

ASSEMBLY BILL NO. 120—ASSEMBLYMEN GERHARDT, OHRENSCHALL,
KOIVISTO, ANDERSON, ATKINSON, BUCKLEY, CLABORN,
CONKLIN, DENIS, GIUNCHIGLIANI, HOGAN, HORNE,
KIRKPATRICK, LESLIE, MANENDO, MORTENSON, MUNFORD,
OCEGUERA, PARKS, PARNELL, PERKINS, PIERCE AND SMITH

FEBRUARY 23, 2005

JOINT SPONSORS: SENATORS CARLTON, CARE,
COFFIN AND TITUS

Referred to Committee on Commerce and Labor

SUMMARY—Requires physicians to report to their licensing boards certain information concerning performance of office-based surgery. (BDR 54-888)

FISCAL NOTE: Effect on Local Government: No.
Effect on the State: No.

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

AN ACT relating to physicians; requiring a physician licensed to practice medicine or osteopathic medicine to report annually to the appropriate licensing board information concerning certain office-based surgery performed by him; providing that the failure to submit a report or knowingly filing false information in a report constitutes grounds for initiating disciplinary action; requiring the licensing boards of such physicians biennially to compile and report such information to the Governor and the Legislature; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

- 1 Existing law requires medical doctors to submit certain information to the
2 Board of Medical Examiners when applying for biennial registration. (NRS
3 630.267) Under existing law, osteopathic physicians must submit certain
4 information to the State Board of Osteopathic Medicine when annually renewing
5 their license. (NRS 633.471) Existing law requires the Board of Medical Examiners



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6 and the State Board of Osteopathic Medicine to submit biennial reports concerning
7 the activities of licensees to the Governor and to the Legislature. (NRS 630.130,
8 633.286)

9 This bill requires medical doctors and osteopathic physicians to report annually
10 to the appropriate licensing board information concerning office-based surgeries
11 they performed which required sedation or general anesthesia including information
12 concerning any unexpected occurrence involving death or injury. This bill provides
13 that the failure to submit a report or knowingly filing false information in a report
14 constitutes grounds for initiating disciplinary action.

15 This bill also requires the Board of Medical Examiners and the State Board of
16 Osteopathic Medicine to include in their biennial reports to the Governor and
17 Legislature information received from licensees regarding office-based surgeries
18 involving sedation or general anesthesia.

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

1 **Section 1.** Chapter 630 of NRS is hereby amended by adding
2 thereto a new section to read as follows:

3 *1. The Board shall require each holder of a license to
4 practice medicine to submit annually to the Board, on a form
5 provided by the Board, and in the format required by the Board by
6 regulation, a report:*

7 *(a) Stating the number and type of surgeries requiring
8 conscious sedation, deep sedation or general anesthesia performed
9 by the holder of the license at his office or any other facility,
10 excluding any surgical care performed:*

11 *(1) At a medical facility as that term is defined in NRS
12 449.0151; or*

13 *(2) Outside of this State; and*

14 *(b) Reporting the occurrence of any sentinel event arising
15 from any such surgery.*

16 *2. Failure to submit a report or knowingly filing false
17 information in a report constitutes grounds for initiating
18 disciplinary action.*

19 *3. The Board shall:*

20 *(a) Collect and maintain reports received pursuant to
21 subsection 1; and*

22 *(b) Ensure that the reports, and any additional documents
23 created from the reports, are protected adequately from fire, theft,
24 loss, destruction and other hazards, and from unauthorized
25 access.*

26 *4. A report received pursuant to subsection 1 is confidential,
27 not subject to subpoena or discovery, and not subject to inspection
28 by the general public.*

29 *5. As used in this section:*



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1 (a) "Conscious sedation" means a minimally depressed
2 level of consciousness, produced by a pharmacologic or
3 nonpharmacologic method, or a combination thereof, in which the
4 patient retains the ability independently and continuously to
5 maintain an airway and to respond appropriately to physical
6 stimulation and verbal commands.

7 (b) "Deep sedation" means a controlled state of
8 depressed consciousness, produced by a pharmacologic or
9 nonpharmacologic method, or a combination thereof, and
10 accompanied by a partial loss of protective reflexes and the
11 inability to respond purposefully to verbal commands.

12 (c) "General anesthesia" means a controlled state
13 of unconsciousness, produced by a pharmacologic or
14 nonpharmacologic method, or a combination thereof, and
15 accompanied by partial or complete loss of protective reflexes and
16 the inability independently to maintain an airway and respond
17 purposefully to physical stimulation or verbal commands.

18 (d) "Sentinel event" means an unexpected occurrence
19 involving death or serious physical or psychological injury or the
20 risk thereof, including, without limitation, any process variation
21 for which a recurrence would carry a significant chance of serious
22 adverse outcome. The term includes loss of limb or function.

23 Sec. 2. NRS 630.130 is hereby amended to read as follows:

24 630.130 1. In addition to the other powers and duties
25 provided in this chapter, the Board shall, in the interest of the public,
26 judiciously:

27 (a) Enforce the provisions of this chapter;

28 (b) Establish by regulation standards for licensure under this
29 chapter;

30 (c) Conduct examinations for licensure and establish a system of
31 scoring for those examinations;

32 (d) Investigate the character of each applicant for a license and
33 issue licenses to those applicants who meet the qualifications set by
34 this chapter and the Board; and

35 (e) Institute a proceeding in any court to enforce its orders or the
36 provisions of this chapter.

37 2. On or before February 15 of each odd-numbered year, the
38 Board shall submit to the Governor and to the Director of the
39 Legislative Counsel Bureau for transmittal to the next regular
40 session of the Legislature a written report compiling:

41 (a) Disciplinary action taken by the Board during the previous
42 biennium against physicians for malpractice or negligence; and

43 (b) Information reported to the Board during the previous
44 biennium pursuant to NRS 630.3067, 630.3068, **section 1 of this**



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1 **act**, subsections 2 and 3 of NRS 630.307 and NRS 690B.250 and
2 690B.260.

3 → The report must include only aggregate information for statistical
4 purposes and exclude any identifying information related to a
5 particular person.

6 3. The Board may adopt such regulations as are necessary or
7 desirable to enable it to carry out the provisions of this chapter.

8 **Sec. 3.** Chapter 633 of NRS is hereby amended by adding
9 thereto a new section to read as follows:

10 ***1. The Board shall require each holder of a license issued
11 pursuant to this chapter to submit annually to the Board, on a
12 form provided by the Board, and in the format required by the
13 Board by regulation, a report:***

14 ***(a) Stating the number and type of surgeries requiring
15 conscious sedation, deep sedation or general anesthesia performed
16 by the holder of the license at his office or any other facility,
17 excluding any surgical care performed:***

18 ***(1) At a medical facility as that term is defined in NRS
19 449.0151; or***

20 ***(2) Outside of this State; and***

21 ***(b) Reporting the occurrence of any sentinel event arising
22 from any such surgery.***

23 ***2. Failure to submit a report or knowingly filing false
24 information in a report constitutes grounds for initiating
25 disciplinary action.***

26 ***3. The Board shall:***

27 ***(a) Collect and maintain reports received pursuant to
28 subsection 1; and***

29 ***(b) Ensure that the reports, and any additional documents
30 created from the reports, are protected adequately from fire, theft,
31 loss, destruction and other hazards, and from unauthorized
32 access.***

33 ***4. A report received pursuant to subsection 1 is confidential,
34 not subject to subpoena or discovery, and not subject to inspection
35 by the general public.***

36 ***5. As used in this section:***

37 ***(a) "Conscious sedation" means a minimally depressed
38 level of consciousness, produced by a pharmacologic or
39 nonpharmacologic method, or a combination thereof, in which the
40 patient retains the ability independently and continuously to
41 maintain an airway and to respond appropriately to physical
42 stimulation and verbal commands.***

43 ***(b) "Deep sedation" means a controlled state of
44 depressed consciousness, produced by a pharmacologic or
45 nonpharmacologic method, or a combination thereof, and***



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1 accompanied by a partial loss of protective reflexes and the
2 inability to respond purposefully to verbal commands.

3 (c) "General anesthesia" means a controlled state
4 of unconsciousness, produced by a pharmacologic or
5 nonpharmacologic method, or a combination thereof, and
6 accompanied by partial or complete loss of protective reflexes and
7 the inability independently to maintain an airway and respond
8 purposefully to physical stimulation or verbal commands.

9 (d) "Sentinel event" means an unexpected occurrence
10 involving death or serious physical or psychological injury or the
11 risk thereof, including, without limitation, any process variation
12 for which a recurrence would carry a significant chance of serious
13 adverse outcome. The term includes loss of limb or function.

14 Sec. 4. NRS 633.286 is hereby amended to read as follows:

15 633.286 1. On or before February 15 of each odd-numbered
16 year, the Board shall submit to the Governor and to the Director of
17 the Legislative Counsel Bureau for transmittal to the next regular
18 session of the Legislature a written report compiling:

19 (a) Disciplinary action taken by the Board during the previous
20 biennium against osteopathic physicians for malpractice or
21 negligence; and

22 (b) Information reported to the Board during the previous
23 biennium pursuant to NRS 633.526, 633.527, **and section 3 of this**
24 **act**, subsections 2 and 3 of NRS 633.533 and NRS 690B.250 and
25 690B.260.

26 2. The report must include only aggregate information for
27 statistical purposes and exclude any identifying information related
28 to a particular person.



