

PHYSICIAN ASSISTANT REGULATIONS

Purple is new language that is effective now, but not yet codified. *Pink* is language that has been deleted from the regulation and now gone, but it not yet codified.

Blue are changes currently in process and ~~red~~ are deletions in process.

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 24 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~~:

(a) *The* same examination to test medical competency as that given to applicants for initial licensure ~~;~~; or

(b) *An examination designated by the Board, if the applicant is currently certified as a physician assistant by the National Commission on Certification of Physician Assistants, or its successor organization, and ineligible to take the examination described in paragraph (a).*

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.~~ 3. Be of good moral character and reputation.

~~5.~~ 4. Have ~~attended and completed~~ *graduated from* a ~~course of training in residence~~ *postsecondary program of education* 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.~~ 5. Be certified by the National Commission on Certification of Physician Assistants or its successor organization.

~~7.~~ ~~6. Possess a [high school diploma, general equivalency diploma or] postsecondary degree.~~

[Bd. of Medical Exam'rs, § 630.280, eff. 12-20-79]—(NAC A 6-23-86; 11-21-88; 9-12-91; R149-97, 3-30-98; R108-01, 11-29-2001; R036-13, 2-26-2014; R022-15, 12-30-2015; R180-20, 4-11-2022) ***Amended by R171-20, June 2, 2023; Amended by R118-21, June 2, 2023, Amended by R177-22, June 2, 2023. Amended by R068-23, September 13, 2024.***

NAC 630.290 Application for license. ([NRS 630.130](#), [630.275](#))

1. An application for licensure as a physician assistant must be made on a form supplied by the Board. The application must state:

(a) The date and place of the applicant's birth and his or her sex;

(b) The applicant's *postsecondary* education~~;~~ *as a physician assistant*, including, without limitation, ~~high schools and~~ postsecondary institutions attended, the length of time in attendance at each and whether he or she is a graduate of those schools and institutions;

(c) ~~Whether the applicant has ever applied for a~~ *Each* license ~~or certificate~~ as a physician assistant that the applicant currently holds or has held in the District of Columbia or in another

state ~~[and, if so, when and where and the results of his or her application]~~ or territory of the United States or in any other country;

(d) The applicant's ~~[training and experience as a physician assistant;]~~ work experience for the 5 years immediately preceding the date of his or her application;

(e) Whether the applicant has ever been investigated for misconduct as a physician assistant or had a license ~~[or certificate]~~ as a physician assistant revoked, modified, limited or suspended or whether any disciplinary action or proceedings have ever been instituted against the applicant by a licensing body in ~~[any jurisdiction]~~ the District of Columbia or in another state or territory of the United States or in any other country;

(f) Whether the applicant has ever been *arrested for, investigated for, charged with*, convicted of ~~[a felony]~~ or ~~[an]~~ *pled guilty or nolo contendere to*:

(1) *Any offense [involving moral turpitude;] or violation of any federal, state or local law, including, without limitation, the laws of any foreign country, which is a misdemeanor, gross misdemeanor, felony or similar offense in a foreign jurisdiction, excluding a minor traffic offense; or*

(2) *Any violation of the Uniform Code of Military Justice.*

(g) Whether the applicant has ever been *arrested for*, investigated for, charged with, ~~[or]~~ convicted of ~~[the use or illegal sale]~~ or *pled guilty or nolo contendere to any offense which is related to the manufacture, distribution, prescribing or dispensing of controlled substances; [and]*

(h) ~~[The various places of his or her residence from the date of:~~

~~— (1) Graduation from high school;~~

~~— (2) Receipt of a high school general equivalency diploma; or~~

~~— (3) Receipt of a postsecondary degree;~~

~~→ whichever occurred most recently.]~~ *Whether the applicant has an untreated medical condition that may affect his or her ability to practice as a physician assistant; and*

(i) *A public address and the mailing address at which the applicant prefers to receive correspondence from the Board.*

2. An applicant must submit to the Board:

(a) Proof of completion of an educational program as a physician assistant:

(1) If the applicant completed the educational program on or before December 31, 2001, which was approved by the Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Programs; or

(2) If the applicant completed the educational program on or after January 1, 2002, which is accredited by the Accreditation Review Commission on Education for the Physician Assistant or approved by the Commission on Accreditation of Allied Health Education Programs;

(b) Proof of passage of the examination given by the National Commission on Certification of Physician Assistants; and

(c) Such further evidence and other documents or proof of qualifications as required by the Board.

3. Each application must be signed by the applicant and ~~[sworn to before a notary public or other officer authorized to administer oaths;]~~ *accompanied by a signed affidavit indicating that:*

(a) *The applicant is the person named in the proof of completion of an educational program as a physician assistant required by subsection 2;*

(b) *The proof of completion of the educational program required by subsection 2 was obtained without fraud or misrepresentation or any mistake of which the applicant is aware; and*

(c) All the information contained in the application and any accompanying material is complete and correct.

4. The application must be accompanied by the applicable fee.
5. An applicant shall pay the reasonable costs of any examination required for licensure.

6. As used in this section, "license as a physician assistant":

(a) Means any professional credential that authorizes a person to practice as a physician assistant; and

(b) Includes, without limitation, a training license, provisional license, certificate or permit as a physician assistant.

[Bd. of Medical Exam'rs, § 630.290, eff. 12-20-79]—(NAC A 6-23-86; 9-12-91; 1-13-94; 11-3-95; 7-18-96; R149-97, 3-30-98; R007-99, eff. 9-27-99; R108-01, 11-29-2001; R145-03, 12-16-2003) *Amended by R171-20, June 2, 2023. Amended by R068-23, September 13, 2024. Amended by R117-24, August 20, 2025.*

NAC 630.310 Rejection of application. ([NRS 630.130](#), [630.275](#)) If it appears that:

1. An applicant for licensure as a physician assistant is not qualified or is not of good moral character or reputation;
 2. Any credential submitted is false; or
 3. The application is not made in proper form or other deficiencies appear in it,
- the application may be rejected.

[Bd. of Medical Exam'rs, § 630.310, eff. 12-20-79]—(NAC A 6-23-86; R149-97, 3-30-98; R108-01, 11-29-2001)

NAC 630.315 Denial of application. ([NRS 630.130](#), [630.275](#)) The Board may deny an application for the issuance or renewal of a license to practice as a physician assistant if the applicant has committed any of the acts described in subsection 1 of [NAC 630.380](#).

(Added to NAC by Bd. of Medical Exam'rs by R080-06, eff. 9-18-2006)

NAC 630.320 Temporary license. ([NRS 630.130](#), [630.275](#))

1. The Board will issue a temporary license to any qualified applicant who:
 - (a) Meets the educational and training requirements for certification as a physician assistant of the National Commission on Certification of Physician Assistants and is scheduled to and does sit for the first proficiency examination offered by the National Commission on Certification of Physician Assistants following the completion of his or her training;
 - (b) Has taken the proficiency examination offered by the National Commission on Certification of Physician Assistants but has not yet been notified of the results; or
 - (c) Is licensed or certified in another state, meets the requirements for licensure pursuant to [NAC 630.280](#) and is scheduled to sit for the next examination offered by the Board.

2. A physician assistant with a temporary license may perform services only under the immediate supervision of a supervising physician.

[Bd. of Medical Exam'rs, § 630.320, eff. 12-20-79]—(NAC A 6-23-86; 3-19-87; 11-21-88; 9-12-91; 1-13-94; R149-97, 3-30-98; R108-01, 11-29-2001)

~~—**NAC 630.325 Locum tenens license.** ([NRS 630.130](#), [630.275](#))—The Board may issue a locum tenens license, which is effective for not more than 3 months after issuance, to any physician assistant who is licensed or certified as a physician assistant and in good standing in another state and who is of good moral character and reputation. The purpose of this license is to enable an~~

~~eligible physician assistant to serve as a substitute for another physician assistant who is licensed to practice as a physician assistant in this State and who is absent from his or her practice for reasons deemed sufficient by the Board. A license issued pursuant to this section is not renewable. — (Added to NAC by Bd. of Medical Exam'rs, eff. 1-13-94; A by R149-97, 3-30-98; R108-01, 11-29-2001) Repealed by R033-24, September 13, 2024.~~

NAC 630.330 Contents of license. ([NRS 630.130](#), [630.275](#)) The license issued by the Board must contain:

1. The name of the physician assistant;
2. The duration of the license; and
3. Any other limitations or requirements which the Board prescribes.

[Bd. of Medical Exam'rs, § 630.330, eff. 12-20-79]—(NAC A 6-23-86; 11-21-88; 9-12-91; 1-13-94; 7-18-96; R149-97, 3-30-98; R108-01, 11-29-2001; R145-03, 12-16-2003)

NAC 630.340 Period of validity of license; notification of practice; termination of supervision; disciplinary action; refusal to license. ([NRS 630.130](#), [630.275](#))

1. The license of a physician assistant is valid for 2 years.
2. Before providing medical services, a physician assistant, on a form prescribed by the Board, shall notify the Board of the name and location of the practice of the physician assistant, the name of the supervising physician and the portion of the practice of the physician assistant that the supervising physician supervises. The notice must contain the signatures of the physician assistant and the supervising physician of the physician assistant.

3. The physician assistant and the supervising physician shall ~~immediately~~, *within 72 hours after the termination of the supervision of the physician assistant by the supervising physician*, notify the Board of the termination of the supervision of the physician assistant by the supervising physician. For any portion of the practice of the physician assistant that the supervising physician terminating supervision of the physician assistant supervised, the physician assistant shall not provide medical services until the physician assistant and a supervising physician submit notice to the Board pursuant to subsection 2.

4. A physician assistant who has been licensed by the Board but is not currently licensed, has surrendered his or her license or has failed to renew his or her license will be disciplined by the Board, if the Board deems it necessary, upon hearing a complaint for disciplinary action against the physician assistant.

5. If the Board determines that the conduct of a physician assistant when he or she was on inactive status in another jurisdiction would have resulted in the denial of an application for licensure in this State, the Board will, if appropriate, refuse to license the physician assistant.

[Bd. of Medical Exam'rs, § 630.340, eff. 12-20-79]—(NAC A 6-23-86; 9-12-91; 1-13-94; R149-97, 3-30-98; R108-01, 11-29-2001; R145-03, 12-16-2003) Amended by R171-20, June 2, 2023.

NAC 630.350 Renewal, expiration and reinstatement of license. ([NRS 630.130](#), [630.253](#), [630.275](#))

1. ~~The~~ *Except as otherwise provided in section 10 of R068-23, the* license of a physician assistant may be renewed biennially. The license will not be renewed unless the physician assistant provides satisfactory proof that the physician assistant has completed the following number of hours of continuing medical education as defined by the American Academy of Physician

Assistants or has received a certificate documenting the completion of the following number of hours of Category 1 credits as recognized by the American Medical Association:

- (a) If licensed during the first 6 months of the biennial period of registration, 40 hours.
- (b) If licensed during the second 6 months of the biennial period of registration, 30 hours.
- (c) If licensed during the third 6 months of the biennial period of registration, 20 hours.
- (d) If licensed during the fourth 6 months of the biennial period of registration, 10 hours.

2. To allow for the renewal of a license to practice as a physician assistant by each person to whom a license was issued or renewed in the preceding renewal period, the Board will make such reasonable attempts as are practicable to:

(a) ~~[Mail]~~ *Send* a renewal notice *to the licensee* at least 60 days before the expiration of a license to practice as a physician assistant; and

(b) Send ~~[a renewal application]~~ *instructions for the licensee to renew his or her license* to ~~[a licensee at]~~ the last known *electronic mail* address of the licensee on record with the Board.

3. If a licensee fails to pay the fee for biennial registration after it becomes due or fails to submit proof that the licensee completed the number of hours of continuing medical education required by subsection 1, his or her license to practice in this State expires. Within 2 years after the date on which the license expires, the holder may be reinstated to practice as a physician assistant if the holder:

(a) Pays twice the amount of the current fee for biennial registration to the Secretary-Treasurer of the Board;

(b) Submits proof that he or she completed the number of hours of continuing medical education required by subsection 1; and

(c) Is found to be in good standing and qualified pursuant to this chapter.

4. Not later than September 30 of each odd-numbered year, the Board will provide a list of licensees to practice as a physician assistant that have expired during the immediately preceding biennium to the Drug Enforcement Administration of the United State Department of Justice or its successor agency and the State Board of Pharmacy.

[Bd. of Medical Exam'rs, § 630.350, eff. 12-20-79]—(NAC A 6-23-86; 1-13-94; R149-97, 3-30-98; R108-01, 11-29-2001; R208-07, 8-26-2008; R038-09, 11-25-2009; R048-10, 10-15-2010; R137-11, 9-14-2012) *Amended by R068-23, September 13, 2024.*

NAC 630.353 Continuing education: Course of instruction relating to medical consequences of act of terrorism involving use of weapon of mass destruction. ([NRS 630.130](#), [630.253](#), [630.275](#))

1. Pursuant to the provisions of [NRS 630.253](#), a physician assistant shall complete a course of instruction relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction:

(a) If the physician assistant was initially licensed by the Board on or after October 1, 2003, within 2 years of initial licensure.

(b) If the physician assistant was initially licensed by the Board before October 1, 2003, on or before September 30, 2005.

2. In addition to the requirements provided pursuant to [NRS 630.253](#), a course of instruction relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction:

(a) Except as otherwise provided in subsection 3, must offer, upon successful completion of the program, a certificate of Category 1 credit as recognized by the American Medical Association to the physician assistant; and

(b) Is in addition to the continuing education required pursuant to [NAC 630.350](#).

3. A course of instruction relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction will be deemed to satisfy the requirements of paragraph (a) of subsection 2 if the course was provided to a physician assistant:

(a) After January 1, 2002; and

(b) As a part of the training the physician assistant received:

(1) While serving in the military; or

(2) While serving as a public health officer.

(Added to NAC by Bd. of Medical Exam'rs by R145-03, eff. 12-16-2003)

NAC 630.357 Continuing education: Credit for continuing education course on geriatrics and gerontology, Alzheimer's disease or other forms of dementia, or rare diseases. ([NRS 630.130](#), [630.253](#), [630.275](#))

1. Except as otherwise provided in subsections ~~4-5~~ and ~~5 6~~, if a physician assistant takes a continuing education course on geriatrics and gerontology, the physician assistant is entitled to receive credit towards the continuing medical education required pursuant to [NAC 630.350](#) equal to twice the number of hours the physician assistant actually spends in the continuing education course on geriatrics and gerontology.

2. Except as otherwise provided in subsections ~~4-5~~ and ~~5 6~~, if a physician assistant takes a continuing education course on the recent developments, research and treatment of Alzheimer's disease or other forms of dementia, the physician assistant is entitled to receive credit towards the continuing medical education required pursuant to [NAC 630.350](#) equal to twice the number of hours the physician assistant actually spends in the continuing education course on the recent developments, research and treatment of Alzheimer's disease or other forms of dementia.

3. Except as otherwise provided in subsections ~~4-5~~ and ~~5 6~~, if a physician assistant takes a continuing education course on the diagnosis of rare diseases, the physician assistant is entitled to receive credit towards the continuing medical education required pursuant to [NAC 630.350](#) equal to twice the number of hours the physician assistant actually spends in the continuing education course on the diagnosis of rare diseases.

4. *Except as otherwise provided in subsections 5 and 6, if a physician assistant takes a continuing education course on the methods for educating patients about how to effectively manage medications, including, without limitation, the ability of the patient to request to have the symptom or purpose for which a drug is prescribed included on the label attached to the container of the drug, the physician assistant is entitled to receive credit towards the continuing medical education required pursuant to NAC 630.350 equal to twice the number of hours the physician assistant actually spends in the continuing education course on the methods for educating patients about how to effectively manage medications.*

5. During any biennial licensing period, a physician assistant may receive a maximum credit pursuant to this section of 8 hours of continuing medical education for 4 hours of time spent in a continuing education course described in subsection 1, 2, ~~3~~ or ~~3 4~~, or any combination thereof.

~~[—5.]~~ 6. A physician assistant is only entitled to receive the additional credit for a continuing education course pursuant to either subsection 1, 2, ~~3~~ or ~~3 4~~, but not any combination thereof.

(Added to NAC by Bd. of Medical Exam'rs by R145-03, eff. 12-16-2003; A by R103-15, 4-4-2016; R086-19, 12-29-2020) **Amended by R117-24, August 20, 2025.**

NAC 630.358 Continuing education: Training required for certain physician assistants relating to persons with substance use and other addictive disorders and prescribing of opioids; credit for training. (NRS 630.130, 630.2535)

1. Pursuant to the provisions of [NRS 630.2535](#) ~~and~~ *and except as otherwise provided in that section*, a physician assistant who is registered to dispense controlled substances pursuant to [NRS 453.231](#) shall, during each period for biennial registration, complete at least 2 hours of continuing medical education relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids.

2. *Pursuant to NRS 630.253, a physician assistant shall complete at least 2 hours of training in the screening, brief intervention and referral to treatment approach to a substance use disorder without 2 years after initial licensure.*

3. A program of continuing medical education relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids *or a program of training in the screening, brief intervention and referral to treatment approach to substance use disorder* must:

(a) Be a program of continuing medical education as defined by the American Academy of Physician Assistants; or

(b) Offer, upon successful completion of the program, a certificate of Category 1 credit as recognized by the American Medical Association to the physician assistant.

~~3.~~ 4. A physician assistant ~~who is registered to dispense controlled substances pursuant to NRS 453.231~~ is entitled to receive credit towards the continuing medical education required pursuant to subsection 1 of [NAC 630.350](#) for each hour of continuing medical education completed pursuant to subsection 1 *of this section or training completed pursuant to subsection 2 of this section.*

(Added to NAC by Bd. of Medical Exam'rs by R163-16, eff. 8-30-2018) **Amended by R068-23, September 13, 2024.**

NAC 630.360 Performance of authorized medical services; identification; misrepresentation; notification of change regarding supervising physician. (NRS 630.130, 630.275)

1. The medical services which a physician assistant is authorized to perform must be:

(a) Commensurate with the education, training, experience and level of competence of the physician assistant; and

(b) Within the scope ~~of the practice~~ of the *medical specialty area of his or her* supervising physician ~~of the physician assistant.~~, *as designated to the Board pursuant to section 2 of R033-24.*

2. The physician assistant shall wear at all times while on duty a placard, plate or insigne which identifies him or her as a physician assistant.

3. No physician assistant may represent himself or herself in any manner which would tend to mislead the general public or the patients of the supervising physician.

~~4. Except as otherwise provided in subsection 3 of NAC 630.340, a physician assistant shall notify the Board in writing within 72 hours after any change in the supervision of the physician assistant by a supervising physician.~~

[Bd. of Medical Exam'rs, § 630.360, eff. 12-20-79]—(NAC A 6-23-86; 9-12-91; 1-13-94; R149-97, 3-30-98; R108-01, 11-29-2001; R183-12, 4-5-2013) **Amended by R171-20, June 2, 2023. Amended by R033-24, September 13, 2024.**

NAC 630.370 Supervising physician: Duties; qualifications. (NRS 630.130, 630.275)

1. Except as otherwise provided in [NAC 630.375](#), the supervising physician is responsible for all the medical activities of his or her physician assistant and shall ensure that:

(a) The physician assistant is clearly identified to the patients as a physician assistant;

(b) *The physician assistant performs only medical services that are within the scope of the medical specialty area of his or her supervising physician, as designated to the Board pursuant to section 2 of R033-24;*

(c) The physician assistant performs only those medical services which have been approved by his or her supervising physician;

~~[(e)]~~ (d) The physician assistant does not represent himself or herself in any manner which would tend to mislead the general public, the patients of the supervising physician or any other health professional; and

~~[(d)]~~ (e) There is strict compliance with:

(1) The provisions of the certificate of registration issued to his or her physician assistant by the State Board of Pharmacy pursuant to [NRS 639.1373](#); and

(2) The regulations of the State Board of Pharmacy regarding controlled substances, poisons, dangerous drugs or devices.

2. Except as otherwise required in subsection 3 or 4, the supervising physician shall review and initial selected charts of the patients of the physician assistant. Unless the physician assistant is performing medical services pursuant to [NAC 630.375](#), the supervising physician must be available at all times that his or her physician assistant is performing medical services to consult with his or her assistant. Those consultations may be indirect, including, without limitation, by telephone.

3. At least once a month, the supervising physician shall spend part of a day at any location where the physician assistant provides medical services to act as a consultant to the physician assistant and to monitor the quality of care provided by the physician assistant. *The requirements of this subsection are satisfied if the supervising physician spends part of a day at any location where the physician assistant uses telehealth to provide medical services.*

4. Except as otherwise provided in this subsection, if the supervising physician is unable to supervise the physician assistant as required by this section, the supervising physician shall designate a qualified substitute physician, who practices medicine in the same specialty as the supervising physician, to supervise the assistant. If the physician assistant is performing medical services pursuant to [NAC 630.375](#), the supervising physician is not required to comply with this subsection.

5. A physician who supervises a physician assistant shall develop and carry out a program to ensure the quality of care provided by a physician assistant. The program must include, without limitation:

(a) An assessment of the medical competency of the physician assistant~~[(f)]~~.

(b) A review and initialing of selected charts , *which may include, without limitation electronic medical records.* ~~[(f)]~~

(c) An assessment of a representative sample of the referrals or consultations made by the physician assistant with other health professionals as required by the condition of the patient~~[(f)]~~.

(d) Direct observation of the ability of the physician assistant to take a medical history from and perform an examination of patients representative of those cared for by the physician assistant. ~~[(f)and]~~ *The requirements of this paragraph are satisfied if a program includes direct observation of a physician assistant while the physician assistant uses telehealth to provide such services.*

(e) Maintenance by the supervising physician of accurate records and documentation regarding the program for each physician assistant supervised.

6. Except as otherwise provided in subsection 7, a physician may supervise a physician assistant if the physician:

- (a) Holds an active license in good standing to practice medicine issued by the Board;
- (b) Actually practices medicine in this State; and
- (c) Has not been specifically prohibited by the Board from acting as a supervising physician.

7. If the Board has disciplined a physician assistant pursuant to ~~[NAC 630.410]~~ *NRS 630.352*, a physician shall not supervise that physician assistant unless the physician has been specifically approved by the *Executive Director of the Board or his or her designee* to act as the supervising physician of that physician assistant. *A physician may request such approval by submitting a plan of supervision to the Executive Director or his or her designee for review. The plan of supervision must be consistent with the requirements of subsection 5.*

8. When determining pursuant to subsection 7 whether to approve the supervision of a physician assistant who has been disciplined by the Board, the Executive Director or his or her designee shall review the licensing history and the disciplinary history of the physician and the physician assistant.

[Bd. of Medical Exam'rs, § 630.370, eff. 12-20-79]—(NAC A 6-23-86; 11-21-88; 9-12-91; 1-13-94; R149-97, 3-30-98; R108-01, 11-29-2001; R145-03, 12-16-2003; R005-07, 10-31-2007) *Amended by R171-20, June 2, 2023. Amended by R068-23, September 13, 2024. Amended by R033-24, September 13, 2024.*

NAC 630.375 Physician assistant deemed to be agent of supervising physician; performance of emergency medical services without supervision. (NRS 630.130, 630.275)

1. Except as otherwise provided in this section, a physician assistant is considered to be and is deemed the agent of his or her supervising physician in the performance of all medical activities.

2. A physician assistant shall not perform medical services without supervision from his or her supervising physician, except in:

- (a) Life-threatening emergencies, including, without limitation, at the scene of an accident; or
- (b) Emergency situations, including, without limitation, human-caused or natural disaster relief efforts.

3. When a physician assistant performs medical services in a situation described in subsection 2:

(a) The physician assistant is not the agent of his or her supervising physician and the supervising physician is not responsible or liable for any medical services provided by the physician assistant.

(b) The physician assistant shall provide whatever medical services are possible based on the need of the patient and the training, education and experience of the physician assistant.

(c) If a licensed physician is available on-scene, the physician assistant may take direction from the physician.

(d) The physician assistant shall make a reasonable effort to contact his or her supervising physician, as soon as possible, to advise him or her of the incident and the physician assistant's role in providing medical services.

(Added to NAC by Bd. of Medical Exam'rs by R005-07, eff. 10-31-2007)

NAC 630.380 Disciplinary action: Grounds; institution; exception. (NRS 630.130, 630.138, 630.275)

1. A physician assistant is subject to disciplinary action by the Board if, after notice and hearing in accordance with this chapter, the Board finds that the physician assistant:

(a) Has willfully and intentionally made a false or fraudulent statement or submitted a forged or false document in applying for a license;

(b) Has held himself or herself out as or permitted another to represent the physician assistant to be a licensed physician;

(c) Has performed medical services otherwise than:

(1) Pursuant to [NAC 630.375](#); or

(2) At the direction or under the supervision of the supervising physician of the physician assistant;

(d) Has performed medical services which have not been approved by the supervising physician of the physician assistant, unless the medical services were performed pursuant to [NAC 630.375](#);

(e) Is guilty of gross or repeated malpractice in the performance of medical services for acts committed before October 1, 1997;

(f) Is guilty of malpractice in the performance of medical services for acts committed on or after October 1, 1997;

(g) Is guilty of disobedience of any order of the Board or an investigative committee of the Board, any provision in the regulations of the State Board of Health or the State Board of Pharmacy or any provision of this chapter;

(h) Is guilty of administering, dispensing or possessing any controlled substance otherwise than in the course of legitimate medical services or as authorized by law and the supervising physician of the physician assistant;

(i) Has been convicted of a violation of any federal or state law regulating the prescribing, possession, distribution or use of a controlled substance;

(j) Is not competent to provide medical services;

(k) Failed to notify the Board of an involuntary loss of certification by the National Commission on Certification of Physician Assistants within 30 days after the involuntary loss of certification;

(l) Is guilty of violating a provision of [NAC 630.230](#), [630.810](#), [630.820](#) or [630.830](#);

(m) Is guilty of violating a provision of [NRS 630.301](#) to [630.3065](#), inclusive; or

(n) Is guilty of violating a provision of subsection 2 or 3 of [NAC 630.340](#).

2. To institute disciplinary action against a physician assistant, a written complaint, specifying the charges, must be filed with the Board by the investigative committee of the Board.

3. A physician assistant is not subject to disciplinary action solely for prescribing or administering to a patient under the care of the physician assistant a controlled substance which is listed in schedule II, III, IV or V by the State Board of Pharmacy pursuant to [NRS 453.146](#).

[Bd. of Medical Exam'rs, § 630.380, eff. 12-20-79]—(NAC A 6-23-86; 9-12-91; 1-13-94; R149-97, 3-30-98; R007-99, 9-27-99; R089-00, 7-19-2000; R108-01, 11-29-2001; R145-03, 12-16-2003; R005-07, 10-31-2007; R039-09, 11-25-2009; R094-12, 2-20-2013)

~~—NAC 630.390 Disciplinary action: Notice of charges. (NRS 630.130, 630.275) Before the Board takes disciplinary action against a physician assistant, the Board will give to the physician assistant and to his or her supervising physician a written notice specifying the charges made against the physician assistant and stating that the charges will be heard at the time and place~~

~~indicated in the notice. The notice will be served on the physician assistant and the supervising physician at least [20] **21 business** days before the date fixed for the hearing. Service of the notice will be made and any investigation and subsequent disciplinary proceedings will be conducted in the same manner as provided by law for disciplinary actions against physicians.~~

~~—[Bd. of Medical Exam'rs, § 630.390, eff. 12-20-79]—(NAC A 6-23-86; R149-97, 3-30-98; R108-01, 11-29-2001) Amended by R171-20, June 2, 2023. Repealed by R117-24, §15, August 20, 2025.~~

NAC 630.400 Examination to determine fitness to practice. ([NRS 630.130](#), [630.275](#))

1. If the Board or any investigative committee of the Board has reason to believe that the conduct of any physician assistant has raised a reasonable question as to his or her competence to practice as a physician assistant with reasonable skill and safety to patients, it may order that the physician assistant undergo a mental or physical examination or an examination testing his or her competence to practice as a physician assistant by physicians or any other examination designated by the Board to assist the Board or committee in determining the fitness of the physician assistant to practice as a physician assistant.

2. Every physician assistant who applies for or is issued a license and who accepts the privilege of performing medical services in this State shall be deemed to have given his or her consent to submit to such an examination pursuant to subsection 1 when the physician assistant is directed to do so in writing by the Board.

3. For the purpose of this section, the report of testimony or examination by the examining physicians does not constitute a privileged communication.

4. Except in extraordinary circumstances, as determined by the Board, the failure of a licensed physician assistant to submit to an examination when he or she is directed to do so pursuant to this section constitutes an admission of the charges against him or her. A default and final order may be entered without the taking of testimony or presentation of evidence.

5. A physician assistant who is subject to an examination pursuant to this section shall pay the costs of the examination.

[Bd. of Medical Exam'rs, § 630.400, eff. 12-20-79]—(NAC A 6-23-86; 1-13-94; R149-97, 3-30-98; R007-99, 9-27-99; R108-01, 11-29-2001)

~~[— **NAC 630.410—Determination after notice and hearing: Sanctions or dismissal of charges. (NRS 630.130, 630.275)**—If the Board finds, by a preponderance of the evidence, after notice and hearing in accordance with this chapter, that:~~

~~—1.—The charges in the complaint against the physician assistant are true, the Board will issue and serve on the physician assistant its written findings and any order of sanctions. The following sanctions may be imposed by order:~~

~~—(a) Placement on probation for a specified period on any of the conditions specified in the order.~~

~~—(b) Administration of a public reprimand.~~

~~—(c) Limitation of his or her practice or exclusion of one or more specified branches of medicine from his or her practice.~~

~~—(d) Suspension of his or her license, for a specified period or until further order of the Board.~~

~~—(e) Revocation of his or her license to practice.~~

~~—(f) A requirement that the physician assistant participate in a program to correct alcohol or drug dependence or any other impairment.~~

~~—(g) A requirement that there be additional and specified supervision of his or her practice.~~

~~—(h) A requirement that the physician assistant perform community service without compensation.~~

~~—(i) A requirement that the physician assistant take a physical or mental examination or an examination testing his or her medical competence.~~

~~—(j) A requirement that the physician assistant fulfill certain training or educational requirements, or both, as specified by the Board.~~

~~—(k) A fine not to exceed \$5,000.~~

~~—(l) A requirement that the physician assistant pay all costs incurred by the Board relating to the disciplinary proceedings.~~

~~—2. No violation has occurred, it will issue a written order dismissing the charges and notify the physician assistant that the charges have been dismissed. If the disciplinary proceedings were initiated as a result of a complaint filed against the physician assistant, the Board may provide to the physician assistant a copy of the complaint and the name of the person who filed the complaint.~~

~~—[Bd. of Medical Exam'rs, § 630.410, eff. 12-20-79] (NAC A 6-23-86; 1-13-94; R149-97, 3-30-98; R108-01, 11-29-2001)] **Repealed by R068-23, September 13, 2024.**~~

~~—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 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]. ***The term of each appointee to the advisory committee must not exceed 4 years, except that a member of the advisory committee must continue to serve until the Board appoints a replacement as his or her successor.***~~

~~—3. 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.~~

~~—4. ***The members of the advisory committee serve without compensation.***~~

~~—(Added to NAC by Bd. of Medical Exam'rs, eff. 6-23-86; A 11-21-88; R149-97, 3-30-98; R108-01, 11-29-2001) **Amended by R118-21, June 2, 2023. Repealed by R033-24, September 13, 2024.**~~

NAC 630.495 Restrictions on simultaneous supervision of physician assistants and collaboration with advanced practice registered nurses. (NRS 630.130)

1. Except as otherwise provided in subsection 2, a physician shall not simultaneously:

(a) Supervise more than ~~three~~ **four** physician assistants;

(b) Collaborate with more than ~~three~~ **four** advanced practice registered nurses; ~~[or]~~

(c) ***Supervise more than two full-time equivalent transitional physicians; or***

(d) Supervise or collaborate with a combination of more than ~~three~~ four physician assistants, ~~[and]~~ advanced practice registered nurses and transitional physicians.

2. ~~[A]~~ ***Except as otherwise provided in this subsection, a*** physician may petition the Board for approval to supervise or collaborate with more physician assistants and advanced practice registered nurses than he or she would otherwise be allowed pursuant to subsection 1. ***A physician may not:***

(a) Submit such a petition if the physician also supervises transitional physicians; or

(b) Petition for approval to supervise or collaborate with more than six physician assistants and advanced practice registered nurses in total.

3. The *Executive Director of the Board* ~~[with]~~ *or his or her designee shall review and approve or deny a petition a petition made pursuant to subsection 2. The Executive Director or his or her designee* shall not approve the petition unless the physician provides satisfactory proof to the Board that:

(a) Special circumstances regarding his or her practice exist that necessitate his or her supervision or collaboration with more physician assistants and advanced practice registered nurses than would otherwise be allowed pursuant to subsection 1; and

(b) The physician will be able to supervise or collaborate with the number of physician assistants and advanced practice registered nurses for which he or she is requesting approval in a satisfactory manner.

4. *When determining pursuant to subsection 3 whether to approve a petition made pursuant to subsection 2, the Executive Director or his or her designee shall review the licensing history and disciplinary history of the physician and each physician assistant or advanced practice registered nurse.*

(Added to NAC by Bd. of Medical Exam'rs by R149-97, eff. 3-30-98; A by R108-01, 11-29-2001) *Amended by R068-23, September 13, 2024. Changes in process are contained in R112-25.*