

NRS 630.267 Biennial registration: Submission of list of malpractice and negligence actions and claims and fee; expiration and reinstatement of license; notice to licensee.

1. Each holder of a license to practice medicine must, on or before June 30, or if June 30 is a Saturday, Sunday or legal holiday, on the next business day after June 30, of each odd-numbered year:

(a) Submit a list of all actions filed or claims submitted to arbitration or mediation for malpractice or negligence against him or her during the previous 2 years.

(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.

(c) Submit all information required to complete the biennial registration.

2. When a holder of a license fails to pay the fee for biennial registration and submit all information required to complete the biennial registration after they become due, his or her license to practice medicine in this State expires. The holder may, within 2 years after the date the license expires, upon payment of twice the amount of the current fee for biennial registration to the Secretary-Treasurer and submission of all information required to complete the biennial registration and after he or she is found to be in good standing and qualified under the provisions of this chapter, be reinstated to practice.

3. *Not later than 60 days before his or her license expires, [T]*the Board shall make such reasonable attempts as are practicable to notify a licensee:

(a) At least once that the fee for biennial registration and all information required to complete the biennial registration are due; and

(b) That his or her license has expired.

→ *A list of expired licenses to practice medicine [copy of this notice]* must be sent to the Drug Enforcement Administration of the United States Department of Justice or its successor agency *and the Nevada State Board of Pharmacy.*

NRS 630.3067 Insurer of physician required to report certain information concerning malpractice; administrative fine for failure to report.

1. The insurer of a physician, *physician assistant, practitioner of respiratory care, or perfusionist* licensed under this chapter shall report to the Board:

(a) Any action for malpractice against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* not later than 45 days after the physician, *physician assistant, practitioner of respiratory care, or perfusionist* receives service of a summons and complaint for the action;

(b) Any claim for malpractice against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* that is submitted to arbitration or mediation not later than 45 days after the claim is submitted to arbitration or mediation; and

(c) Any settlement, award, judgment or other disposition of any action or claim described in paragraph (a) or (b) not later than 45 days after the settlement, award, judgment or other disposition.

2. The Board shall report any failure to comply with subsection 1 by an insurer licensed in this State to the Division of Insurance of the Department of Business and Industry. If, after a hearing, the Division of Insurance determines that any such insurer failed to comply with the requirements of subsection 1, the Division may impose an administrative fine of not more than \$10,000 against the insurer for each such failure to report. If the administrative fine is not paid when due, the fine must be recovered in a civil action brought by the Attorney General on behalf of the Division.

NRS 630.3068 Physician required to report certain information concerning malpractice and sanctions imposed against physician; administrative fine for failure to report; reports deemed public records.

1. A physician, *physician assistant, practitioner of respiratory care, or perfusionist* shall report to the Board:

(a) Any action for malpractice against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* not later than 45 days after the physician, *physician assistant, practitioner of respiratory care, or perfusionist* receives service of a summons and complaint for the action;

(b) Any claim for malpractice against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* that is submitted to arbitration or mediation not later than 45 days after the claim is submitted to arbitration or mediation;

(c) Any settlement, award, judgment or other disposition of any action or claim described in paragraph (a) or (b) not later than 45 days after the settlement, award, judgment or other disposition, *including the amount paid to resolve the claim, if any*; and

(d) Any sanctions imposed against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* that are reportable to the National Practitioner Data Bank not later than 45 days after the sanctions are imposed.

2. If the Board finds that a physician, *physician assistant, practitioner of respiratory care, or perfusionist* has violated any provision of this section, the Board may impose a fine of not more than \$5,000 against the physician for each violation, in addition to any other fines or penalties permitted by law.

3. All reports made by a physician, *physician assistant, practitioner of respiratory care, or perfusionist* pursuant to this section are public records.

(Added to NRS by [2003, 3428](#))

NRS 630.3069 Board required to conduct investigation after receiving certain reports concerning malpractice. If the Board receives a report pursuant to the provisions of [NRS 630.3067](#), [630.3068](#) or [690B.250](#) indicating that a judgment has been rendered or an award has been made against a physician, *physician assistant, practitioner of respiratory care, or perfusionist* regarding an action or claim for malpractice or that such an action or claim against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* has been resolved by settlement, the Board shall conduct an investigation to determine whether to impose disciplinary action against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* regarding the action or claim, unless the Board has already commenced or completed such an investigation regarding the action or claim before it receives the report.

NRS 630.318 Examination of physician to determine fitness to practice medicine; consent to examination; testimony and examination reports not privileged; effect of failure to submit to examination.

1. If the Board or any investigative committee of the Board has reason to believe that the conduct of any physician, *physician assistant, practitioner of respiratory care, or perfusionist* has raised a reasonable question as to his or her competence to practice medicine, *respiratory care, or perfusion* with reasonable skill and safety to patients, or if the Board has received a report pursuant to the provisions of [NRS 630.3067](#), [630.3068](#) or [690B.250](#) indicating that a judgment has been rendered or an award has been made against a physician, *physician assistant, practitioner of respiratory care, or perfusionist* regarding an action or claim for malpractice or that such an action or claim against the physician, *physician assistant, practitioner of respiratory care, or perfusionist* has been resolved by settlement, the Board or committee may order that the physician, *physician assistant, practitioner of respiratory care, or perfusionist* undergo a mental or physical examination, an examination testing his or her competence to practice medicine or any other examination designated by the Board to assist the Board or committee in determining the fitness of the physician, *physician assistant, practitioner of respiratory care, or perfusionist* to practice medicine, *respiratory care, or perfusion, as applicable*.

2. For the purposes of this section:

(a) Every physician, *physician assistant, practitioner of respiratory care, or perfusionist* who applies for a license or who is licensed under this chapter shall be deemed to have given consent to submit to a mental or physical examination or an examination testing his or her competence to practice medicine, *respiratory care, or perfusion, as applicable*, when ordered to do so in writing by the Board or an investigative committee of the Board.

(b) The testimony or reports of a person who conducts an examination of a physician, *physician assistant, practitioner of respiratory care, or perfusionist* on behalf of the Board or an investigative committee of the Board pursuant to this section are not privileged communications.

3. Except in extraordinary circumstances, as determined by the Board, the failure of a physician, *physician assistant, practitioner of respiratory care, or perfusionist* licensed under this chapter to submit to an examination when directed as provided in this section constitutes an admission of the charges against the physician, *physician assistant, practitioner of respiratory care, or perfusionist*.

(Added to NRS by [1977, 825](#); A [1985, 2240](#); [1987, 200](#); [2003, 3434](#); [2009, 2966](#); [2015, 495](#); [2019, 1727](#))