

SENATE BILL NO. 202—SENATOR STONE

MARCH 2, 2023

Referred to Committee on Commerce and Labor

SUMMARY—Establishes provisions governing institutional pharmacies. (BDR 54-580)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.
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 pharmacies; requiring the preparation of an accurate record of medication for certain high-risk patients admitted to certain hospitals; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires an institutional pharmacy in a hospital with 100 or more beds to be under the continuous supervision of a pharmacist during the time it is open for pharmaceutical services. (NRS 639.2324) **Section 1** of this bill requires the pharmacist who is in charge of an institutional pharmacy at such a hospital that is privately operated or operated by a local government to ensure that an accurate record of medication is prepared by a pharmacist, pharmaceutical technician or intern pharmacist for each high-risk patient admitted to the hospital. **Section 1** requires such a hospital to establish criteria to determine: (1) who qualifies as a high-risk patient; and (2) the time within which the record of medication for a high-risk patient must be completed.

Existing law provides that: (1) any holder of a certificate, license, registration or permit issued pursuant to chapter 639 of NRS is subject to disciplinary action; and (2) any person who violates any provision of chapter 639 of NRS is guilty of a misdemeanor. (NRS 639.210, 639.310) **Sections 1 and 2** of this bill provide that any person who violates a provision of **section 1**, or any institutional pharmacy that employs such a person or is located in a hospital that fails to establish the required criteria, is not guilty of a misdemeanor but is subject to disciplinary action.



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

Section 1. Chapter 639 of NRS is hereby amended by adding thereto a new section to read as follows:

1. Upon the admission of a high-risk patient to a hospital with 100 or more beds or as soon as practicable after admission, the pharmacist who is in charge of the institutional pharmacy shall ensure that a pharmacist or, under the conditions prescribed by subsection 2, a pharmaceutical technician or an intern pharmacist, prepares an accurate record of medication for the high-risk patient. Such a record:

(a) Must include, to the extent available:

(1) Relevant information concerning any drug the patient is currently taking or has taken in the past, including, without limitation, dose, dosage form, route of administration, frequency and duration; and

(2) Other information relating to the medical history of the patient, including, without limitation, allergies, reactions to particular drugs and any medical devices used by the patient; and

(b) May additionally include:

(1) Comments relevant to any drug therapy which the patient is receiving, including any other information which is specific to the patient or drug; and

(2) Other information which the pharmacist, pharmaceutical technician or intern pharmacist deems appropriate.

2. A pharmaceutical technician or an intern pharmacist may prepare a record of medication for a high-risk patient pursuant to subsection 1 if:

(a) The hospital has established policies and procedures for the institutional pharmacy to use in training and evaluating pharmaceutical technicians or intern pharmacists to prepare such a record;

(b) The pharmaceutical technician or intern pharmacist has completed the training and evaluations described in paragraph (a); and

(c) The institutional pharmacy has a program of quality assurance in place to monitor the competency of the pharmaceutical technician or intern pharmacist.

3. A hospital with 100 or more beds shall establish criteria, which must take into account the patient populations served by the hospital, to determine:

(a) Which patients are at high risk of experiencing moderate or severe harm if the practitioners or pharmacists providing care



1 *to the patient have inaccurate information concerning any subject*
2 *listed in paragraph (a) of subsection 1; and*

3 *(b) The time within which the record of medication for a high-*
4 *risk patient which is required by subsection 1 must be completed.*

5 *4. The provisions of this section do not apply to a hospital*
6 *that is operated by this State.*

7 *5. Any person who violates a provision of this section, or any*
8 *institutional pharmacy that employs such a person or is located in*
9 *a hospital that fails to comply with subsection 3:*

10 *(a) Is subject to disciplinary action pursuant to NRS 639.210;*
11 *and*

12 *(b) Is not guilty of a misdemeanor.*

13 *6. As used in this section, “high-risk patient” means a patient*
14 *who meets the criteria established by a hospital pursuant to*
15 *paragraph (a) of subsection 3.*

16 **Sec. 2.** NRS 639.310 is hereby amended to read as follows:

17 639.310 Except as otherwise provided in NRS 639.23535 and
18 639.23916, *and section 1 of this act*, unless a greater penalty is
19 specified, any person who violates any of the provisions of this
20 chapter is guilty of a misdemeanor.

