
AGENDA ITEM 13

NAC 630.165 Effect of revocation of license in another jurisdiction: “Gross medical negligence” defined. (NRS 630.130, 630.161) For the purposes of NRS 630.161, “gross medical negligence” ~~[has the]~~ mean~~[ing]~~s:

1. *An act or omission that demonstrates a conscious indifference to or disregard of the safety or welfare of a patient; or*

2. The meaning ~~[A]~~ascribed to it by the jurisdiction in which the license was revoked~~[-or]~~

~~— 2. Ascribed to a term which the Board determines to be substantially similar to “gross medical negligence” by the jurisdiction in which the license was revoked}.~~

NAC 630.240 Voluntary surrender of license. (NRS 630.130, 630.298)

1. If a licensee desires to surrender his or her license to practice medicine, respiratory care, or perfusion while pending an investigation or disciplinary action, the licensee shall submit to the Board a sworn written statement of surrender of the license accompanied by delivery to the Board of the actual license issued to him or her. *A voluntary surrender is a public, and* ~~The Board will accept or reject the surrender of the license. If the Board accepts the surrender of the license, the surrender is absolute and irrevocable and~~ the Board will notify any agency or person of the surrender and the conditions under which the surrender occurred, as the Board considers advisable. The surrender of a license under this subsection will be deemed disciplinary action pursuant to NRS 233B.121(6) and will be reported to all applicable databases to which the Board reports disciplinary actions.

2. The voluntary surrender of a license, the failure to renew a license, or the retirement of a license does not preclude the Board from hearing a complaint for disciplinary action made against the licensee if the licensee had an active license at the time of the allegations in the complaint.

3. If a licensee desires to retire from the practice medicine, respiratory care, or perfusion and the licensee has no pending complaints or investigations and no disciplinary actions have been filed against the licensee that are pending resolution, he or she may send written notification of this intent to the Board and his or her license status will be reported as “retired.”

4. *A surrender of a license to practice medicine is not effective until it is accepted by the Board in a public meeting. In any order accepting such a surrender, the Board shall prescribe a period, not less than 1 year and not more than 10 years, during which the person may not apply for reinstatement of the license.*

~~[NAC 630.251 Grounds: “Gross malpractice” interpreted. (NRS 630.130, 630.301) For the purposes of NRS 630.301, as that section existed before October 1, 1997, a physician shall be deemed to have committed gross malpractice if, before October 1, 1997, the physician has failed to exercise the required degree of care, skill or knowledge and such failure amounts to:~~

~~—1. A conscious indifference to the consequences which may result from the malpractice; and~~

~~—2. A disregard for and indifference to the safety and welfare of a patient.]~~

NAC 630.270 Disposition of findings and order of Board. (NRS 630.130, 630.269, 630.275) A copy of the disciplinary findings and order of the Board:

1. Will be served by personal service or by certified mail upon the person affected by them at the address of the person on file with the Board and his or her attorney of record;

2. *If directed by the Board, [W]* will be delivered by first-class mail or electronic mail to each hospital in the geographical area in which the physician, physician assistant, perfusionist or practitioner of respiratory care practices; ~~and~~

~~[3. May be delivered by first class mail or electronic mail to members of the media.]~~

NAC 630.280 Qualifications of applicants. (NRS 630.130, 630.275) An applicant for licensure as a physician assistant must have the following qualifications:

1. If the applicant has not practiced as a physician assistant for 12 months or more before applying for licensure in this State, he or she must, at the order of the Board, have taken and passed the same examination to test medical competency as that given to applicants for initial licensure.

2. Be a citizen of the United States or be lawfully entitled to remain and work in the United States.

3. Be able to communicate adequately orally and in writing in the English language.

4. Be of good moral character and reputation.

5. Have attended and completed a course of training in residence as a physician assistant approved by one of the following entities affiliated with the American Medical Association or its successor organization:

(a) The Committee on Allied Health Education and Accreditation or its successor organization;

(b) The Commission on Accreditation of Allied Health Education Programs or its successor organization; or

(c) The Accreditation Review Commission on Education for the Physician Assistant or its successor organization.

6. Be certified by the National Commission on Certification of Physician Assistants or its successor organization.

7. Possess a ~~[high school diploma, general equivalency diploma or]~~ postsecondary degree.

NAC 630.415 Advisory committee. (NRS 630.130, 630.275)

1. The Board will appoint three licensed physician assistants to an advisory committee. These physician assistants must have lived in and actively and continuously practiced in this State as licensed physician assistants for at least 3 years before their appointment.

2. *The term of each appointed member of the advisory committee shall not exceed four years, except that an appointed member shall continue to serve until a replacement is appointed as his or her successor.*

3. The Board will give appointees to the advisory committee written notice of their appointment and terms of office ~~[and a written summary of any projects pending before the committee].~~

~~[3.]~~4. At the request of the Board, the advisory committee shall review and make recommendations to the Board concerning any matters relating to licensed physician assistants. *Meetings of the advisory committee are subject to the requirements of the provisions of NRS Chapter 241.*

5. *The members of the advisory committee shall serve without compensation.*

NAC 630.560 Advisory committee. (NRS 630.130, 630.279)

1. The Board will appoint five licensed practitioners of respiratory care to an advisory committee. These practitioners of respiratory care must have lived in and actively and continuously practiced in this State as practitioners of respiratory care for at least 3 years before their appointment.

2. *The term of each appointed member of the advisory committee shall not exceed four years, except that an appointed member shall continue to serve until a replacement is appointed as his or her successor.*

3. The Board will give appointees to the advisory committee written notice of their appointment and terms of office ~~[and a written summary of any projects pending before the committee].~~

~~[3.]~~4. At the request of the Board, the advisory committee shall review and make recommendations to the Board concerning any matters relating to licensed practitioners of respiratory care. *Meetings of the advisory committee are subject to the requirements of the provisions of NRS Chapter 241.*

5. *The members of the advisory committee shall serve without compensation.*

NAC 630.790 Advisory committee. (NRS 630.130, 630.269)

1. The Board will appoint three perfusionists to an advisory committee. To the extent practicable, each appointee must have lived in and actively and continuously practiced perfusion in this State for at least 3 years before his or her appointment.

2. *The term of each appointed member of the advisory committee shall not exceed four years, except that an appointed member shall continue to serve until a replacement is appointed as his or her successor.*

3. The Board will give each appointee written notice of his or her appointment and term of office ~~{and a written summary of any projects pending before the advisory committee}~~.

~~{3.}~~4. At the request of the Board, the advisory committee shall review and make recommendations to the Board concerning any matter relating to perfusionists. *Meetings of the advisory committee are subject to the requirements of the provisions of NRS Chapter 241.*

5. *The members of the advisory committee shall serve without compensation.*
