

SENATE BILL NO. 388—COMMITTEE ON
COMMERCE, LABOR AND ENERGY

(ON BEHALF OF THE LEGISLATIVE COMMITTEE ON HEALTH CARE)

MARCH 28, 2011

Referred to Committee on Commerce, Labor and Energy

SUMMARY—Establishes provisions concerning medical assistants.
(BDR 40-189)

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

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

AN ACT relating to health care; authorizing medical assistants to possess and administer dangerous drugs under certain circumstances; establishing provisions concerning the employment and supervision of medical assistants; prescribing requirements for medical assistants; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law sets forth the list of persons who may possess and administer dangerous drugs in this State. (NRS 454.213) **Sections 1 and 7** of this bill authorize medical assistants, under the supervision of a physician or physician assistant, to possess and administer dangerous drugs.

Sections 4 and 10 of this bill authorize a physician to employ a medical assistant and require persons employed as medical assistants to obtain certification from certain approved organizations. **Sections 4 and 10** also require the Board of Medical Examiners and the State Board of Osteopathic Medicine to adopt regulations relating to the employment, supervision and qualifications of medical assistants.

Sections 6 and 12 of this bill provide that failure to supervise adequately a medical assistant is grounds for disciplinary action.



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

1 **Section 1.** NRS 454.213 is hereby amended to read as follows:

2 454.213 A drug or medicine referred to in NRS 454.181 to
3 454.371, inclusive, may be possessed and administered by:

4 1. A practitioner.

5 2. A physician assistant licensed pursuant to chapter 630 or
6 633 of NRS, at the direction of his or her supervising physician or a
7 licensed dental hygienist acting in the office of and under the
8 supervision of a dentist.

9 3. Except as otherwise provided in subsection 4, a registered
10 nurse licensed to practice professional nursing or licensed practical
11 nurse, at the direction of a prescribing physician, physician assistant
12 licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric
13 physician or advanced practitioner of nursing, or pursuant to a chart
14 order, for administration to a patient at another location.

15 4. In accordance with applicable regulations of the Board, a
16 registered nurse licensed to practice professional nursing or licensed
17 practical nurse who is:

18 (a) Employed by a health care agency or health care facility that
19 is authorized to provide emergency care, or to respond to the
20 immediate needs of a patient, in the residence of the patient; and

21 (b) Acting under the direction of the medical director of that
22 agency or facility who works in this State.

23 5. Except as otherwise provided in subsection 6, an
24 intermediate emergency medical technician or an advanced
25 emergency medical technician, as authorized by regulation of the
26 State Board of Pharmacy and in accordance with any applicable
27 regulations of:

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

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

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

34 6. An intermediate emergency medical technician or an
35 advanced emergency medical technician who holds an endorsement
36 issued pursuant to NRS 450B.1975, under the direct supervision of a
37 local health officer or a designee of the local health officer pursuant
38 to that section.

39 7. A respiratory therapist employed in a health care facility.
40 The therapist may possess and administer respiratory products only
41 at the direction of a physician.



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8. 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.

9. A medical student or student nurse in the course of his or her 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.

10. Any person designated by the head of a correctional institution.

11. An ultimate user or any person designated by the ultimate user pursuant to a written agreement.

12. A nuclear medicine technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.

13. A radiologic technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.

14. A chiropractic physician, but only if the drug or medicine is a topical drug used for cooling and stretching external tissue during therapeutic treatments.

15. 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.

16. 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.

17. A veterinary technician at the direction of his or her supervising veterinarian.

18. 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 ~~for~~ for Immunization Practices" recommended and approved by the ~~[United States Public Health Service]~~ Advisory Committee on Immunization Practices.

19. A person who is enrolled in a training program to become a physician assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, intermediate emergency medical technician, advanced emergency medical technician, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician if the person possesses and administers the drug or medicine in the same manner and under the same conditions that apply, respectively, to a physician assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, intermediate emergency medical technician, advanced emergency medical technician, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician who may possess and administer the drug or medicine, and under the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.

20. A medical assistant who meets the requirements set forth in subsection 1 of section 4 of this act or subsection 1 of section 10 of this act, at the direction of a prescribing physician and under the supervision of:

(a) A physician licensed pursuant to chapter 630 or 633 of NRS; or

(b) A physician assistant authorized to possess and administer the drug or medicine pursuant to subsection 2 if the medical assistant and physician assistant are employed or supervised by the same physician.

Sec. 2. Chapter 630 of NRS is hereby amended by adding thereto the provisions set forth as sections 3 and 4 of this act.

Sec. 3. 1. "Medical assistant" means a person who:

(a) Is employed by a physician to perform clinical tasks under the supervision of a physician or physician assistant; and

(b) Does not hold a license, certificate or registration issued by a professional licensing or regulatory board in this State to perform such clinical tasks.

2. The term does not include a person who is employed by a physician to perform administrative, clerical, executive or other nonclinical tasks.

Sec. 4. 1. A physician may employ a medical assistant. If a person is initially employed as a medical assistant:



(a) On or after January 1, 2012, the person must, before beginning employment as a medical assistant, attend a training program for medical assistants which is approved by and obtain certification as a medical assistant from:

(1) The Commission on Accreditation of Allied Health Education Programs;

(2) The Accrediting Bureau of Health Education Schools; or

(3) A nationally recognized accrediting organization approved by the Board.

(b) Before January 1, 2012, the person shall obtain certification as a medical assistant:

(1) Before March 31, 2017; or

(2) Not later than 90 days after the date on which the person becomes eligible to take an examination for certification by an organization recognized pursuant to paragraph (a),

↳ whichever is later.

2. If a person who meets the requirements of paragraph (b) of subsection 1 is employed as a medical assistant, the person shall not possess or administer a dangerous drug in accordance with NRS 454.213 until the medical assistant has obtained certification.

3. A physician who employs a medical assistant shall:

(a) Provide adequate supervision for the medical assistant or ensure that the medical assistant is supervised adequately by a physician or physician assistant.

(b) Ensure that a medical assistant employed by the physician has obtained certification required by subsection 1 and is properly trained to carry out the tasks performed by the medical assistant.

4. The Board shall:

(a) Adopt regulations governing the employment and supervision of medical assistants by persons licensed pursuant to this chapter; and

(b) Prescribe the qualifications and training required for medical assistants, which may include, without limitation, training or education in infection control practices for medical assistants who administer dangerous drugs pursuant to NRS 454.213.

Sec. 5. 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 630.007 to 630.026, inclusive, **and section 3 of this act** have the meanings ascribed to them in those sections.

Sec. 6. NRS 630.306 is hereby amended to read as follows:

630.306 The following acts, among others, constitute grounds for initiating disciplinary action or denying licensure:



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1 1. Inability to practice medicine with reasonable skill and
2 safety because of illness, a mental or physical condition or the use of
3 alcohol, drugs, narcotics or any other substance.

4 2. Engaging in any conduct:

5 (a) Which is intended to deceive;

6 (b) Which the Board has determined is a violation of the
7 standards of practice established by regulation of the Board; or

8 (c) Which is in violation of a regulation adopted by the State
9 Board of Pharmacy.

10 3. Administering, dispensing or prescribing any controlled
11 substance, or any dangerous drug as defined in chapter 454 of NRS,
12 to or for himself or herself or to others except as authorized by law.

13 4. Performing, assisting or advising the injection of any
14 substance containing liquid silicone into the human body, except for
15 the use of silicone oil to repair a retinal detachment.

16 5. Practicing or offering to practice beyond the scope permitted
17 by law or performing services which the licensee knows or has
18 reason to know that he or she is not competent to perform or which
19 are beyond the scope of his or her training.

20 6. Performing, without first obtaining the informed consent of
21 the patient or the patient's family, any procedure or prescribing any
22 therapy which by the current standards of the practice of medicine is
23 experimental.

24 7. Continual failure to exercise the skill or diligence or use the
25 methods ordinarily exercised under the same circumstances by
26 physicians in good standing practicing in the same specialty or field.

27 8. Habitual intoxication from alcohol or dependency on
28 controlled substances.

29 9. Making or filing a report which the licensee or applicant
30 knows to be false or failing to file a record or report as required by
31 law or regulation.

32 10. Failing to comply with the requirements of NRS 630.254.

33 11. Failure by a licensee or applicant to report in writing,
34 within 30 days, any disciplinary action taken against the licensee or
35 applicant by another state, the Federal Government or a foreign
36 country, including, without limitation, the revocation, suspension or
37 surrender of a license to practice medicine in another jurisdiction.

38 12. Failure by a licensee or applicant to report in writing,
39 within 30 days, any criminal action taken or conviction obtained
40 against the licensee or applicant, other than a minor traffic violation,
41 in this State or any other state or by the Federal Government, a
42 branch of the Armed Forces of the United States or any local or
43 federal jurisdiction of a foreign country.



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13. Failure to be found competent to practice medicine as a result of an examination to determine medical competency pursuant to NRS 630.318.

14. Operation of a medical facility at any time during which:

(a) The license of the facility is suspended or revoked; or

(b) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

➔ This subsection applies to an owner or other principal responsible for the operation of the facility.

15. Failure to comply with the requirements of NRS 630.373.

16. Engaging in any act that is unsafe or unprofessional conduct in accordance with regulations adopted by the Board.

17. Failure to supervise adequately a medical assistant pursuant to the regulations of the Board.

Sec. 7. NRS 630.369 is hereby amended to read as follows:

630.369 1. A person, other than a physician, shall not inject a patient with any chemotherapeutic agent classified as a prescription drug unless ~~the person administers the injection under the supervision of a physician and:~~

(a) The person is licensed or certified to perform medical services pursuant to this title ~~;~~

~~—(b) The person, and the administration of the injection is within the scope of the person's license or certificate; and~~

~~—(c) The person administers the injection under the supervision of a physician; or~~

(b) The person is a medical assistant authorized to administer a dangerous drug pursuant to NRS 454.213, and the chemotherapeutic agent is classified as a dangerous drug.

➔ The Board shall prescribe the requirements for supervision pursuant to this subsection.

2. As used in this section:

(a) "Dangerous drug" has the meaning ascribed to it in NRS 454.201.

(b) "Prescription drug" means:

(1) A controlled substance or dangerous drug that may be dispensed to an ultimate user only pursuant to a lawful prescription; and

(2) Any other substance or drug substituted for such a controlled substance or dangerous drug.

Sec. 8. Chapter 633 of NRS is hereby amended by adding thereto the provisions set forth as sections 9 and 10 of this act.

Sec. 9. 1. "Medical assistant" means a person who:

(a) Is employed by an osteopathic physician to perform clinical tasks under the supervision of an osteopathic physician or physician assistant; and



(b) Does not hold a license, certificate or registration issued by a professional licensing or regulatory board in this State to perform such clinical tasks.

2. The term does not include a person who is employed by an osteopathic physician to perform administrative, clerical, executive or other nonclinical tasks.

Sec. 10. 1. An osteopathic physician may employ a medical assistant. If a person is initially employed as a medical assistant:

(a) On or after January 1, 2012, the person must, before beginning employment as a medical assistant, attend a training program for medical assistants which is approved by and obtain certification as a medical assistant from:

(1) The Commission on Accreditation of Allied Health Education Programs;

(2) The Accrediting Bureau of Health Education Schools;
or

(3) A nationally recognized accrediting organization approved by the Board.

(b) Before January 1, 2012, the person shall obtain certification as a medical assistant:

(1) Before March 31, 2017; or

(2) Not later than 90 days after the date on which the person becomes eligible to take an examination for certification by an organization recognized pursuant to paragraph (a),

↳ whichever is later.

2. If a person who meets the requirements of paragraph (b) of subsection 1 is employed as a medical assistant, the person shall not possess or administer a dangerous drug in accordance with NRS 454.213 until the medical assistant has obtained certification.

3. An osteopathic physician who employs a medical assistant shall:

(a) Provide adequate supervision for the medical assistant or ensure that the medical assistant is supervised adequately by an osteopathic physician or physician assistant.

(b) Ensure that a medical assistant employed by the osteopathic physician has obtained certification required by subsection 1 and is properly trained to carry out the tasks performed by the medical assistant.

4. The Board shall:

(a) Adopt regulations governing the employment and supervision of medical assistants by persons licensed pursuant to this chapter; and

(b) Prescribe the qualifications and training required for medical assistants, which may include, without limitation, training



or education in infection control practices for medical assistants who administer dangerous drugs pursuant to NRS 454.213.

Sec. 11. NRS 633.011 is hereby amended to read as follows:

633.011 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 633.021 to 633.131, inclusive, *and section 9 of this act* have the meanings ascribed to them in those sections.

Sec. 12. NRS 633.511 is hereby amended to read as follows:

633.511 The grounds for initiating disciplinary action pursuant to this chapter are:

1. Unprofessional conduct.

2. Conviction of:

(a) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS;

(b) A felony relating to the practice of osteopathic medicine;

(c) A violation of any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive;

(d) Murder, voluntary manslaughter or mayhem;

(e) Any felony involving the use of a firearm or other deadly weapon;

(f) Assault with intent to kill or to commit sexual assault or mayhem;

(g) Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime;

(h) Abuse or neglect of a child or contributory delinquency; or

(i) Any offense involving moral turpitude.

3. The suspension of the license to practice osteopathic medicine by any other jurisdiction.

4. Malpractice or gross malpractice, which may be evidenced by a claim of malpractice settled against a practitioner.

5. Professional incompetence.

6. Failure to comply with the requirements of NRS 633.527.

7. Failure to comply with the requirements of subsection 3 of NRS 633.471.

8. Failure to comply with the provisions of NRS 633.694.

9. Operation of a medical facility, as defined in NRS 449.0151, at any time during which:

(a) The license of the facility is suspended or revoked; or

(b) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

➤ This subsection applies to an owner or other principal responsible for the operation of the facility.

10. Failure to comply with the provisions of subsection 2 of NRS 633.322.



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1 11. Signing a blank prescription form.

2 12. Attempting, directly or indirectly, by intimidation, coercion
3 or deception, to obtain or retain a patient or to discourage the use of
4 a second opinion.

5 13. Terminating the medical care of a patient without adequate
6 notice or without making other arrangements for the continued care
7 of the patient.

8 14. In addition to the provisions of subsection 3 of NRS
9 633.524, making or filing a report which the licensee knows to be
10 false, failing to file a record or report that is required by law or
11 willfully obstructing or inducing another to obstruct the making or
12 filing of such a record or report.

13 15. Failure to report any person the licensee knows, or has
14 reason to know, is in violation of the provisions of this chapter or
15 the regulations of the Board within 30 days after the date the
16 licensee knows or has reason to know of the violation.

17 16. Failure by a licensee or applicant to report in writing,
18 within 30 days, any criminal action taken or conviction obtained
19 against the licensee or applicant, other than a minor traffic violation,
20 in this State or any other state or by the Federal Government, a
21 branch of the Armed Forces of the United States or any local or
22 federal jurisdiction of a foreign country.

23 17. Engaging in any act that is unsafe in accordance with
24 regulations adopted by the Board.

25 ***18. Failure to supervise adequately a medical assistant***
26 ***pursuant to the regulations of the Board.***

27 **Sec. 13.** 1. The Board of Medical Examiners shall, on or
28 before December 31, 2011, adopt the regulations required by section
29 4 of this act and NRS 630.369, as amended by section 7 of this act.

30 2. The State Board of Osteopathic Medicine shall, on or before
31 December 31, 2011, adopt the regulations required by section 10 of
32 this act.

33 **Sec. 14.** This act becomes effective upon passage and approval
34 for the purpose of adopting regulations and on January 1, 2012, for
35 all other purposes.

