

**INSTRUCTIONS FOR REPORTING IN-OFFICE SURGERIES OR  
PROCEDURES INVOLVING CONSCIOUS SEDATION, DEEP  
SEDATION OR GENERAL ANESTHESIA FOR 2023-2024**

**\* Negative reporting is no longer required. \***

**[NRS 630.30665](#) Physician required to report certain information concerning surgeries and sentinel events; disciplinary action or fine for failure to report or false report; duties of Board; confidentiality of report; applicability; regulations.**

1. The Board shall require each holder of a license to practice medicine to submit to the Board, on a form provided by the Board, a report stating the number and type of surgeries requiring conscious sedation, deep sedation or general anesthesia performed by the holder of the license at his or her office or any other facility, excluding any surgical care performed:

- (a) At a medical facility as that term is defined in [NRS 449.0151](#); or
- (b) Outside of this State.

7. As used in this section:

- (a) "Conscious sedation" has the meaning ascribed to it in [NRS 449.436](#).
- (b) "Deep sedation" has the meaning ascribed to it in [NRS 449.437](#).
- (c) "General anesthesia" has the meaning ascribed to it in [NRS 449.438](#).

All allopathic physicians licensed to practice medicine in the state of Nevada are required by Nevada Revised Statute (NRS) 630.30665 to report to the Nevada State Board of Medical Examiners, **prior** to licensure renewal, all in-office surgeries or procedures that involved the use of conscious sedation, deep sedation or general anesthesia, between January 1, 2023, and December 31, 2024.

This reporting requirement is mandatory. Your failure to submit a report or knowingly filing false information in a report is grounds for disciplinary action under Nevada's Medical Practice Act. You will be required to attest on your 2025 license renewal application that you either:

**1:** Have completed, signed and submitted the In-Office Surgery or Procedure Reporting Form, if you **DID** perform surgeries or procedures which involved the use of conscious sedation, deep sedation or general anesthesia, in your office or other location within the state of Nevada, other than those excepted facilities which are listed on page 3 of these instructions.

**- OR -**

**2:** That you **DID NOT** perform any surgeries or procedures which involved the use of conscious sedation, deep sedation or general anesthesia, in your office or other location within the state of Nevada, other than those excepted facilities which are listed on page 3 of these instructions.

## Definitions:

### Conscious Sedation

“Conscious sedation” means a minimally-depressed level of consciousness, produced by a pharmacologic or nonpharmacologic method, or a combination thereof, in which the patient retains the ability independently and continuously to maintain an airway and to respond appropriately to physical stimulation and verbal commands.

*You must report the number (how many) and type (name of the surgery or procedure) of surgeries/procedures in which you used **conscious sedation** on a patient on the In-Office Surgery or Procedure Reporting Form.*

### Deep Sedation

“Deep sedation” means a controlled state of depressed consciousness, produced by a pharmacologic or nonpharmacologic method, or a combination thereof, and accompanied by a partial loss of protective reflexes and the inability to respond purposefully to verbal commands.

*You must report the number (how many) and type (name of the surgery or procedure) of surgeries/procedures in which you used **deep sedation** on a patient on the In-Office Surgery or Procedure Reporting Form.*

### General Anesthesia

“General anesthesia” means a controlled state of unconsciousness, produced by a pharmacologic or nonpharmacologic method, or a combination thereof, and accompanied by partial or complete loss of protective reflexes and the inability independently to maintain an airway and respond purposefully to physical stimulation or verbal commands.

*You must report the number (how many) and type (name of the surgery or procedure) of surgeries/procedures in which you used **general anesthesia** on a patient on the In-Office Surgery or Procedure Reporting Form.*

## Reminders:

The licensee's signature is required on the In-Office Surgery or Procedure Reporting Form.

Do not provide a report for a group practice as a whole - a report is required from each and every licensee within a group practice who performed surgeries or procedures which involved the use of conscious sedation, deep sedation or general anesthesia.

Report only those surgeries/procedures performed within the state of Nevada that did not occur in a "Medical Facility," as defined in [NRS 449.0151](#). A Medical Facility includes:

1. A surgical center for ambulatory patients;
2. A freestanding birthing center;
3. An independent center for emergency medical care;
4. An agency to provide nursing in the home;
5. A facility for intermediate care;
6. A facility for skilled nursing;
7. A facility for hospice care;
8. A hospital;
9. A psychiatric hospital;
10. A facility for the treatment of irreversible renal disease;
11. A rural clinic;
12. A nursing pool;
13. A facility for modified medical detoxification;
14. A facility for refractive surgery;
15. A mobile unit; and
16. A community triage center.

## Submission of Forms:

Please either **email, mail or fax** completed forms to the following:

**Email:** [medboardreporting@medboard.nv.gov](mailto:medboardreporting@medboard.nv.gov)

**Mail:** Nevada State Board of Medical Examiners  
Attn: Reporting  
9600 Gateway Drive  
Reno, NV 89521

**Fax:** 775-688-2553