensed in this state, or medical society, shall forthwith report to the board any change in a physician's privileges to practice medicine while the physician is under investigation and the outcome of any disciplinary action taken by that facility or society against the physician concerning the care of a patient or the competency of the physician.

- 3. The clerk of every court shall *forthwith* report to the board any finding, judgment or other determination of the court that a physician *[:]*, *physician assistant or practitioner of respiratory care:*
 - (a) Is mentally ill;
 - (b) Is mentally incompetent;
- (c) Has been convicted of a felony or any law governing controlled substances or dangerous drugs;
- (d) Is guilty of abuse or fraud under any state or federal program providing medical assistance; or
 - (e) Is liable for damages for malpractice or negligence.
 - Sec. 32. NRS 630.329 is hereby amended to read as follows:
- 630.329 If the board issues an order suspending the license of a physician , *physician assistant or practitioner of respiratory care* pending proceedings for disciplinary action, the court shall not stay that order.
 - **Sec. 33.** NRS 630.333 is hereby amended to read as follows:
- 630.333 1. In addition to any other remedy provided by law, the board, through its president or, secretary-treasurer or the attorney general, may apply to any court of competent jurisdiction:
- (a) To enjoin any prohibited act or other conduct of a **[physician] licensee** which is harmful to the public;
- (b) To enjoin any person who is not licensed under this chapter from practicing medicine [;] or respiratory care;
- (c) To limit the [physician's] practice of a physician, physician assistant or practitioner of respiratory care, or suspend his license to practice; [medicine;] or
- (d) To enjoin the use of the title M.D., P.A., P.A.-C, R.C.P. or any other word, combination of letters or other designation intended to imply or designate a person as a physician, physician assistant or practitioner of respiratory care, when not licensed by the board pursuant to this chapter, unless the use is otherwise authorized by a specific statute.
- 2. The court in a proper case may issue a temporary restraining order or a preliminary injunction for the purposes set forth in subsection 1:
 - (a) Without proof of actual damage sustained by any person;
- (b) Without relieving any person from criminal prosecution for engaging in the practice of medicine without a license; and
 - (c) Pending proceedings for disciplinary action by the board.
 - Sec. 34. NRS 630.336 is hereby amended to read as follows:
- 630.336 1. Any proceeding of a committee of the board investigating complaints is not subject to the requirements of NRS 241.020, unless the licensee under investigation requests that the proceeding be subject to those requirements. Any deliberations conducted or vote taken by:
 - (a) The board or panel regarding its decision; or
- (b) The board or any investigative committee of the board regarding its ordering of a physician , *physician assistant or practitioner of respiratory care* to undergo a physical or mental examination or any other examination designated to assist the board or committee in determining the fitness of a physician, *physician assistant or practitioner of respiratory care*, are not subject to the requirements of NRS 241.020.
- 2. Except as otherwise provided in subsection 3, all applications for a license to practice medicine [1] or respiratory care, any charges filed by the

board, financial records of the board, formal hearings on any charges heard by the board or a panel selected by the board, records of such hearings and any order or decision of the board or panel must be open to the public.

3. Except as otherwise provided in NRS 630.352 and 630.368, the

following may be kept confidential:

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

(b) All investigations and records of investigations;

(c) Any report concerning the fitness of any person to receive or hold a license to practice medicine [:] or respiratory care;

(d) Any communication between:

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

(2) The board or its staff, investigators, experts, committees, panels, hearing officers, advisory members or consultants and counsel for the board; and

(e) Any other information or records in the possession of the board.

4. This section does not prevent or prohibit the board from communicating or cooperating with any other licensing board or agency or any agency which is investigating a licensee, including a law enforcement agency. Such cooperation may include, *without limitation*, providing the board or agency with minutes of a closed meeting, transcripts of oral examinations and the results of oral examinations.

Sec. 35. NRS 630.344 is hereby amended to read as follows:

- 630.344 1. Service of process [made] under this chapter must be made on [the person] a licensee personally, or by registered or certified mail with return receipt requested [.] addressed to the [physician] licensee at his last known address. If personal service cannot be made and if notice by mail is returned undelivered, the secretary-treasurer of the board shall cause notice to be published once a week for 4 consecutive weeks in a newspaper published in the county of the [physician's] last known address of the licensee or, if no newspaper is published in that county, then in a newspaper widely distributed in that county.
- 2. Proof of service of process or publication of notice made under this chapter must be filed with the board and recorded in the minutes of the board.

Sec. 36. NRS 630.346 is hereby amended to read as follows:

630.346 In any disciplinary hearing:

1. The board, a panel of the members of the board and a hearing officer are not bound by formal rules of evidence and a witness must not be barred from testifying solely because he was or is incompetent.

2. Proof of actual injury need not be established.

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

Sec. 37. NRS 630.352 is hereby amended to read as follows:

630.352 1. Any member of the board, except for an advisory member serving on a panel of the board hearing charges, may participate in the final order of the board. If the board, after a formal hearing, determines

from a preponderance of the evidence that a violation of the provisions of this chapter or of the regulations of the board has occurred, it shall issue and serve on the physician charged an order, in writing, containing its findings and any sanctions.

- 2. If the board determines that no violation has occurred, it shall dismiss the charges, in writing, and notify the physician that the charges have been dismissed. If the disciplinary proceedings were instituted against the physician as a result of a complaint filed against him, the board may provide the physician with a copy of the complaint. I, including the name of the person, if any, who filed the complaint.
- 3. Except as otherwise provided in subsection 4, if the board finds that a violation has occurred, it may by order:
- (a) Place the person on probation for a specified period on any of the conditions specified in the order;
 - (b) Administer to him a public reprimand;
- (c) Limit his practice or exclude one or more specified branches of medicine from his practice;
- (d) Suspend his license for a specified period or until further order of the board;
 - (e) Revoke his license to practice medicine;
- (f) Require him to participate in a program to correct alcohol or drug dependence or any other impairment;
 - (g) Require supervision of his practice;
 - (h) Impose a fine not to exceed \$5,000;
 - (i) Require him to perform public service without compensation;
- (j) Require him to take a physical or mental examination or an examination testing his competence;
- (k) Require him to fulfill certain training or educational requirements; and
- (l) Require him to pay all costs incurred by the board relating to his disciplinary proceedings.
- 4. If the board finds that the physician has violated the provisions of NRS 439B.425, the board shall suspend his license for a specified period or until further order of the board.
 - **Sec. 38.** NRS 630.355 is hereby amended to read as follows:
- 630.355 1. If a person, in a proceeding before the board [:], a hearing officer or a panel of the board:
 - (a) Disobeys or resists a lawful order; for the board;
- (b) Refuses to take an oath or affirmation as a witness; [before the board]
 - (c) Refuses to be examined; [before the board;] or
- (d) Engages in conduct during a hearing or so near the place thereof as to obstruct the proceeding,

the board, *hearing officer or panel* may certify the facts to the district court of the county in which the proceeding is being conducted. Such a certification operates as a stay of all related disciplinary proceedings. [before the board.] The court shall issue an order directing the person to appear before the court and show cause why he should not be held in contempt.

- 2. A copy of the statement of the board, *hearing officer or panel*, and the order of the district court issued pursuant to subsection 1 must be served on the person. Thereafter, the court has jurisdiction of the matter.
- 3. The same proceedings must be had, the same penalties may be imposed and the person may purge himself of the contempt in the same way as in the case of a person who has committed a contempt in the trial of a civil action.

Sec. 39. NRS 630.356 is hereby amended to read as follows:

- 630.356 1. Any person aggrieved by a final order of the board is entitled to judicial review of the board's order.
- 2. Every order [of the board which limits the practice of medicine or suspends or revokes a license] that imposes a sanction against a licensee pursuant to subsection 3 or 4 of NRS 630.352 or any regulation of the board is effective from the date the secretary-treasurer certifies the order until the date the order is modified or reversed by a final judgment of the court. The court shall not stay the order of the board pending a final determination by the court.
- 3. The district court shall give a petition for judicial review of the board's order priority over other civil matters which are not expressly given priority by law.

Sec. 40. NRS 630.358 is hereby amended to read as follows:

- 630.358 1. Any person:
- (a) Whose practice of medicine *or respiratory care* has been limited; or
- (b) Whose license to practice medicine *or respiratory care* has been:
 - (1) Suspended until further order; or
- (2) Revoked,

by an order of the board, may apply to the board for removal of the limitation or restoration of his license.

- 2. In hearing the application, the board:
- (a) May require the person to submit to a mental or physical examination or an examination testing his competence to practice medicine *or respiratory care* by physicians *or practitioners of respiratory care*, *as appropriate*, or other examinations it designates and submit such other evidence of changed conditions and of fitness as it deems proper;
- (b) Shall determine whether under all the circumstances the time of the application is reasonable; and
- (c) May deny the application or modify or rescind its order as it deems the evidence and the public safety warrants.
- 3. The licensee has the burden of proving by clear and convincing evidence that the requirements for restoration of the license or removal of the limitation have been met.
- 4. The board shall not restore a license unless it is satisfied that the person has complied with all of the terms and conditions set forth in the final order of the board and that the person is capable of practicing medicine *or respiratory care* in a safe manner.
- 5. To restore a license that has been revoked by the board, the applicant must apply for a license and take an examination as though he had never been licensed under this chapter.

- **Sec. 41.** NRS 630.366 is hereby amended to read as follows:
- 630.366 1. If the board receives a copy of a court order issued pursuant to NRS 425.540 that provides for the suspension of all professional, occupational and recreational licenses, certificates and permits issued to a person who is the holder of a license to practice medicine, [orl] to practice as a [physician's assistant,] physician assistant or to practice as a practitioner of respiratory care, the board shall deem the license issued to that person to be suspended at the end of the 30th day after the date on which the court order was issued unless the board receives a letter issued to the holder of the license by the district attorney or other public agency pursuant to NRS 425.550 stating that the holder of the license has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.
- 2. The board shall reinstate a license to practice medicine, for to practice as a [physician's] physician assistant or to practice as a practitioner of respiratory care that has been suspended by a district court pursuant to NRS 425.540 if the board receives a letter issued by the district attorney or other public agency pursuant to NRS 425.550 to the person whose license was suspended stating that the person whose license was suspended has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.
 - Sec. 42. NRS 630.368 is hereby amended to read as follows:
- 630.368 [1.] To institute a disciplinary action against a [physician's assistant,] physician assistant or practitioner of respiratory care, a written complaint, specifying the charges, must be filed with the board by:

(a) The board;

- (b) 1. The board or a committee designated by the board to investigate a complaint;
 - 2. Any member of the board; or
- [(e)] 3. Any other person who is aware of any act or circumstance constituting a ground for disciplinary action set forth in the regulations adopted by the board.
- [2. Before taking any formal action on a complaint filed against a physician's assistant by his supervising physician or by an osteopathic physician supervising the physician's assistant pursuant to NRS 630.274, the board shall provide the physician's assistant with a copy of the complaint.
- 3. If, pursuant to disciplinary procedures set forth in the regulations adopted by the board, the board finds that the charges in the complaint against the physician's assistant are false, the board may provide the physician's assistant with a copy of the complaint, including the name of the person, if any, who filed the complaint.]
 - **Sec. 43.** NRS 630.390 is hereby amended to read as follows:
- 630.390 In seeking injunctive relief against any person for an alleged violation of this chapter by practicing medicine *or respiratory care* without a license, it is sufficient to allege that he did, upon a certain day, and in a certain county of this state, engage in the practice of medicine *or respiratory care* without having a license to do so, without alleging any further or more particular facts concerning the same.

- **Sec. 44.** NRS 630.400 is hereby amended to read as follows: 630.400 A person who:
- 1. Presents to the board as his own the diploma, license or credentials of another;
 - 2. Gives either false or forged evidence of any kind to the board;
- 3. Practices medicine *or respiratory care* under a false or assumed name or falsely personates another licensee;
- 4. Except as otherwise provided by specific statute, practices medicine *or respiratory care* without being licensed under this chapter;
- 5. Holds himself out as a **[physician's] physician** assistant or **[who]** uses any other term indicating or implying that he is a **[physician's] physician** assistant without being licensed by the board; **[or]**
- 6. Holds himself out as a practitioner of respiratory care or uses any other term indicating or implying that he is a practitioner of respiratory care without being licensed by the board; or
- 7. Uses the title M.D., when not licensed by the board pursuant to this chapter, unless otherwise authorized by a specific statute, is guilty of a category D felony and shall be punished as provided in NRS 193.130.
 - Sec. 45. NRS 632.472 is hereby amended to read as follows:
- 632.472 1. The following persons shall report in writing to the executive director of the board any conduct of a licensee or holder of a certificate which constitutes a violation of the provisions of this chapter:
- (a) Any physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, nursing assistant, [physician's] physician assistant, psychiatrist, psychologist, marriage and family therapist, alcohol or drug abuse counselor, driver of an ambulance, advanced emergency medical technician or other person providing medical services licensed or certified to practice in this state.
- (b) Any personnel of a medical facility or facility for the dependent engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a medical facility or facility for the dependent upon notification by a member of the staff of the facility.
 - (c) A coroner.
- (d) Any person who maintains or is employed by an agency to provide nursing in the home.
 - (e) Any employee of the department of human resources.
- (f) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.
- (g) Any person who maintains or is employed by a facility or establishment that provides care for older persons.
- (h) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect or exploitation of an older person and refers them to persons and agencies where their requests and needs can be met.
 - (i) Any social worker.
- 2. Every physician who, as a member of the staff of a medical facility or facility for the dependent, has reason to believe that a nursing assistant

has engaged in conduct which constitutes grounds for the denial, suspension or revocation of a certificate shall notify the superintendent, manager or other person in charge of the facility. The superintendent, manager or other person in charge shall make a report as required in subsection 1.

- 3. A report may be filed by any other person.
- 4. Any person who in good faith reports any violation of the provisions of this chapter to the executive director of the board pursuant to this section is immune from civil liability for reporting the violation.

Sec. 46. NRS 632.473 is hereby amended to read as follows:

- 632.473 1. A nurse licensed pursuant to the provisions of this chapter, while working at an institution of the department of prisons, may treat patients, including the administration of a dangerous drug, poison or related device, pursuant to orders given by a [physician's] physician assistant if those orders are given pursuant to a protocol approved by the board of medical examiners and the supervising physician. The orders must be cosigned by the supervising physician or another physician within 72 hours after treatment.
- 2. A copy of the protocol under which orders are given by a **[physician's] physician** assistant must be available at the institution for review by the nurse.
- 3. This section does not authorize a **[physician's]** *physician* assistant to give orders for the administration of any controlled substance.
 - 4. For the purposes of this section:
- (a) ["Physician's] "Physician assistant" means a [physician's] physician assistant licensed by the board of medical examiners pursuant to chapter 630 of NRS who:
 - (1) Is employed at an institution of the department of prisons;
- (2) Has been awarded a bachelor's degree from a college or university recognized by the board of medical examiners; and
- (3) Has received at least 40 hours of instruction regarding the prescription of medication as a part of either his basic educational qualifications or a program of continuing education approved by the board of medical examiners.
- (b) "Protocol" means the written directions for the assessment and management of specified medical conditions, including the drugs and devices the [physician assistant is authorized to order, which the [physician assistant and the supervision have agreed upon as a basis for their practice.
- (c) "Supervising physician" has the meaning ascribed to it in NRS 630.025.
 - **Sec. 47.** NRS 639.0125 is hereby amended to read as follows:

639.0125 "Practitioner" means:

- 1. A physician, dentist, veterinarian or podiatric physician who holds a valid license to practice his profession in this state;
- 2. A hospital, pharmacy or other institution licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to or administer drugs in the course of professional practice or research in this state;

- 3. An advanced practitioner of nursing who has been authorized to prescribe poisons, dangerous drugs and devices; or
 - 4. A physician assistant who:
 - (a) Holds a license issued by the board of medical examiners; and
- (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of a physician as required by chapter 630 of NRS.
 - 5. An osteopathic physician's assistant who:
- (a) Holds a **license issued by the board of medical examiners orl** certificate issued by the state board of osteopathic medicine; and
- (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of [a physician or] an osteopathic physician as required by chapter [630 or] 633 of NRS.

Sec. 48. NRS 639.1373 is hereby amended to read as follows:

- 639.1373 1. A *physician assistant or an osteopathic* physician's assistant may, if authorized by the board, possess, administer, prescribe or dispense controlled substances, or possess, administer, prescribe or dispense poisons, dangerous drugs or devices in or out of the presence of his supervising physician only to the extent and subject to the limitations specified in the *registration certificate issued to the physician assistant or osteopathic* physician's [assistant's certificate as issued] assistant, as appropriate, by the board [] pursuant to this section.
- 2. Each *physician assistant and osteopathic* physician's assistant who is authorized by his *[physician's] physician* assistant's license issued by the board of medical examiners or certificate issued by the state board of osteopathic medicine to possess, administer, prescribe or dispense controlled substances, or to possess, administer, prescribe or dispense poisons, dangerous drugs or devices must apply for and obtain a registration certificate from the board, pay a fee to be set by regulations adopted by the board and pass an examination administered by the board on the law relating to pharmacy before he can possess, administer, prescribe or dispense controlled substances, or possess, administer, prescribe or dispense poisons, dangerous drugs or devices.
- 3. The board shall consider each application separately and may, even though the [physician's] physician assistant's license issued by the board of medical examiners or the osteopathic physician's assistant's certificate issued by the state board of osteopathic medicine authorizes the physician assistant or osteopathic physician's assistant, as appropriate, to possess, administer, prescribe or dispense controlled substances, or to possess, administer, prescribe or dispense poisons, dangerous drugs and devices:
 - (a) Refuse to issue a registration certificate;
- (b) Issue a registration certificate limiting the *authority of the physician assistant or osteopathic* physician's [assistant's authority] assistant, as appropriate, to possess, administer, prescribe or dispense controlled substances, or to possess, administer, prescribe or dispense poisons, dangerous drugs or devices, the area in which the *physician assistant or osteopathic* physician's assistant may possess controlled substances, poisons, dangerous drugs and devices, or the kind and amount of controlled substances, poisons, dangerous drugs and devices; or

- (c) Issue a registration certificate imposing other limitations or restrictions which the board feels are necessary and required to protect the health, safety and welfare of the public.
- 4. If the registration of the *physician assistant or osteopathic* physician's assistant is suspended or revoked, the physician's controlled substance registration may also be suspended or revoked.
- 5. The board shall adopt regulations controlling the maximum amount to be administered, possessed and dispensed, and the storage, security, recordkeeping and transportation of controlled substances and the maximum amount to be administered, possessed, prescribed and dispensed and the storage, security, recordkeeping and transportation of poisons, dangerous drugs and devices by *physician assistants and osteopathic* physicians' assistants. In the adoption of those regulations, the board shall consider, but is not limited to, the following:
- (a) The area in which the *physician assistant or osteopathic* physician's assistant is to operate;
 - (b) The population of that area;
- (c) The experience and training of the *physician assistant or* osteopathic physician's assistant;
 - (d) The distance to the nearest hospital and physician; and
 - (e) The effect on the health, safety and welfare of the public.
- 6. For the purposes of this section, the term ["physician's assistant" includes an osteopathic physician's assistant and the term] "supervising physician" includes an employing osteopathic physician as defined in chapter 633 of NRS.
 - **Sec. 49.** NRS 652.210 is hereby amended to read as follows:
- 652.210 No person other than a licensed physician, a licensed optometrist, a licensed practical nurse, a registered nurse, a licensed for physician assistant, a certified osteopathic physician's assistant, a certified intermediate emergency medical technician, a certified advanced emergency medical technician or a licensed dentist may manipulate a person for the collection of specimens, except that technical personnel of a laboratory may collect blood, remove stomach contents, perform certain diagnostic skin tests or field blood tests or collect material for smears and cultures.
 - **Sec. 50.** NRS 200.5093 is hereby amended to read as follows:
- 200.5093 1. Any person who is described in subsection 4 and who, in his professional or occupational capacity, knows or has reasonable cause to believe that an older person has been abused, neglected, exploited or isolated shall:
- (a) Except as otherwise provided in subsection 2, report the abuse, neglect, exploitation or isolation of the older person to:
- (1) The local office of the aging services division of the department of human resources;
 - (2) A police department or sheriff's office;
- (3) The county's office for protective services, if one exists in the county where the suspected action occurred; or
- (4) A toll-free telephone service designated by the aging services division of the department of human resources; and

- (b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the older person has been abused, neglected, exploited or isolated.
- 2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse, neglect, exploitation or isolation of the older person involves an act or omission of the aging services division, another division of the department of human resources or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission.
- 3. Each agency, after reducing a report to writing, shall forward a copy of the report to the aging services division of the department of human resources.
- 4. A report must be made pursuant to subsection 1 by the following persons:
- (a) Every physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, [physician's] physician assistant, psychiatrist, psychologist, marriage and family therapist, alcohol or drug abuse counselor, driver of an ambulance, advanced emergency medical technician or other person providing medical services licensed or certified to practice in this state, who examines, attends or treats an older person who appears to have been abused, neglected, exploited or isolated.
- (b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of the suspected abuse, neglect, exploitation or isolation of an older person by a member of the staff of the hospital.
 - (c) A coroner.
- (d) Every clergyman, practitioner of Christian Science or religious healer, unless he acquired the knowledge of abuse, neglect, exploitation or isolation of the older person from the offender during a confession.
- (e) Every person who maintains or is employed by an agency to provide nursing in the home.
- (f) Every attorney, unless he has acquired the knowledge of abuse, neglect, exploitation or isolation of the older person from a client who has been or may be accused of such abuse, neglect, exploitation or isolation.
 - (g) Any employee of the department of human resources.
- (h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.
- (i) Any person who maintains or is employed by a facility or establishment that provides care for older persons.
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation or isolation of an older person and refers them to persons and agencies where their requests and needs can be met.
 - (k) Every social worker.
- (l) Any person who owns or is employed by a funeral home or mortuary.
 - 5. A report may be made by any other person.

- 6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that an older person has died as a result of abuse, neglect or isolation, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the older person and submit to the appropriate local law enforcement agencies, the appropriate prosecuting attorney and the aging services division of the department of human resources his written findings. The written findings must include the information required pursuant to the provisions of NRS 200.5094, when possible.
- 7. A division, office or department which receives a report pursuant to this section shall cause the investigation of the report to commence within 3 working days. A copy of the final report of the investigation conducted by a division, office or department, other than the aging services division of the department of human resources, must be forwarded to the aging services division within 90 days after the completion of the report.
- 8. If the investigation of a report results in the belief that an older person is abused, neglected, exploited or isolated, the aging services division of the department of human resources or the county's office for protective services may provide protective services to the older person if he is able and willing to accept them.
- 9. A person who knowingly and willfully violates any of the provisions of this section is guilty of a misdemeanor.
 - **Sec. 51.** NRS 223.550 is hereby amended to read as follows:
- 223.550 1. The office for consumer health assistance is hereby established in the office of the governor. The governor shall appoint the director. The director must:
 - (a) Be:
 - (1) A physician, as that term is defined in NRS 0.040;
 - (2) A registered nurse, as that term is defined in NRS 632.019;
- (3) An advanced practitioner of nursing, as that term is defined in NRS 453.023; or
- (4) A [physician's] physician assistant, as that term is defined in NRS 630.015; and
 - (b) Have expertise and experience in the field of advocacy.
- 2. The cost of carrying out the provisions of NRS 223.500 to 223.580, inclusive, must be paid as follows:
- (a) That portion of the cost related to providing assistance to consumers and injured employees concerning workers' compensation must be paid from the assessments levied pursuant to NRS 232.680.
- (b) The remaining cost must be provided by direct legislative appropriation from the state general fund and be paid out on claims as other claims against the state are paid.
 - Sec. 52. NRS 244.1605 is hereby amended to read as follows:
 - 244.1605 The boards of county commissioners may:
- 1. Establish, equip and maintain limited medical facilities in the outlying areas of their respective counties to provide outpatient care and emergency treatment to the residents of and those falling sick or being injured or maimed in those areas.

- 2. Provide a full-time or part-time staff for the facilities which may include a physician, a licensed [physician's] physician assistant, a registered nurse or a licensed practical nurse, a certified emergency medical technician and such other personnel as the board deems necessary or appropriate to ensure adequate staffing commensurate with the needs of the area in which the facility is located.
- 3. Fix the charges for the medical and nursing care and medicine furnished by the facility to those who are able to pay for them, and to provide that care and medicine free of charge to those persons who qualify as medical indigents under the county's criteria of eligibility for medical care.
- 4. Purchase, equip and maintain, either in connection with a limited medical facility as authorized in this section or independent therefrom, ambulances and ambulance services for the benefit of the residents of and those falling sick or being injured or maimed in the outlying areas.

Sec. 53. NRS 244.382 is hereby amended to read as follows: 244.382 The legislature finds that:

- 1. Many of the less populous counties of the state have experienced shortages of physicians, surgeons, anesthetists, dentists, other medical professionals and [physicians'] physician assistants.
- 2. Some of the more populous counties of the state have also experienced shortages of physicians, surgeons, anesthetists, dentists, other medical professionals and [physicians'] physician assistants in their rural communities.
- 3. By granting county scholarships to students in such medical professions who will agree to return to the less populous counties or the rural communities of the more populous counties for residence and practice, these counties can alleviate the shortages to a degree and thereby provide their people with needed health services.

Sec. 54. NRS 244.3821 is hereby amended to read as follows:

- 244.3821 1. In addition to the powers elsewhere conferred upon all counties, except as otherwise provided in subsection 2, any county may establish a medical scholarship program to induce students in the medical professions to return to the county for practice.
- 2. Any county whose population is 100,000 or more may only establish a medical scholarship program to induce students in the medical professions to return to the less populous rural communities of the county for practice.
- 3. Students in the medical professions for the purposes of NRS 244.382 to 244.3823, inclusive, include persons studying to be [physicians'] physician assistants.
- 4. The board of county commissioners of a county that has established a medical scholarship program may appropriate money from the general fund of the county for medical scholarship funds and may accept private contributions to augment the scholarship funds.

Sec. 55. NRS 397.0605 is hereby amended to read as follows: 397.0605 The provisions of NRS 397.0615, 397.0645 and 397.0653 to the contrary notwithstanding, the Western Interstate Commission for Higher Education may adopt regulations which require as a condition of placement of a student in an educational program for [physicians'] **physician** assistants and receipt of the related financial support that the student submit to the director of the Western Interstate Commission for Higher Education:

- 1. A written statement from a licensed provider of health care who practices his profession in a rural area of this state that he agrees to employ the student for the term necessary to fulfill the requirements of NRS 397.0645 upon the completion of the student's education, examination and licensure
- 2. A written statement from the student that in lieu of repayment of all state contributions for the stipend he received he will practice his profession in a rural area of this state in accordance with the schedule set forth in subsection 1 of NRS 397.0645.

Sec. 56. NRS 397.0617 is hereby amended to read as follows:

- 397.0617 1. The provisions of this section apply only to support fees received by a student on or after July 1, 1997.
- 2. The three commissioners from the State of Nevada, acting jointly, may require a student who is certified to study to practice in a profession which could benefit a medically underserved area of this state, as that term is defined by the officer of rural health of the University of Nevada School of Medicine, to practice in such an area or to practice in an area designated by the Secretary of Health and Human Services:
- (a) Pursuant to 42 U.S.C. § 254c, as containing a medically underserved population; or
- (b) Pursuant to 42 U.S.C. § 254e, as a health professional shortage area,

as a condition to receiving a support fee.

- 3. If a person agrees to practice in a medically underserved area of this state pursuant to subsection 2 for at least 2 years, the three commissioners from the State of Nevada, acting jointly, may forgive the portion of the support fee designated as the loan of the person.
- 4. If a person returns to this state but does not practice in a medically underserved area of this state pursuant to subsection 2 for at least 2 years, the three commissioners from the State of Nevada, acting jointly, shall assess a default charge in an amount not less than three times the portion of the support fee designated as the loan of the person, plus interest.
- 5. As used in this section, a "profession which could benefit a medically underserved area of this state" includes, without limitation, dentistry, physical therapy, pharmacy and practicing as a [physician assistant.
 - Sec. 57. NRS 432B.220 is hereby amended to read as follows:
- 432B.220 1. Any person who is described in subsection 3 and who, in his professional or occupational capacity, knows or has reasonable cause to believe that a child has been abused or neglected shall:
- (a) Except as otherwise provided in subsection 2, report the abuse or neglect of the child to an agency which provides protective services or to a law enforcement agency; and
- (b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the child has been abused or neglected.

- 2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse or neglect of the child involves an act or omission of:
- (a) A person directly responsible or serving as a volunteer for or an employee of a public or private home, institution or facility where the child is receiving child care outside of his home for a portion of the day, the person shall make the report to a law enforcement agency.
- (b) An agency which provides protective services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission, and the investigation of the abuse or neglect of the child must be made by an agency other than the one alleged to have committed the act or omission.
- 3. A report must be made pursuant to subsection 1 by the following persons:
- (a) A physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, [physician's] physician assistant, psychiatrist, psychologist, marriage and family therapist, alcohol or drug abuse counselor, advanced emergency medical technician or other person providing medical services licensed or certified in this state;
- (b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of suspected abuse or neglect of a child by a member of the staff of the hospital;
 - (c) A coroner;
- (d) A clergyman, practitioner of Christian Science or religious healer, unless he has acquired the knowledge of the abuse or neglect from the offender during a confession;
- (e) A social worker and an administrator, teacher, librarian or counselor of a school;
- (f) Any person who maintains or is employed by a facility or establishment that provides care for children, children's camp or other public or private facility, institution or agency furnishing care to a child;
 - (g) Any person licensed to conduct a foster home;
- (h) Any officer or employee of a law enforcement agency or an adult or juvenile probation officer;
- (i) An attorney, unless he has acquired the knowledge of the abuse or neglect from a client who is or may be accused of the abuse or neglect; and
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding abuse or neglect of a child and refers them to persons and agencies where their requests and needs can be met.
 - 4. A report may be made by any other person.
- 5. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that a child has died as a result of abuse or neglect, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the report and submit to an agency which provides protective services his written findings. The written findings must include, if

obtainable, the information required pursuant to the provisions of subsection 2 of NRS 432B.230.

Sec. 58. NRS 441A.110 is hereby amended to read as follows: 441A.110 "Provider of health care" means a physician, nurse, **[physician's]** *physician* assistant or veterinarian licensed in accordance with state law.

Sec. 59. NRS 442.003 is hereby amended to read as follows:

442.003 As used in this chapter, unless the context requires otherwise:

- 1. "Advisory board" means the advisory board on maternal and child health.
 - 2. "Department" means the department of human resources.
 - 3. "Director" means the director of the department.
 - 4. "Fetal alcohol syndrome" includes fetal alcohol effects.
 - 5. "Health division" means the health division of the department.
 - 6. "Obstetric center" has the meaning ascribed to it in NRS 449.0155.
 - 7. "Provider of health care or other services" means:
- (a) An alcohol and drug abuse counselor who is licensed or certified pursuant to chapter 641C of NRS;
- (b) A physician or a **[physician's]** physician assistant who is licensed pursuant to chapter 630 of NRS and who practices in the area of obstetrics and gynecology, family practice, internal medicine, pediatrics or psychiatry;
 - (c) A licensed nurse;
 - (d) A licensed psychologist;
 - (e) A licensed marriage and family therapist;
 - (f) A licensed social worker; or
 - (g) The holder of a certificate of registration as a pharmacist.
 - **Sec. 60.** NRS 442.119 is hereby amended to read as follows:
- 442.119 As used in NRS 442.119 to 442.1198, inclusive, unless the context otherwise requires:
- 1. "Health officer" includes a local health officer, a city health officer, a county health officer and a district health officer.
 - 2. "Medicaid" has the meaning ascribed to it in NRS 439B.120.
 - 3. "Medicare" has the meaning ascribed to it in NRS 439B.130.
 - 4. "Provider of prenatal care" is limited to:
- (a) A physician who is licensed in this state and certified in obstetrics and gynecology, family practice, general practice or general surgery.
- (b) A certified nurse midwife who is licensed by the state board of nursing.
- (c) An advanced practitioner of nursing who has specialized skills and training in obstetrics or family nursing.
- (d) A [physicians'] physician assistant who has specialized skills and training in obstetrics or family practice.
 - Sec. 61. NRS 449.0175 is hereby amended to read as follows:
- 449.0175 "Rural clinic" means a facility located in an area that is not designated as an urban area by the Bureau of the Census, where medical services are provided by a **[physician's]** *physician* assistant or an advanced practitioner of nursing under the supervision of a licensed physician.

- Sec. 62. NRS 450B.160 is hereby amended to read as follows:
- 450B.160 1. The health authority may issue licenses to attendants and to firemen employed by or serving as volunteers with a fire-fighting agency
- 2. Each license must be evidenced by a card issued to the holder of the license, is valid for a period not to exceed 2 years and is renewable.
 - 3. An applicant for a license must file with the health authority:
- (a) A current, valid certificate evidencing his successful completion of a program or course for training in emergency medical technology, if he is applying for a license as an attendant, or, if a volunteer attendant, at a level of skill determined by the board.
- (b) A current valid certificate evidencing his successful completion of a program for training as an intermediate emergency medical technician or advanced emergency medical technician if he is applying for a license as a fireman with a fire-fighting agency.
 - (c) A signed statement showing:
 - (1) His name and address;
 - (2) His employer's name and address; and
 - (3) A description of his duties.
- (d) Such other certificates for training and such other items as the board may specify.
- 4. The board shall adopt such regulations as it determines are necessary for the issuance, suspension, revocation and renewal of licenses.
- 5. Each operator of an ambulance or air ambulance and each fire-fighting agency shall annually file with the health authority a complete list of the licensed persons in its service.
- 6. Licensed physicians, registered nurses and licensed [physicians'] physician assistants may serve as attendants without being licensed under the provisions of this section. A registered nurse who performs advanced emergency care in an ambulance or air ambulance must perform the care in accordance with the regulations of the state board of nursing. A licensed [physicians'] physician assistant who performs advanced emergency care in an ambulance or air ambulance must perform the care in accordance with the regulations of the [state] board of medical examiners.
- 7. Each licensed physician, registered nurse and licensed [physicians'] physician assistant who serves as an attendant must have current certification of completion of training in:
- (a) Advanced life-support procedures for patients who require cardiac care:
- (b) Life-support procedures for pediatric patients who require cardiac care; or
- (c) Life-support procedures for patients with trauma that are administered before the arrival of those patients at a hospital.
- The certification must be issued by the board of medical examiners for a physician or licensed [physician's] physician assistant or by the state board of nursing for a registered nurse.
- 8. The board of medical examiners and the state board of nursing shall issue a certificate pursuant to subsection 7 if the licensed physician, licensed [physician's] physician assistant or registered nurse attends:

- (a) A course offered by a national organization which is nationally recognized for issuing such certification;
- (b) Training conducted by the operator of an ambulance or air ambulance; or
 - (c) Any other course or training,

approved by the board of medical examiners or the state board of nursing, whichever is issuing the certification. The board of medical examiners and the state board of nursing may require certification of training in all three areas set forth in subsection 7 for a licensed physician, licensed [physician's] physician assistant or registered nurse who primarily serves as an attendant in a county whose population is 400,000 or more.

Sec. 63. NRS 453.038 is hereby amended to read as follows:

453.038 "Chart order" means an order entered on the chart of a

- 1. In a hospital, facility for intermediate care or facility for skilled nursing which is licensed as such by the health division of the department;
- Under emergency treatment in a hospital by a physician, dentist or podiatric physician, or on the written or oral order of a physician, physician's physician assistant, dentist or podiatric physician authorizing the administration of a drug to the patient.

Sec. 64. NRS 453.091 is hereby amended to read as follows:

- 453.091 1. "Manufacture" means the production, preparation, propagation, compounding, conversion or processing of a substance, either directly or indirectly by extraction from substances of natural origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis, and includes any packaging or repackaging of the substance or labeling or relabeling of its container.
- 2. "Manufacture" does not include the preparation or compounding of a substance by a person for his own use or the preparation, compounding, packaging or labeling of a substance by a physician, [physician's] **physician** assistant, dentist, podiatric physician or veterinarian:
- (a) As an incident to his administering or dispensing of a substance in the course of his professional practice; or
- (b) By his authorized agent under his supervision, for the purpose of, or as an incident to, research, teaching or chemical analysis and not for sale.

Sec. 65. NRS 453.126 is hereby amended to read as follows: 453.126 "Practitioner" means:

- 1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his profession in this state and is registered pursuant to this chapter.
- 2. An advanced practitioner of nursing who holds a certificate from the state board of nursing and a certificate from the state board of pharmacy authorizing him to dispense controlled substances.
- 3. A scientific investigator or a pharmacy, hospital or other institution licensed, registered or otherwise authorized in this state to distribute, dispense, conduct research with respect to, to administer, or use in teaching or chemical analysis, a controlled substance in the course of professional practice or research.

- 4. A euthanasia technician who is licensed by the Nevada state board of veterinary medical examiners and registered pursuant to this chapter, while he possesses or administers sodium pentobarbital pursuant to his license and registration.
 - 5. A [physician's] physician assistant who:
- (a) Holds a license from the board of medical examiners; for a certificate from the state board of osteopathic medicine; and
- (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances under the supervision of a physician for esteopathic physician as required by chapter 630 for 6331 of NRS.
 - 6. An osteopathic physician's assistant who:
- (a) Holds a certificate from the state board of osteopathic medicine; and
- (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances under the supervision of an osteopathic physician as required by chapter 633 of NRS.
- 7. An optometrist who is certified by the Nevada state board of optometry to prescribe and administer therapeutic pharmaceutical agents pursuant to NRS 636.288, when he prescribes or administers therapeutic pharmaceutical agents within the scope of his certification.

Sec. 66. NRS 453.128 is hereby amended to read as follows:

453.128 1. "Prescription" means:

- (a) An order given individually for the person for whom prescribed, directly from a physician, *osteopathic* physician's assistant, *physician assistant*, dentist, podiatric physician, optometrist or veterinarian, or his agent, to a pharmacist or indirectly by means of an order signed by the practitioner or an electronic transmission from the practitioner to a pharmacist; or
- (b) A chart order written for an inpatient specifying drugs which he is to take home upon his discharge.
- 2. The term does not include a chart order written for an inpatient for use while he is an inpatient.
 - **Sec. 67.** NRS 453.226 is hereby amended to read as follows:
- 453.226 1. Every practitioner or other person who dispenses any controlled substance within this state or who proposes to engage in the dispensing of any controlled substance within this state shall obtain biennially a registration issued by the board in accordance with its regulations.
- 2. A person registered by the board in accordance with the provisions of NRS 453.011 to 453.552, inclusive, to dispense or conduct research with controlled substances may possess, dispense or conduct research with those substances to the extent authorized by the registration and in conformity with the other provisions of those sections.
- 3. The following persons are not required to register and may lawfully possess and distribute controlled substances pursuant to the provisions of NRS 453.011 to 453.552, inclusive:
- (a) An agent or employee of a registered dispenser of a controlled substance if he is acting in the usual course of his business or employment;

- (b) A common or contract carrier or warehouseman, or an employee thereof, whose possession of any controlled substance is in the usual course of business or employment;
- (c) An ultimate user or a person in possession of any controlled substance pursuant to a lawful order of a physician, *osteopathic* physician's assistant, *physician assistant*, dentist, podiatric physician or veterinarian or in lawful possession of a schedule V substance; or
 - (d) A physician who:
- (1) Holds a locum tenens license issued by the board of medical examiners or a temporary license issued by the state board of osteopathic medicine; and
- (2) Is registered with the Drug Enforcement Administration at a location outside this state.
- 4. The board may waive the requirement for registration of certain dispensers if it finds it consistent with the public health and safety.
- 5. A separate registration is required at each principal place of business or professional practice where the applicant dispenses controlled substances.
- 6. The board may inspect the establishment of a registrant or applicant for registration in accordance with the board's regulations.
 - **Sec. 68.** NRS 453.336 is hereby amended to read as follows:
- 453.336 1. A person shall not knowingly or intentionally possess a controlled substance, unless the substance was obtained directly from, or pursuant to, a prescription or order of a physician, *osteopathic* physician's assistant, *physician assistant*, dentist, podiatric physician, optometrist or veterinarian while acting in the course of his professional practice, or except as otherwise authorized by the provisions of NRS 453.011 to 453.552, inclusive.
- 2. Except as otherwise provided in subsections 3, 4 and 5 and in NRS 453.3363, and unless a greater penalty is provided in NRS 212.160, 453.3385, 453.339 or 453.3395, a person who violates this section shall be punished:
- (a) For the first or second offense, if the controlled substance is listed in schedule I, II, III or IV, for a category E felony as provided in NRS 193.130.
- (b) For a third or subsequent offense, if the controlled substance is listed in schedule I, II, III or IV, or if the offender has previously been convicted two or more times in the aggregate of any violation of the law of the United States or of any state, territory or district relating to a controlled substance, for a category D felony as provided in NRS 193.130, and may be further punished by a fine of not more than \$20,000.
- (c) For the first offense, if the controlled substance is listed in schedule V, for a category E felony as provided in NRS 193.130.
- (d) For a second or subsequent offense, if the controlled substance is listed in schedule V, for a category D felony as provided in NRS 193.130.
- 3. Unless a greater penalty is provided in NRS 212.160, 453.337 or 453.3385, a person who is convicted of the possession of flunitrazepam or gamma-hydroxybutyrate, or any substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor, is guilty of a category B felony and shall be punished by imprisonment in the state

prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years.

- 4. Unless a greater penalty is provided in NRS 212.160, a person who is less than 21 years of age and is convicted of the possession of less than 1 ounce of marijuana:
- (a) For the first and second offense, is guilty of a category E felony and shall be punished as provided in NRS 193.130.
- (b) For a third or subsequent offense, is guilty of a category D felony and shall be punished as provided in NRS 193.130, and may be further punished by a fine of not more than \$20,000.
- 5. Before sentencing under the provisions of subsection 4 for a first offense, the court shall require the parole and probation officer to submit a presentencing report on the person convicted in accordance with the provisions of NRS 176A.200. After the report is received but before sentence is pronounced the court shall:
- (a) Interview the person convicted and make a determination as to the possibility of his rehabilitation; and
- (b) Conduct a hearing at which evidence may be presented as to the possibility of rehabilitation and any other relevant information.
- 6. As used in this section, "controlled substance" includes flunitrazepam, gamma-hydroxybutyrate and each substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor.

Sec. 69. NRS 453.371 is hereby amended to read as follows:

453.371 As used in NRS 453.371 to 453.552, inclusive:

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

a hospital for the purpose of clinical training.

2. "Physician," ["physician's] "physician assistant," "dentist," "podiatric physician," "veterinarian," "pharmacist" and "euthanasia technician" mean persons authorized by a valid license to practice their respective professions in this state who are registered with the board.

Sec. 70. NRS 453.375 is hereby amended to read as follows:

- 453.375 A controlled substance may be possessed and administered by the following persons:
 - 1. A practitioner.
- 2. A registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a physician, **[physician*s] physician** assistant, dentist, podiatric physician or advanced practitioner of nursing, or pursuant to a chart order, for administration to a patient at another location.
 - 3. An advanced emergency medical technician:
 - (a) As authorized by regulation of:
- (1) The state board of health in a county whose population is less than 100,000; or
- (2) A county or district board of health in a county whose population is 100,000 or more; and
 - (b) In accordance with any applicable regulations of:
- (1) The state board of health in a county whose population is less than 100,000;
- (2) A county board of health in a county whose population is 100,000 or more; or

- (3) A district board of health created pursuant to NRS 439.370 in any county.
- 4. A respiratory therapist, at the direction of a physician or **[physician's]** physician assistant.
- 5. A medical student, student in training to become a [physician assistant or student nurse in the course of his studies at an approved college of medicine or school of professional or practical nursing, at the direction of a physician or [physician's] physician assistant and:
- (a) In the presence of a physician, **[physician's]** physician assistant or a registered nurse; or
- (b) Under the supervision of a physician, [physician's] physician assistant or a registered nurse if the student is authorized by the college or school to administer the substance outside the presence of a physician, [physician's] physician assistant or nurse.

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

- 6. An ultimate user or any person whom the ultimate user designates pursuant to a written agreement.
 - 7. Any person designated by the head of a correctional institution.
- 8. A veterinary technician at the direction of his supervising veterinarian.
- 9. In accordance with applicable regulations of the state board of health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.
- 10. In accordance with applicable regulations of the state board of pharmacy, an animal control officer, a wildlife biologist or an employee designated by a federal, state or local governmental agency whose duties include the control of domestic, wild and predatory animals.
 - **Sec. 71.** NRS 453.381 is hereby amended to read as follows:
- 453.381 1. In addition to the limitations imposed by NRS 453.256, a physician, [physician's] physician assistant, dentist or podiatric physician may prescribe or administer controlled substances only for a legitimate medical purpose and in the usual course of his professional practice, and he shall not prescribe, administer or dispense a controlled substance listed in schedule II for himself, his spouse or his children except in cases of emergency.
- 2. A veterinarian, in the course of his professional practice only, and not for use by a human being, may prescribe, possess and administer controlled substances, and he may cause them to be administered by a veterinary technician under his direction and supervision.
- 3. A euthanasia technician, within the scope of his license, and not for use by a human being, may possess and administer sodium pentobarbital.
- 4. A pharmacist shall not fill an order which purports to be a prescription if he has reason to believe that it was not issued in the usual course of the professional practice of a physician, [physician's] physician assistant, dentist, podiatric physician or veterinarian.

- 5. Any person who has obtained from a physician, [physician's] physician assistant, dentist, podiatric physician or veterinarian any controlled substance for administration to a patient during the absence of the physician, [physician's] physician assistant, dentist, podiatric physician or veterinarian shall return to him any unused portion of the substance when it is no longer required by the patient.
- 6. A manufacturer, wholesale supplier or other person legally able to furnish or sell any controlled substance listed in schedule II shall not provide samples of such a controlled substance to registrants.
- 7. A salesman of any manufacturer or wholesaler of pharmaceuticals shall not possess, transport or furnish any controlled substance listed in schedule II.
- 8. A person shall not dispense a controlled substance in violation of a regulation adopted by the board.

Sec. 72. NRS 453.391 is hereby amended to read as follows:

453.391 A person shall not:

- 1. Unlawfully take, obtain or attempt to take or obtain a controlled substance or a prescription for a controlled substance from a manufacturer, wholesaler, pharmacist, physician, [physician's] physician assistant, dentist, veterinarian or any other person authorized to administer, dispense or possess controlled substances.
- 2. While undergoing treatment and being supplied with any controlled substance or a prescription for any controlled substance from one practitioner, knowingly obtain any controlled substance or a prescription for a controlled substance from another practitioner without disclosing this fact to the second practitioner.

Sec. 73. NRS 454.00958 is hereby amended to read as follows:

454.00958 "Practitioner" means:

- 1. A physician, dentist, veterinarian or podiatric physician who holds a valid license to practice his profession in this state.
- 2. A pharmacy, hospital or other institution licensed or registered to distribute, dispense, conduct research with respect to or to administer a dangerous drug in the course of professional practice in this state.
- 3. When relating to the prescription of poisons, dangerous drugs and devices:
- (a) An advanced practitioner of nursing who holds a certificate from the state board of nursing and a certificate from the state board of pharmacy permitting him so to prescribe; or
- (b) A [physician's] physician assistant who holds a license from the [state] board of medical examiners and a certificate from the state board of pharmacy permitting him so to prescribe.
- 4. An optometrist who is certified to prescribe and administer dangerous drugs pursuant to NRS 636.288 when he prescribes or administers dangerous drugs which are within the scope of his certification.

Sec. 74. NRS 454.213 is hereby amended to read as follows:

- 454.213 A drug or medicine referred to in NRS 454.181 to 454.371, inclusive, may be possessed and administered by:
 - 1. A practitioner.

- 2. A [physician's] physician assistant at the direction of his supervising physician or a licensed dental hygienist acting in the office of and under the supervision of a dentist.
- 3. Except as otherwise provided in subsection 4, a registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a prescribing physician, dentist, podiatric physician or advanced practitioner of nursing, or pursuant to a chart order, for administration to a patient at another location.
- 4. In accordance with applicable regulations of the board, a registered nurse licensed to practice professional nursing or licensed practical nurse who is:
- (a) Employed by a health care agency or health care facility that is authorized to provide emergency care, or to respond to the immediate needs of a patient, in the residence of the patient; and
- (b) Acting under the direction of the medical director of that agency or facility who works in this state.
- 5. An intermediate emergency medical technician or an advanced emergency medical technician, as authorized by regulation of the state board of pharmacy and in accordance with any applicable regulations of:
- (a) The state board of health in a county whose population is less than 100,000;
- (b) A county board of health in a county whose population is 100,000 or more; or
- (c) A district board of health created pursuant to NRS 439.370 in any county.
- 6. A respiratory therapist employed in a health care facility. The therapist may possess and administer respiratory products only at the direction of a physician.
- 7. A dialysis technician, under the direction or supervision of a physician or registered nurse only if the drug or medicine is used for the process of renal dialysis.
- 8. A medical student or student nurse in the course of his studies at an approved college of medicine or school of professional or practical nursing, at the direction of a physician and:
 - (a) In the presence of a physician or a registered nurse; or
- (b) Under the supervision of a physician or a registered nurse if the student is authorized by the college or school to administer the drug or medicine outside the presence of a physician or nurse.

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

- 9. Any person designated by the head of a correctional institution.
- 10. An ultimate user or any person designated by the ultimate user pursuant to a written agreement.
- 11. A nuclear medicine technologist, at the direction of a physician and in accordance with any conditions established by regulation of the board.
- 12. A radiologic technologist, at the direction of a physician and in accordance with any conditions established by regulation of the board.

- 13. A chiropractic physician, but only if the drug or medicine is a topical drug used for cooling and stretching external tissue during therapeutic treatments.
- 14. A physical therapist, but only if the drug or medicine is a topical drug which is:
- (a) Used for cooling and stretching external tissue during therapeutic treatments; and
 - (b) Prescribed by a licensed physician for:
 - (1) Iontophoresis; or
 - (2) The transmission of drugs through the skin using ultrasound.
- 15. In accordance with applicable regulations of the state board of health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.
- 16. A veterinary technician at the direction of his supervising veterinarian.
- 17. In accordance with applicable regulations of the board, a registered pharmacist who:
- (a) Is trained in and certified to carry out standards and practices for immunization programs;
- (b) Is authorized to administer immunizations pursuant to written protocols from a physician; and
- (c) Administers immunizations in compliance with the "Standards of Immunization Practices" recommended and approved by the United States Public Health Service Advisory Committee on Immunization Practices.
 - Sec. 75. NRS 454.215 is hereby amended to read as follows:
 - 454.215 A dangerous drug may be dispensed by:
- 1. A registered pharmacist upon the legal prescription from a practitioner or to a pharmacy in a correctional institution upon the written order of the prescribing practitioner in charge;
- 2. A pharmacy in a correctional institution, in case of emergency, upon a written order signed by the chief medical officer;
- 3. A practitioner, or a **[physician's]** *physician* assistant if authorized by the board:
- 4. A registered nurse, when the nurse is engaged in the performance of any public health program approved by the board;
 - 5. A medical intern in the course of his internship;
- 6. An advanced practitioner of nursing who holds a certificate from the state board of nursing and a certificate from the state board of pharmacy permitting him to dispense dangerous drugs;
- 7. A registered nurse employed at an institution of the department of prisons to an offender in that institution; or
- 8. A registered pharmacist from an institutional pharmacy pursuant to regulations adopted by the board,
- except that no person may dispense a dangerous drug in violation of a regulation adopted by the board.
 - Sec. 76. NRS 454.221 is hereby amended to read as follows:
- 454.221 1. A person who furnishes any dangerous drug except upon the prescription of a practitioner is guilty of a category D felony and shall be punished as provided in NRS 193.130, unless the dangerous drug was obtained originally by a legal prescription.

- 2. The provisions of this section do not apply to the furnishing of any dangerous drug by:
 - (a) A practitioner to his patients;
 - (b) A [physician's] physician assistant if authorized by the board;
- (c) A registered nurse while participating in a public health program approved by the board, or an advanced practitioner of nursing who holds a certificate from the state board of nursing and a certificate from the state board of pharmacy permitting him to dispense dangerous drugs;
- (d) A manufacturer or wholesaler or pharmacy to each other or to a practitioner or to a laboratory under records of sales and purchases that correctly give the date, the names and addresses of the supplier and the buyer, the drug and its quantity;
- (e) A hospital pharmacy or a pharmacy so designated by a county health officer in a county whose population is 100,000 or more, or by a district health officer in any county within its jurisdiction or, in the absence of either, by the state health officer or his designated medical director of emergency medical services, to a person or agency described in subsection 3 of NRS 639.268 to stock ambulances or other authorized vehicles or replenish the stock; or
- (f) A pharmacy in a correctional institution to a person designated by the director of the department of prisons to administer a lethal injection to a person who has been sentenced to death.
 - **Sec. 77.** NRS 484.393 is hereby amended to read as follows:
- 484.393 1. The results of any blood test administered under the provisions of NRS 484.383 or 484.391 are not admissible in any hearing or criminal action arising out of acts alleged to have been committed by a person who was driving or in actual physical control of a vehicle while under the influence of intoxicating liquor or a controlled substance or who was engaging in any other conduct prohibited by NRS 484.379 or 484.3795 unless:
- (a) The blood tested was withdrawn by a physician, **[physician's] physician** assistant, registered nurse, licensed practical nurse, emergency medical technician or a technician, technologist or assistant employed in a medical laboratory;
- (b) The test was performed on whole blood, except if the sample was clotted when it was received by the laboratory, the test may be performed on blood serum or plasma; and
- (c) The person who withdrew the blood was authorized to do so by the appropriate medical licensing or certifying agency.
- 2. The limitation contained in paragraph (a) of subsection 1 does not apply to the taking of a chemical test of the urine, breath or other bodily substance.
- 3. No person listed in paragraph (a) of subsection 1 incurs any civil or criminal liability as a result of the administering of a blood test when requested by a police officer or the person to be tested to administer the test.

Sec. 78. Section 1 of Assembly Bill No. 78 of this session is hereby amended to read as follows:

Section 1. NRS 632.017 is hereby amended to read as follows:

- "Practice of practical nursing" means the performance of selected acts in the care of the ill, injured or infirm under the direction of a registered professional nurse, an advanced practitioner of nursing, a licensed physician, a licensed physician assistant, a licensed dentist or a licensed podiatric physician, not requiring the substantial specialized skill, judgment and knowledge required in professional
- **Sec. 79.** Section 2 of Assembly Bill No. 78 of this session is hereby amended to read as follows:
 - Sec. 2. NRS 632.018 is hereby amended to read as follows:
 - 632.018 "Practice of professional nursing" performance of any act in the observation, care and counsel of the ill, injured or infirm, in the maintenance of health or prevention of illness of others, in the supervision and teaching of other personnel, in the administration of medications and treatments as prescribed by an advanced practitioner of nursing, a licensed physician, a licensed physician assistant, a licensed dentist or a licensed podiatric physician, requiring substantial specialized judgment and skill based on knowledge and application of the principles of biological, physical and social science, but does not include acts of medical diagnosis or prescription of therapeutic or corrective measures.
- Sec. 80. Section 3 of Assembly Bill No. 78 of this session is hereby amended to read as follows:

 - Sec. 3. NRS 454.213 is hereby amended to read as follows: 454.213 A drug or medicine referred to in NRS 454.181 to 454.371, inclusive, may be possessed and administered by:
 - 1. A practitioner.
 - 2. A physician assistant at the direction of his supervising physician or a licensed dental hygienist acting in the office of and under the supervision of a dentist.
 - 3. Except as otherwise provided in subsection 4, a registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a prescribing physician, physician assistant, dentist, podiatric physician or advanced practitioner of nursing, or pursuant to a chart order, for administration to a patient at another location.
 - 4. In accordance with applicable regulations of the board, a registered nurse licensed to practice professional nursing or licensed practical nurse who is:
 - (a) Employed by a health care agency or health care facility that is authorized to provide emergency care, or to respond to the immediate needs of a patient, in the residence of the patient; and
 - (b) Acting under the direction of the medical director of that agency or facility who works in this state.

- 5. An intermediate emergency medical technician or an advanced emergency medical technician, as authorized by regulation of the state board of pharmacy and in accordance with any applicable regulations
- (a) The state board of health in a county whose population is less than 100,000:
- (b) A county board of health in a county whose population is 100,000 or more; or
- (c) A district board of health created pursuant to NRS 439.370 in any county.
- 6. A respiratory therapist employed in a health care facility. The therapist may possess and administer respiratory products only at the direction of a physician.
- 7. A dialysis technician, under the direction or supervision of a physician or registered nurse only if the drug or medicine is used for the process of renal dialysis.
- 8. A medical student or student nurse in the course of his studies at an approved college of medicine or school of professional or practical nursing, at the direction of a physician and:
 - (a) In the presence of a physician or a registered nurse; or
- (b) Under the supervision of a physician or a registered nurse if the student is authorized by the college or school to administer the drug or medicine outside the presence of a physician or nurse.

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

- 9. Any person designated by the head of a correctional institution. 10. An ultimate user or any person designated by the ultimate user pursuant to a written agreement.
- 11. A nuclear medicine technologist, at the direction of a physician and in accordance with any conditions established by regulation of the board.
- 12. A radiologic technologist, at the direction of a physician and in accordance with any conditions established by regulation of the board.
- 13. A chiropractic physician, but only if the drug or medicine is a topical drug used for cooling and stretching external tissue during therapeutic treatments.
- 14. A physical therapist, but only if the drug or medicine is a topical drug which is:
- (a) Used for cooling and stretching external tissue during therapeutic treatments; and
 - (b) Prescribed by a licensed physician for:
 - (1) Iontophoresis; or
 - (2) The transmission of drugs through the skin using ultrasound.
- 15. In accordance with applicable regulations of the state board of health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.

- 16. A veterinary technician at the direction of his supervising veterinarian.
- 17. In accordance with applicable regulations of the board, a registered pharmacist who:
- (a) Is trained in and certified to carry out standards and practices for immunization programs;
- (b) Is authorized to administer immunizations pursuant to written protocols from a physician; and
- (c) Administers immunizations in compliance with the "Standards of Immunization Practices" recommended and approved by the United States Public Health Service Advisory Committee on Immunization Practices.
- **Sec. 81.** Section 2 of Senate Bill No. 52 of this session is hereby amended to read as follows:
 - Sec. 2. NRS 639.0125 is hereby amended to read as follows: 639.0125 "Practitioner" means:
 - 1. A physician, dentist, veterinarian or podiatric physician who holds a walid license to practice his profession in this state;
 - 2. A hospital, pharmacy or other institution licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to or administer drugs in the course of professional practice or research in this state;
 - 3. An advanced practitioner of nursing who has been authorized to prescribe *controlled substances*, poisons, dangerous drugs and devices; or
 - 4. A physician assistant who:
 - (a) Holds a license issued by the board of medical examiners; and
 - (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of a physician as required by chapter 630 of NRS
 - 5. An osteopathic physician's assistant who:
 - (a) Holds a certificate issued by the state board of osteopathic medicine; and
 - (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of an osteopathic physician as required by chapter 633 of NRS.
- **Sec. 82.** Section 4 of Senate Bill No. 52 of this session is hereby amended to read as follows:
 - Sec. 4. NRS 453.038 is hereby amended to read as follows:
 - 453.038 "Chart order" means an order entered on the chart of a patient:
 - 1. In a hospital, facility for intermediate care or facility for skilled nursing which is licensed as such by the health division of the department; or

- 2. Under emergency treatment in a hospital by a physician, advanced practitioner of nursing, dentist or podiatric physician, or on the written or oral order of a physician, physician assistant, advanced practitioner of nursing, dentist or podiatric physician authorizing the administration of a drug to the patient.
- Sec. 83. Section 5 of Senate Bill No. 52 of this session is hereby amended to read as follows:

 - Sec. 5. NRS 453.091 is hereby amended to read as follows: 453.091 1. "Manufacture" means the production, preparation, propagation, compounding, conversion or processing of a substance, either directly or indirectly by extraction from substances of natural origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis, and includes any packaging or repackaging of the substance or labeling or relabeling of its container.
 - 2. "Manufacture" does not include the preparation or compounding of a substance by a person for his own use or the preparation, compounding, packaging or labeling of a substance by a physician, physician assistant, dentist, podiatric physician, advanced practitioner of nursing or veterinarian:
 - (a) As an incident to his administering or dispensing of a substance in the course of his professional practice; or
 - (b) By his authorized agent under his supervision, for the purpose of, or as an incident to, research, teaching or chemical analysis and not for sale.
- **Sec. 84.** Section 6 of Senate Bill No. 52 of this session is hereby amended to read as follows:
 - Sec. 6. NRS 453.126 is hereby amended to read as follows: 453.126 "Practitioner" means:

 - 1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his profession in this state and is registered pursuant to this chapter.
 - 2. An advanced practitioner of nursing who holds a certificate from the state board of nursing and a certificate from the state board of pharmacy authorizing him to dispense or to prescribe and dispense controlled substances.
 - 3. A scientific investigator or a pharmacy, hospital or other institution licensed, registered or otherwise authorized in this state to distribute, dispense, conduct research with respect to, to administer, or use in teaching or chemical analysis, a controlled substance in the course of professional practice or research.
 - 4. A euthanasia technician who is licensed by the Nevada state board of veterinary medical examiners and registered pursuant to this chapter, while he possesses or administers sodium pentobarbital pursuant to his license and registration.
 - A physician assistant who:
 - (a) Holds a license from the board of medical examiners; and
 - (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances under the supervision of a physician as required by chapter 630 of NRS.

- An osteopathic physician's assistant who:
- (a) Holds a certificate from the state board of osteopathic medicine: and
- (b) Is authorized by the board to possess, administer, prescribe or dispense controlled substances under the supervision of an osteopathic physician as required by chapter 633 of NRS.
- 7. An optometrist who is certified by the Nevada state board of optometry to prescribe and administer therapeutic pharmaceutical agents pursuant to NRS 636.288, when he prescribes or administers therapeutic pharmaceutical agents within the scope of his certification.
- Sec. 85. Section 7 of Senate Bill No. 52 of this session is hereby amended to read as follows:
 - Sec. 7. NRS 453.128 is hereby amended to read as follows: 453.128 1. "Prescription" means:

 - (a) An order given individually for the person for whom prescribed, directly from a physician, osteopathic physician's assistant, physician assistant, dentist, podiatric physician, optometrist, advanced practitioner of nursing or veterinarian, or his agent, to a pharmacist or indirectly by means of an order signed by the practitioner or an electronic transmission from the practitioner to a pharmacist; or
 - (b) A chart order written for an inpatient specifying drugs which he is to take home upon his discharge.
 - 2. The term does not include a chart order written for an inpatient for use while he is an inpatient.
- Sec. 86. Section 8 of Senate Bill No. 52 of this session is hereby amended to read as follows:

 - Sec. 8. NRS 453.226 is hereby amended to read as follows: 453.226 1. Every practitioner or other person who dispenses any controlled substance within this state or who proposes to engage in the dispensing of any controlled substance within this state shall obtain biennially a registration issued by the board in accordance with its regulations.
 - 2. A person registered by the board in accordance with the provisions of NRS 453.011 to 453.552, inclusive, to dispense or conduct research with controlled substances may possess, dispense or conduct research with those substances to the extent authorized by the registration and in conformity with the other provisions of those sections.
 - The following persons are not required to register and may lawfully possess and distribute controlled substances pursuant to the provisions of NRS 453.011 to 453.552, inclusive:
 - (a) An agent or employee of a registered dispenser of a controlled substance if he is acting in the usual course of his business or employment;
 - (b) A common or contract carrier or warehouseman, or an employee thereof, whose possession of any controlled substance is in the usual course of business or employment;
 - (c) An ultimate user or a person in possession of any controlled substance pursuant to a lawful order of a physician, osteopathic

physician's assistant, physician assistant, dentist, *advanced practitioner of nursing*, podiatric physician or veterinarian or in lawful possession of a schedule V substance; or

(d) A physician who:

- (1) Holds a locum tenens license issued by the board of medical examiners or a temporary license issued by the state board of osteopathic medicine; and
- (2) Is registered with the Drug Enforcement Administration at a location outside this state.
- 4. The board may waive the requirement for registration of certain dispensers if it finds it consistent with the public health and safety.
- 5. A separate registration is required at each principal place of business or professional practice where the applicant dispenses controlled substances.
- 6. The board may inspect the establishment of a registrant or applicant for registration in accordance with the board's regulations.
- **Sec. 87.** Section 9 of Senate Bill No. 52 of this session is hereby amended to read as follows:
 - Sec. 9. NRS 453.336 is hereby amended to read as follows:
 - 453.336 1. A person shall not knowingly or intentionally possess a controlled substance, unless the substance was obtained directly from, or pursuant to, a prescription or order of a physician, osteopathic physician's assistant, physician assistant, dentist, podiatric physician, optometrist , *advanced practitioner of nursing* or veterinarian while acting in the course of his professional practice, or except as otherwise authorized by the provisions of NRS 453.011 to 453.552, inclusive.
 - 2. Except as otherwise provided in subsections 3, 4 and 5 and in NRS 453.3363, and unless a greater penalty is provided in NRS 212.160, 453.3385, 453.339 or 453.3395, a person who violates this section shall be punished:
 - (a) For the first or second offense, if the controlled substance is listed in schedule I, II, III or IV, for a category E felony as provided in NRS 193.130.
 - (b) For a third or subsequent offense, if the controlled substance is listed in schedule I, II, III or IV, or if the offender has previously been convicted two or more times in the aggregate of any violation of the law of the United States or of any state, territory or district relating to a controlled substance, for a category D felony as provided in NRS 193.130, and may be further punished by a fine of not more than \$20,000.
 - (c) For the first offense, if the controlled substance is listed in schedule V, for a category E felony as provided in NRS 193.130.
 - (d) For a second or subsequent offense, if the controlled substance is listed in schedule V, for a category D felony as provided in NRS 193.130.
 - 3. Unless a greater penalty is provided in NRS 212.160, 453.337 or 453.3385, a person who is convicted of the possession of flunitrazepam or gamma-hydroxybutyrate, or any substance for which

flunitrazepam or gamma-hydroxybutyrate is an immediate precursor, is guilty of a category B felony and shall be punished by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years.

4. Unless a greater penalty is provided in NRS 212.160, a person who is less than 21 years of age and is convicted of the possession of less than 1 ounce of marijuana:

(a) For the first and second offense, is guilty of a category E felony and shall be punished as provided in NRS 193.130.

- (b) For a third or subsequent offense, is guilty of a category D felony and shall be punished as provided in NRS 193.130, and may be further punished by a fine of not more than \$20,000.
- 5. Before sentencing under the provisions of subsection 4 for a first offense, the court shall require the parole and probation officer to submit a presentencing report on the person convicted in accordance with the provisions of NRS 176A.200. After the report is received but before sentence is pronounced the court shall:
- (a) Interview the person convicted and make a determination as to the possibility of his rehabilitation; and
- (b) Conduct a hearing at which evidence may be presented as to the possibility of rehabilitation and any other relevant information.
- 6. As used in this section, "controlled substance" includes flunitrazepam, gamma-hydroxybutyrate and each substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor.

Sec. 88. Section 10 of Senate Bill No. 52 of this session is hereby amended to read as follows:

- Sec. 10. NRS 453.371 is hereby amended to read as follows: 453.371 As used in NRS 453.371 to 453.552, inclusive: 1. "Advanced practitioner of nursing" means a person who holds a certificate of recognition granted pursuant to NRS 632.237 and is registered with the board.
- 2. "Medical intern" means a medical graduate acting as an assistant in a hospital for the purpose of clinical training.

"Physician," "physician assistant,"

- 3. "Pharmacist" means a person who holds a certificate of registration issued pursuant to NRS 639.127 and is registered with the board.
- 4. "Physician," "dentist," "podiatric physician," ["veterinarian," "pharmacist"] "veterinarian" and "euthanasia technician" mean persons authorized by a [valid] license to practice their respective professions in this state who are registered with the board.
- "Physician assistant" means a person who is registered with the board and:
 - (a) Holds a license issued pursuant to NRS 630.273; or
 - (b) Holds a certificate issued pursuant to NRS 633.451.
- Sec. 89. Section 12 of Senate Bill No. 52 of this session is hereby amended to read as follows:

Sec. 12. NRS 453.381 is hereby amended to read as follows:

453.381 1. In addition to the limitations imposed by NRS 453.256, a physician, physician assistant, dentist, advanced practitioner of nursing or podiatric physician may prescribe or administer controlled substances only for a legitimate medical purpose and in the usual course of his professional practice, and he shall not prescribe, administer or dispense a controlled substance listed in schedule II for himself, his spouse or his children except in cases of emergency.

- 2. A veterinarian, in the course of his professional practice only, and not for use by a human being, may prescribe, possess and administer controlled substances, and he may cause them to be administered by a veterinary technician under his direction and supervision.
- 3. A euthanasia technician, within the scope of his license, and not for use by a human being, may possess and administer sodium
- 4. A pharmacist shall not fill an order which purports to be a prescription if he has reason to believe that it was not issued in the usual course of the professional practice of a physician, physician assistant, dentist, advanced practitioner of nursing, podiatric physician or veterinarian.
- 5. Any person who has obtained from a physician, physician assistant, dentist, advanced practitioner of nursing, podiatric physician or veterinarian any controlled substance for administration to a patient during the absence of the physician, physician assistant, dentist, advanced practitioner of nursing, podiatric physician or veterinarian shall return to him any unused portion of the substance when it is no longer required by the patient.
- 6. A manufacturer, wholesale supplier or other person legally able to furnish or sell any controlled substance listed in schedule II shall not provide samples of such a controlled substance to registrants.
- 7. A salesman of any manufacturer or wholesaler of pharmaceuticals shall not possess, transport or furnish any controlled substance listed in schedule II.
- 8. A person shall not dispense a controlled substance in violation of a regulation adopted by the board.
- Sec. 90. Section 13 of Senate Bill No. 52 of this session is hereby amended to read as follows:
 - Sec. 13. NRS 453.391 is hereby amended to read as follows: 453.391 A person shall not:

 - 1. Unlawfully take, obtain or attempt to take or obtain a controlled substance or a prescription for a controlled substance from a manufacturer, wholesaler, pharmacist, physician, physician assistant, dentist, advanced practitioner of nursing, veterinarian or any other person authorized to administer, dispense or possess controlled substances.
 - 2. While undergoing treatment and being supplied with any controlled substance or a prescription for any controlled substance from one practitioner, knowingly obtain any controlled substance or a prescription for a controlled substance from another practitioner without disclosing this fact to the second practitioner.

- **Sec. 91.** 1. NRS 630.272, 630.274, 640B.010, 640B.020, 640B.030, 640B.040, 640B.050, 640B.080, 640B.100, 640B.110 and 640B.150 are hereby repealed.
 - 2. NRS 630.256 is hereby repealed.
- **Sec. 92.** A person who, on July 1, 2001, holds a license as a physician's assistant issued by the board of medical examiners shall be deemed to hold a license as a physician assistant until his license as a physician's assistant is renewed as a license as a physician assistant, expires or is revoked, whichever occurs first.
- **Sec. 93.** Notwithstanding the amendatory provisions of section 44 of this act to the contrary, a practitioner of respiratory care who, on July 1, 2001, is certified to practice respiratory care in this state pursuant to chapter 640B of NRS may continue to practice respiratory care in this state pursuant to the certification, but must obtain a license from the board of medical examiners before January 1, 2002. On and after January 1, 2002, a person shall not practice respiratory care in this state unless he holds a license issued by the board of medical examiners.

Sec. 94. 1. This section becomes effective upon passage and

approval.

- 2. Sections 1 to 90, inclusive, subsection 1 of section 91 and sections 92, 93 and 95 of this act become effective upon passage and approval for the purpose of adopting regulations and taking such other actions as necessary to regulate practitioners of respiratory care, and on July 1, 2001, for all other purposes.
- 3. Subsection 2 of section 91 of this act becomes effective at 12:01 a.m. on July 1, 2001.
- 4. The amendatory provisions of sections 8, 19, 24, 26 and 41 of this act expire by limitation on the date on which the provisions of 42 U.S.C. § 666 requiring each state to establish procedures under which the state has authority to withhold or suspend, or to restrict the use of professional, occupational and recreational licenses of persons who:
- (a) Have failed to comply with a subpoena or warrant relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of a child; or
- (b) Are in arrears in the payment for the support of one or more children,

are repealed by the Congress of the United States.

- Sec. 95. 1. Except as otherwise provided in subsection 2, the legislative counsel shall:
- (a) In preparing the reprint and supplements to the Nevada Revised Statutes, appropriately change any references to physician's assistant or any variation thereof, to physician assistant, or any appropriate variation thereof.
- (b) In preparing supplements to the Nevada Administrative Code, appropriately change any references to physician's assistant or any variation thereof, to physician assistant, or any appropriate variation thereof.

2. The legislative counsel shall not, pursuant to subsection 1, change any references to osteopathic physician's assistant or any variation thereof that appear in the Nevada Revised Statutes or the Nevada Administrative Code.

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