



NEVADA STATE BOARD OF OSTEOPATHIC MEDICINE

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NEVADA ADMINISTRATIVE CODE

("NAC") CHAPTER 633

**Unofficial Version with Additions from
R192-07 and R154-09**

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GENERAL PROVISIONS

NAC 633.005 Definitions. (NRS 633.291) As used in this chapter, unless the context otherwise requires, the words and terms defined in ~~NAC 633.011~~ 633.020 to 633.050, inclusive, and sections 2 to 6, inclusive, of

this regulation have the meanings ascribed to them in those sections.

(Added by NAC by Bd. of Osteopathic Med by R057-02, eff 10-24-2002; A by R208-05, 2-23-2006; A by R192-07, 12-17-2008)

NAC 633.020 “Board” defined. (NRS 633.291) “Board” means the State Board of Osteopathic Medicine. [Bd. of Osteopathic Med., Art. I § 3, eff. 9-15-80]—(NAC A by R057-02, 10-24-2002)

NAC 633.030 “Contested case” defined. (NRS 633.291) “Contested case” has the meaning ascribed to it in NRS 233B.032.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002)

NAC 633.035 “Hearing officer” defined. (NRS 633.291) “Hearing officer” has the meaning ascribed to it in NRS 633.055.

(Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006)

NAC 633.045 “Panel” defined. (NRS 633.291) “Panel” has the meaning ascribed to it in NRS 633.105. (Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006)

NAC 633.050 “Party” defined. (NRS 633.291) “Party” has the meaning ascribed to it in NRS 233B.035.

R192-07 Sec. 2. “Executive Director” means the Executive Director of the Board appointed pursuant to NRS 633.271.

R192-07 Sec. 3. “Osteopathic physician” has the meaning ascribed to it in NRS 633.091.

R192-07 Sec. 4. “Physician assistant” has the meaning ascribed to it in NRS 633.107.

R192-07 Sec. 5. “Supervising osteopathic physician” has the meaning ascribed to it in NRS 633.123.

R192-07 Sec. 6. “Supervising physician” means:

1. A supervising osteopathic physician; or
2. A physician licensed to practice medicine in this State pursuant to chapter 630 of NRS who supervises a physician assistant pursuant to NRS 633.466.

R154-09 Sec. 2. For the purposes of NRS 633.315, the Board will interpret the phrase “gross medical negligence” to:

1. Mean the intentional failure to perform a duty in reckless disregard of the consequences as affecting the life of another person;
2. Have the meaning ascribed to it by the jurisdiction in which the license was revoked; or
3. Have the meaning 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.

R154-09 Sec. 3. For the purposes of NRS 633.415, the Board will interpret the term “notify” to mean that a medical research facility or school of osteopathic medicine in this State notifies the Board within 30 days after a special licensee who is issued a special license pursuant to NRS 633.415 ceases to teach, research or practice clinical osteopathic medicine at the medical research facility or school of osteopathic medicine.

R154-09 Sec. 4. For the purposes of NRS 633.417, the Board will interpret the term “notify” to mean that the Division of Mental Health and Developmental Services of the Department of Health and Human Services notifies the Board within 30 days after a person who holds an authorized facility license issued pursuant to NRS

633.417 ceases to practice osteopathic medicine in this State as a psychiatrist in a mental health center of the Division.

R154-09 Sec. 5. For the purposes of NRS 633.418, the Board will interpret the term “notify” to mean that the Department of Corrections notifies the Board within 30 days after a person who holds an authorized facility license issued pursuant to NRS 633.418 ceases to practice osteopathic medicine in this State in an institution of the Department of Corrections.

R154-09 Sec. 6. For the purposes of subsection 13 of NRS 633.511, the Board will interpret the phrase “adequate notice” to mean that:

1. Notice has been provided in writing to the patient at the patient’s last known address; and
2. Except in exigent circumstances, such notice has been provided to the patient at least 30 days before the medical care of the patient is terminated.

R154-09 Sec. 7. For the purposes of NRS 633.526 and 633.527, the Board will interpret the phrase “report to the Board” to mean to report, in writing, to the Board.

R154-09 Sec. 8. For the purposes of NRS 633.526 and 633.527, the Board will interpret the phrase “other disposition” to include, without limitation, dismissal of a case by a court of law or as a result of mediation or arbitration.

R154-09 Sec. 9.

1. The Board will charge and collect the following fees:

Application and initial license fee for an osteopathic physician.	\$600
Annual license renewal fee for an osteopathic physician.	500
Temporary license fee.	200
Special or authorized facility license fee	200
Special or authorized facility license renewal fee	200
Reexamination fee.	200
Late payment fee for a person whose license is currently on active status.	300
Application and initial license fee for a physician assistant.	400
Annual license renewal fee for a physician assistant	400
Inactive license fee	200
Late payment fee for a person whose license is currently on inactive status	150

2. The Board will charge and collect a fee for fingerprints submitted to the Board pursuant to NRS 633.309 that is equal to the total amount of the fees charged by any local agencies of law enforcement, the Central Repository for Nevada Records of Criminal History and the Federal Bureau of Investigation for the handling of the fingerprints of an applicant and issuance of the reports of criminal histories.

R154-09 Sec. 10.

1. The Board may issue a special license to any person designated in subsection 1 of NRS 633.415 who applies for a special license and includes with his or her application an updated curriculum vitae evidencing recognition of the person as an expert in osteopathic medicine.

2. A special licensee who is issued a special license pursuant to NRS 633.415 shall not employ or supervise a physician assistant.

R154-09 Sec. 11.

1. A person who holds an authorized facility license issued pursuant to NRS 633.417 may employ a physician assistant if the holder of the authorized facility license and the physician assistant otherwise satisfy the requirements of this chapter and chapter 633 of NRS concerning physician assistants and supervising osteopathic physicians.

2. A person who holds an authorized facility license described in subsection 1 must, if the person wishes to renew the authorized facility license, annually submit proof of employment as a psychiatrist only in a mental health center of the Division.

3. As used in this section:

(a) "Division" means the Division of Mental Health and Developmental Services of the Department of Health and Human Services.

(b) "Mental health center" has the meaning ascribed to it in NRS 433.144.

R154-09 Sec. 12.

1. A person who holds an authorized facility license issued pursuant to NRS 633.418 may employ a physician assistant if the holder of the authorized facility license and the physician assistant otherwise satisfy the requirements of this chapter and chapter 633 of NRS concerning physician assistants and supervising osteopathic physicians.

2. A person who holds an authorized facility license described in subsection 1 must, if the person wishes to renew the authorized facility license, annually submit proof of employment as an osteopathic physician only in an institution of the Department of Corrections.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; Added to NAC by Bd. Of Osteopathic Med by R192-07, eff. 12-17-2008; Added to NAC by Bd. of Osteopathic Med by R154-09, eff. 10-15-2010)

STATE BOARD OF OSTEOPATHIC MEDICINE

NAC 633.100 Compensation and expenses of members. (NRS 633.241, 633.291)

1. Except as otherwise provided in subsection 2, the compensation of the members of the Board is \$150 for each day spent in the discharge of official duties. While engaged in the business of the Board, each member and employee of the Board is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally.

2. The Board will, after notifying each of its members, reduce the amount of the compensation, per diem allowance and travel expenses authorized for payment to the members of the Board, if the financial resources of the Board warrant the reduction.

[Bd. of Osteopathic Med., Art. II § 2, eff. 9-15-80]—(NAC A 12-13-91; A by R154-09, eff. 10-15-2010)

NAC 633.110 Election of officers. (NRS 633.221, 633.291) The Board will elect its officers by a majority vote of the members at a meeting on a date to be fixed by the Board.

[Bd. of Osteopathic Med., Art. II § 1, eff. 9-15-80]

NAC 633.120 Duties of officers. (NRS 633.291)

1. The President is the Chief Executive Officer of the Board and presides at all meetings of the Board. He represents the Board when it is not in session, signs all papers when authorized by the Board, and performs such other duties as the nature of his office requires and which are assigned to him by the Board.

2. If the President is absent or unable to act, the duties of the office devolve upon the Vice President, and if he is also absent or unable to act, the duties devolve upon the Secretary-Treasurer.

3. The Executive Director shall:

(a) Keep the books and accounts of the Board and the minutes of the meetings of the Board;

(b) Collect and receive all money belonging to the Board;

(c) Execute vouchers for the disbursement of the money;

(d) Perform such other duties as the nature of his office requires and which are assigned to him by the Board; and

(e) Keep the records of the proceedings of the Board relating to the issuance, refusal, renewal, suspension or revocation of licenses to practice osteopathic medicine in the State.

[Bd. of Osteopathic Med., Art. II § 3, eff. 9-15-80]—(NAC A 12-13-91)

NAC 633.130 Meetings. (NRS 633.231, 633.291)

1. The Board will hold at least three meetings per year at a time and place to be determined by the Board.

2. The Executive Director shall give each member written notice of each meeting, containing an agenda of the meeting, not later than 7 days before the meeting, and shall post and mail copies in the manner prescribed by chapter 241 of NRS. Any proper business may be conducted at a regular meeting if it is provided for in the published agenda.

3. The President may call and, at the request of a majority of the members, shall call a special meeting on 3 days' written notice at any place where or time when a regular meeting could have been convened. The President, in calling a special meeting, shall post and mail the notice containing an agenda pursuant to chapter 241 of NRS.

[Bd. of Osteopathic Med., Art. II § 4, eff. 9-15-80]—(NAC A 12-13-91; A by R154-09, eff. 10-15-2010)

LICENSING

NAC 633.160 Applications. (NRS 633.291, 633.321)

1. Each applicant for a license to practice osteopathic medicine must apply on forms prepared and furnished by the Board.

2. On or after January 1, 2003, each application must be accompanied by:

(a) A physician information profile prepared by the Federation Credentials Verification Service of the Federation of State Medical Boards of the United States; and

(b) An affidavit affirming that:

(1) The applicant is the person named in the application and accompanying material; and

(2) To the best knowledge or belief of the applicant, the application and all accompanying material is complete, correct and consistent, and was obtained without fraud, misrepresentation or mistake.

3. No application will be accepted unless it is accompanied by the appropriate fee prescribed in section 9 of this regulation [LCB File No. R154-09]. All fees are nonrefundable.

4. An application for a license to practice osteopathic medicine shall not be deemed complete until all supporting documents and information required to complete the application have been provided by the applicant to or otherwise obtained by the Board.

[Bd. of Osteopathic Med., Art. III §§ 1 & 2, eff. 9-15-80]—(NAC A by R057-02, 10-24-2002; NAC A by R154-09, eff 10-15-2010)

NAC 633.170 Hospitals approved for required internship. (NRS 633.291) The hospitals currently approved by the Bureau of Professional Education of the American Osteopathic Association for the training of interns are approved by the Board.

[Bd. of Osteopathic Med., Art. V § 1, eff. 9-15-80]

NAC 633.190 Examinations: Form; notice of time and place; use of typewriters. (NRS 633.291, 633.331)

1. An examination may be written, oral, demonstrative or any combination thereof which the Board determines.

2. The Board will, at least 15 days before the date set for an examination, notify each applicant in writing of the time and place of his examination.

3. The Board may, upon request, give permission to applicants to use typewriters in writing examinations. [Bd. of Osteopathic Med., Art. VI §§ 1-3, eff. 9-15-80]

NAC 633.200 Examinations: General rules. (NRS 633.291, 633.331)

1. The questions for an examination may be prepared by the National Board of Osteopathic Examiners, a professional testing service selected by the Board, or by the Board itself, in its sole discretion.

2. Each applicant must furnish his own pen and ink or typewriter. The Board will furnish all other materials for the examination except texts or other reference materials.

3. Each applicant will be assigned a number before the examination.

4. The applicant must use the number assigned to him on all the papers used in the examination and must not use his name.

5. During the examination an applicant may not have on the table on which he is writing any paper or object other than the examination questions and tablet, a blotter, pen and ink, typewriter, eraser, watch and any testing materials supplied by the Board.

6. Immediately after correcting all written examinations or upon completion of an oral or demonstrative examination, each examiner shall forward his report to the Secretary-Treasurer of the Board.

7. After completing all returns of the examination, the Secretary-Treasurer will notify applicants of the results of the examination and issue licenses to successful applicants.

8. An applicant will not be licensed if he fails two or more subjects on the examination, even though he has received a passing grade on the examination as a whole.

9. Any applicant who is reexamined and receives a passing grade on all subjects except one is deemed to have passed the examination.

[Bd. of Osteopathic Med., Art. VI § 4, eff. 9-15-80]

NAC 633.210 Interview required for license without examination. (NRS 633.291, 633.361)

1. The Board may require an applicant to:

(a) Appear before the Board for a personal interview at the time his application is considered; and

(b) Pass an oral examination.

2. If the Board requires an applicant for a license without examination to appear before the Board for a personal interview pursuant to subsection 1:

(a) The application for the license without examination is ineffective if the applicant fails to appear at the time and place scheduled for the personal interview by the Board; and

(b) The applicant must refile his application before the Board will schedule another interview.

3. The Board will reschedule a personal interview within 1 year after it receives a request for rescheduling which sets forth sufficient reasons for the applicant's prior inability to attend.

[Bd. of Osteopathic Med., Art. VII § 1, eff. 9-15-80] (A by R154-09, eff. 10-15-2010)

NAC 633.220 Special licenses: Application; issuance; period of validity; renewal. (NRS 633.291, 633.401, 633.411)

1. The Board may issue a special license to any person designated in subsection 1 of NRS 633.401 and in subsection 1 of NRS 633.411 who applies for a special license and includes with his application a letter from the regulatory authority of the jurisdiction where he is licensed to practice osteopathic medicine which verifies that the applicant holds a current license.

2. In addition to the letter required by subsection 1, an applicant under NRS 633.411 must submit a letter from any one of the following persons requesting that he be given a special license:

(a) The chief of staff or the medical director of the hospital or institution where the applicant proposes to practice osteopathic medicine. The letter must also specify the members of the medical staff under whose supervision the applicant will practice. Any special license issued to the applicant will limit his practice to that hospital or institution.

(b) The chief of the medical agency proposing to employ the applicant to practice osteopathic medicine. The letter must also describe the scope of the services proposed to be performed by the applicant and the

medical licensees under whose supervision the applicant will be employed. Any special license issued will limit the scope of the applicant's practice to those described in the letter and indicate the person under whose medical supervision the applicant will be employed.

(c) The osteopathic physician with whom the applicant proposes to associate. The letter must also state the specific period, not to exceed 1 year, and the specific purpose for which he proposes to associate the applicant, and must verify that the osteopathic physician will retain primary responsibility for the care of all patients seen by the applicant. Any special license issued to the applicant will specify the period of association, the services to be performed by the applicant and the osteopathic physician with whom the applicant is associated.

3. No special license issued by the Board is valid for a period longer than 1 year following the date of issuance.

4. A special license may be renewed from year to year by the Board upon receipt of an application which meets the requirements of NAC 633.250, is accompanied by the appropriate fee prescribed by section 9 of this regulation [LCB File No. R154-09] and is received no later than 90 days before the expiration of the then current special license.

[Bd. of Osteopathic Med., Art. XI §§ 1 & 3, eff. 9-15-80]—(NAC A by R057-02, 10-24-2002; A by R154-09, eff 10-15-2010)

NAC 633.230 Special licenses: Suspension or revocation. (NRS 633.291, 633.401, 633.411) If the license of the physician under whose supervision a special licensee is required to practice, or with whom a special licensee is associated, is suspended or revoked, the special licensee's privilege to practice osteopathic medicine is suspended or revoked. The special licensee may apply for a new special license if the revocation or suspension did not arise from his conduct.

[Bd. of Osteopathic Med., Art. XI § 2, eff. 9-15-80]

NAC 633.240 Special licensees not to charge fees to patients. (NRS 633.291, 633.401, 633.411) A special licensee may not charge or receive fees for his services from patients, but he may receive a salary paid by his employer.

[Bd. of Osteopathic Med., Art. XI § 4, eff. 9-15-80]

NAC 633.250 Continuing education required for renewal of license. (NRS 633.291, 633.471)

1. Each osteopathic physician applying for renewal of his license shall furnish the Board proof that he has attended during the preceding year at least 35 hours of continuing education courses or programs approved by the Board, at least 10 hours of which are category 1A courses.

2. As used in this section, "category 1A course" means a course of continuing medical education that is offered by a sponsor accredited to offer such a course by the American Osteopathic Association or the Accreditation Council for Continuing Medical Education.

[Bd. of Osteopathic Med., Art. X § 1, eff. 9-15-80]—(NAC A by R057-02, 10-24-2002; A by Bd. of Osteopathic Med by R192-07, eff 12-17-2008)

NAC 633.255 Revocation of suspended license upon failure to renew. (NRS 633.291, 633.481) A license that the Board has suspended will be revoked pursuant to NRS 633.481 if:

1. The license expires during the period of suspension; and
2. The osteopathic physician fails to renew the license as set forth in NRS 633.471.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by Bd. of Osteopathic Med by R192-07, eff. 12-17-2008)

NAC 633.260 Licensees to file addresses with Board. (NRS 633.291)

1. Each person who holds a license to practice osteopathic medicine in this State shall:

- (a) File with the Board his proper and current mailing address; and

(b) Notify the Board in writing of any change in his or her mailing address within 30 days after the change. The notification must provide both his old and his new mailing address.

2. Each person who holds a license to practice osteopathic medicine in this State and who intends to close his or her osteopathic medical practice shall notify the Board in writing at least 30 days before closing the practice. The notice must specify:

(a) The person who or facility that will maintain the health care records of the person's patients for the period required by NRS 629.051; and

(b) How the patients of the osteopathic medical practice were notified of the closure of the practice.

3. Failure to comply with the requirements of this section in a timely manner is a ground for initiating disciplinary action pursuant to NRS 633.511.

[Bd. of Osteopathic Med., Art. I § 4, eff. 9-15-80] (NAC A by R154-09, eff 10-15-2010)

NAC 633.270 Review of and action on application; burden of proof. (NRS 633.291, 633.321)

1. The Executive Director or his designee:

(a) Shall review the application and accompanying materials submitted by an applicant to determine if there may be grounds for rejecting the application or grounds for denying the issuance of a license to the applicant; and

(b) May request the applicant to submit such additional evidence of the mental, physical, medical or other qualifications of the applicant as the Executive Director or his designee believes the Board may require.

2. Upon the completion of the review of an application by the Executive Director or his designee, the Executive Director shall:

(a) Schedule a hearing on the application at a meeting of the Board.

(b) Send written notice of the hearing to the applicant at least 21 days before the meeting. The notice must conform to subsection 2 of NRS 233B.121, be given by certified mail, postage prepaid, and be addressed to the last address furnished by the applicant. If the Executive Director has reason to believe that there are grounds for denying the issuance of a license to the applicant, the notice must include a short and plain statement that specifies each such ground.

(c) Provide a copy of the notice to each member of the Board.

3. The Board will deny the issuance of a license only after:

(a) Notice to the applicant specifying the precise grounds upon which the denial is proposed; and

(b) A hearing before the Board at which the applicant is given an opportunity to respond to each ground specified in the notice.

4. An applicant bears the burden of proving to the Board that issuing a license to him is in the best interest of the public health and safety and the general welfare of the people of this State.

5. As used in this section, "grounds for denying the issuance of a license" includes, without limitation:

(a) Any grounds authorized by a specific statute;

(b) Failure to fulfill any applicable statutory requirement;

(c) Submitting an application or accompanying material which is incomplete, incorrect or inconsistent, or which has been obtained by fraud, misrepresentation or mistake; and

(d) Engaging in any conduct that would, if committed by an osteopathic physician, be grounds for initiating disciplinary action pursuant to NRS 633.511.

[Bd. of Osteopathic Med., Art. VIII § 1, eff. 9-15-80]—(NAC A by R057-02, 10-24-2002; A by Bd. of Osteopathic Med, R192-07, eff 12-17-2008)

OSTEOPATHIC PHYSICIANS' ASSISTANTS

R192-07 Sec. 7.

1. To qualify for a license as a physician assistant pursuant to NRS 633.433, a person must:

(a) Be able to communicate adequately orally and in writing in the English language;

- (b) Be of good moral character and reputation;
 - (c) Except as otherwise provides in subsection 2, have attended and completed an educational program for physician assistants accredited by:
 - (1) The Accreditation Review Commission on Education for the Physician Assistant; or
 - (2) If the program was completed before January 1, 2001, the Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Programs;
 - (d) Have been certified by the National Commission on Certification of Physician Assistants;
 - (e) Submit to the Board an application for a license as a physician assistant on a form provided by the Board; and
 - (f) If the person has not practiced as a physician assistant for 12 months or more before applying for licensure in this State, at the order of the Board, supply evidence of clinical competence as a physician assistant which is satisfactory to the Board.
2. An applicant who was certified by the National Commission on Certification of Physician Assistants before January 1, 1986, is exempt from the requirements of paragraph (c) of subsection 1.

R154-09 Sec. 8.

1. An application for a license as a physician assistant must include, without limitation:
 - (a) The date and place of birth of the applicant;
 - (b) The gender of the applicant;
 - (c) The education of the applicant, including, without limitation, any high school and postsecondary institution attended, the length of time in attendance and whether the applicant is a graduate of those schools and institutions;
 - (d) The training and experience of the applicant as a physician assistant;
 - (e) Whether the applicant has ever:
 - (1) Applied for a license or certificate as a physician assistant in another state and, if so, specification of which state, when the application was made and the results of the application;
 - (2) Had a license or certificate as a physician assistant revoked, modified, limited or suspended;
 - (3) Been investigated for misconduct as a physician assistant;
 - (4) Had any disciplinary action or proceeding instituted against him by a licensing body in any jurisdiction;
 - (5) Been convicted of a felony or an offense involving moral turpitude; or
 - (6) Been investigated for, charged with or convicted of the use or illegal sale or dispensing of a controlled substance; and
 - (f) The places of residence of the applicant since the date of his graduation from high school or his receipt of a high school general equivalency diploma.
2. An application for a license as a physician assistant must be:
 - (a) Signed by the applicant;
 - (b) Sworn to before a notary public or other officer authorized to administer oaths; and
 - (c) Accompanied by:
 - (1) A physician assistant information profile prepared by the Federation Credentials Verification Service of the Federation of State Medical Boards;
 - (2) An affidavit affirming that:
 - (I) The applicant is the person named in the application and accompanying material; and
 - (II) To the best knowledge or belief of the applicant, the application and all accompanying material is complete, correct and consistent, and was obtained without fraud, misrepresentation or mistake; and

(3) The nonrefundable application and initial license fee prescribed in section 9 of LCB File No. R154-09.

3. If it appears to the Board that:

(a) Any information submitted is false or inconsistent; or

(b) The application is not made in proper form or other deficiencies appear in it,

the application will be rejected.

(A by Bd. of Osteopathic Med, R154-09, eff. 10-15-2010)

R154-09 Sec. 9.

1. The license of a physician assistant is valid for 1 year and may be renewed annually.

2. An application to renew a license of a physician assistant must be submitted to the Board not less than 30 days before the expiration of the license. The application must be accompanied by the nonrefundable annual license renewal fee for a physician assistant prescribed in section 9 of LCB File No. R154-09.

3. A license of a physician assistant will not be renewed unless the physician assistant provides to the Board satisfactory proof of:

(a) Current certification by the National Commission on Certification of Physician Assistants; and

(b) Completion by the physician assistant of at least 20 hours of continuing medical education as defined by the American Academy of Physician Assistants.

4. A physician assistant shall notify the Board within 10 days after receipt of notification that his certification by the National Commission on Certification of Physician Assistants was withdrawn.

5. An expired license of a physician assistant will not be renewed unless:

(a) The requirements for renewal prescribed in this section are met; and

(b) The Executive Director approves the renewal.

(Added to NAC by Bd. of Osteopathic Med., eff. 9-6-96; A by Bd. Of Osteopathic Med. R192-07, eff. 12-17-2008; A by R154-09, eff 10-15-2010)

R192-07 Sec. 10.

1. Except as otherwise provided in this section, a physician assistant must enter into a written collaborating agreement with a supervising physician before the physician assistant may perform medical services under the supervision of that supervising physician. Such an agreement must:

(a) Describe the location, times and manner in which the physician assistant will assist the supervising physician;

(b) Specify the medical services that the physician assistant is authorized to perform;

(c) Be signed by the physician assistant and the supervising physician; and

(d) Be notarized.

2. A physician assistant may perform only those medical services specified in the written collaborating agreement.

3. A physician assistant who has entered into a written collaborating agreement with a supervising physician shall:

(a) Submit a copy of the agreement to the Board within 10 days after entering into the written collaborating agreement.

(b) Notify the Board in writing within 10 days after the termination of the written collaborating agreement.

4. Except as otherwise provided in this subsection, a physician assistant may not perform medical services under the supervision of more than three supervising physicians. A physician assistant employed by a medical facility may not perform medical services at the medical facility under the supervision of more than one supervising physician. As used in this subsection, "medical facility" has the meaning ascribed to it NRS 449.0151.

5. A physician assistant may perform medical services under a temporary written collaborating agreement that is valid for not more than 30 days if the agreement is approved by the Board.

6. A supervising physician may not supervise more than a total of three physician assistants and advanced practitioners of nursing at one time. As used in this subsection, "advanced practitioner of nursing" has the meaning ascribed to it in NRS 453.023.

7. A physician assistant who has been subject to disciplinary action pursuant to this chapter or chapter 633 of NRS may only be supervised by a supervising physician who has been approved by the Board to supervise that physician assistant.

R192-07 Sec. 11.

1. A supervising physician is responsible for all of the activities related to the performance of medical services conducted by the physician assistant whom he supervises, including, without limitation:

- (a) Obtaining the medical histories of patients;
- (b) Performing physical examinations;
- (c) Ordering and performing diagnostic and therapeutic procedures;
- (d) Implementing a treatment plan outlined by a supervising physician;
- (e) Monitoring the effectiveness of therapeutic interventions;
- (f) Assisting at surgery;
- (g) Offering counseling and education to meet the needs of patients;
- (h) Making appropriate referrals; and
- (i) Pronouncing death, excluding the diagnosis of the cause of death.

2. The supervising physician shall ensure that:

- (a) The physician assistant is clearly identified to the patients as a physician assistant;
- (b) The physician assistant performs only those medical services which are specified in the written collaborating agreement between the supervising physician and the physician assistant; and
- (c) The physician assistant strictly complies with:

(1) The provisions of the registration certificate issued to the 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.

3. A supervising physician:

(a) Except as otherwise provided in NRS 633.469, shall provide supervision in person at least once each month to the physician assistant.

(b) Must be available for consultation at all times during which the physician assistant is performing medical services.

(c) Shall review and initial at least 10 percent of the charts of the patients of the physician assistant at least four times each year.

(d) Shall develop and carry out a program to ensure the quality of care provided by the physician assistant, which must include, without limitation:

- (1) An assessment of the medical competency of the physician assistant;
- (2) A review and initialing of selected charts;
- (3) 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;
- (4) Direct observation of the ability of the physician assistant to take medical histories from and perform examinations of patients representative of those cared for by the physician assistant; and
- (5) Maintenance by the supervising physician of accurate records and documentation regarding the program for each physician assistant supervised.

4. A patient cared for by a physician assistant for a recurring illness that is not a chronic illness must be examined by the supervising physician of the physician assistant if the patient does not show improvement

within a reasonable period of time.

(Added to NAC by Bd. of Osteopathic Med., eff. 9-6-96; NAC A by R192-07, 12-17-2008)

R192-07, Sec. 12.

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) Represented himself, or allowed another person to represent the physician assistant, as an osteopathic physician;
- (b) Performed medical services other than at the direction of or under the supervision of the supervising physician;
- (c) Performed medical services other than those approved by the supervising physician;
- (d) Disobeyed any order of the Board or an investigative committee of the Board, or any provisions of this chapter or of any regulations adopted by the Board, the State Board of Health or the State Board of Pharmacy;
- (e) Failed to notify the Board of the loss of certification by the National Commission on Certification of Physician Assistants; or
- (f) Violated any provision of this chapter or chapter 633 of NRS.

2. A physician assistant is not subject to disciplinary action solely for prescribing or administering to a patient under his care a controlled substance that is listed in schedule II, III, IV or V by the State Board of Pharmacy pursuant to NRS 453.146 if the controlled substance is lawfully prescribed or administered for the treatment of intractable pain in accordance with accepted standards for the practice of osteopathic medicine.

3. To initiate disciplinary action against a physician assistant, a written complaint specifying the charges must be filed with the Board.

4. Before the Board takes disciplinary action against a physician assistant, the Board will give to the physician assistant and to his 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 must be served on the physician assistant and the supervising physician at least 20 days before the date fixed for the hearing. 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 Osteopathic Med., Art. XII § 5, eff. 9-15-80]—(NAC A 9-6-96; A by R192-07, eff. 12-17-2008)

R192-07, Sec. 13.

If the Board finds, by a preponderance of the evidence, and after notice and hearing in accordance with this chapter, that:

1. The charges in the complaint against a 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 the medical services that a physician assistant is authorized to perform.
- (d) Suspension of a license, for a specified period or until further order of the Board.
- (e) Revocation of a license.
- (f) A requirement that a physician assistant participate in a program to correct alcohol or drug abuse or any other impairment.
- (g) A requirement that there be additional and specified supervision of the medical services performed by a physician assistant.
- (h) A requirement that a physician assistant perform community service without compensation.
- (i) A requirement that a physician assistant take a physical or mental examination or an examination testing medical competence.

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

2. No violation has occurred, the Board will issue a written order dismissing the charges and notify the physician assistant that the charges have been dismissed.

(Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006; A by R192-07, eff 12-17-2008)

STANDARDS OF PRACTICE

NAC 633.340 Prohibited procedures and substances. (NRS 633.131, 633.291)

1. An osteopathic physician shall not prescribe, dispense or use Disodium Ethylene Diamine Tetra Acetic Acid (EDTA) in his or her practice or use Chelation Therapy in his or her practice, except that the substance or the procedure, or both, may be used for the treatment of proven heavy metal poisoning or any other unusual or infrequent condition which the Board finds warrants its use.

2. The use of any procedure or substance which is prohibited by this section is harmful to the public, detrimental to the public health, safety and morals and constitutes unprofessional conduct.

[Bd. of Osteopathic Med., Art. XIII § 1, eff. 9-15-80]; A by Bd. of Osteopathic Med by R192-07; eff 12-17-2008; A by R154-09, eff. 10-15-2010)

NAC 633.350 Unethical conduct. (NRS 633.131, 633.291)

1. For the purposes of this chapter and chapter 633 of NRS, an osteopathic physician engages in unethical conduct if he:

NEW FIRST PARALLEL SECTION

- (a) Engages in sexual misconduct with a patient;
- (b) Abandons a patient;
- (c) Willfully makes and files false reports, records or claims in the osteopathic physician's practice;
- (d) Willfully fails to file or record a medical report required by law, willfully impedes or obstructs the filing or recording of such a report, or willfully induces another person to fail to file or record such a report;
- (e) Fails to generate or create medical records relating to the diagnosis, treatment and care of a patient;
- (f) Prescribes a controlled substance in a manner or an amount that the Board determines is excessive;
- (g) Fails to comply with the terms of an agreement with a diversion program approved by the Board;
- (h) Fails to comply with an order of the Board;
- (i) Fails to comply with a remediation agreement approved by the Board pursuant to NRS 633.510;
- (j) Violates the provisions of NRS 633.505 concerning retaliation or discrimination against an employee;
- (k) Violates the provisions of NRS 629.061 concerning making the health care records of a patient available for physical inspection and furnishing a copy of the health care records;
- (l) Fails to provide adequate supervision of a medical assistant who is employed or supervised by the osteopathic physician; or
- (m) Engages in any other conduct that the Board determines constitutes unfitness to practice osteopathic medicine.

2. For the purposes of this chapter and chapter 633 of NRS, a physician assistant engages in unethical conduct if the physician assistant engages in any conduct which constitutes unethical conduct by an osteopathic physician pursuant to paragraphs (a) to (j), inclusive, of subsection 1.

3. As used in this section, "medical assistant" means any person who:

- (a) Is employed by an osteopathic physician;
- (b) Is under the direction and supervision of the osteopathic physician;
- (c) Assists in the care of a patient; and

(d) Is not required to be certified or licensed by an administrative agency to provide that assistance. (Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by Bd. of Osteopathic Med by R192-07, eff. 12-17-2008; A by R154-09, eff 10-15-2010; A by R154-09, **this will no longer be effective after 6-30-2011**)

NEW SECOND PARALLEL SECTION

NAC 633.350 Unethical conduct. (NRS 633.131, 633.291)

1. For the purposes of this chapter and chapter 633 of NRS, an osteopathic physician engages in unethical conduct if he:

- (a) Engages in sexual misconduct with a patient;
- (b) Abandons a patient;
- (c) Willfully makes and files false reports, records or claims in the osteopathic physician's practice;
- (d) Willfully fails to file or record a medical report required by law, willfully impedes or obstructs the filing or recording of such a report, or willfully induces another person to fail to file or record such a report;
- (e) Fails to generate or create medical records relating to the diagnosis, treatment and care of a patient;
- (f) Prescribes a controlled substance in a manner or an amount that the Board determines is excessive;
- (g) Fails to comply with the terms of an agreement with a diversion program approved by the Board;
- (h) Fails to comply with an order of the Board;
- (i) Violates the provisions of NRS 633.505 concerning retaliation or discrimination against an employee;
- (j) Violates the provisions of NRS 629.061 concerning making the health care records of a patient available for physical inspection and furnishing a copy of the health care records;
- (k) Fails to provide adequate supervision of a medical assistant who is employed or supervised by the osteopathic physician; or
- (l) Engages in any other conduct that the Board determines constitutes unfitness to practice osteopathic medicine.

2. For the purposes of this chapter and chapter 633 of NRS, a physician assistant engages in unethical conduct if the physician assistant engages in any conduct which constitutes unethical conduct by an osteopathic physician pursuant to paragraphs (a) to (i), inclusive, of subsection 1.

3. As used in this section, "medical assistant" means any person who:

- (a) Is employed by an osteopathic physician;
- (b) Is under the direction and supervision of the osteopathic physician;
- (c) Assists in the care of a patient; and
- (d) Is not required to be certified or licensed by an administrative agency to provide that assistance.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by Bd. of Osteopathic Med by R192-07, eff. 12-17-2008; A by R154-09, eff 10-15-2010; A by R154-09, **effective 07-01-2011**)

NAC 633.360 Advertisement of practice. (NRS 633.131, 633.291)

1. An osteopathic physician shall not advertise the practice of osteopathic medicine in a manner that is:

- (a) False; or
- (b) Intended or has a tendency to:
 - (1) Deceive or mislead the public; or
 - (2) Create unrealistic expectations in any particular case.

2. Proof of actual injury is not necessary to establish a violation of subsection 1.
(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002)

NAC 633.370 Rebuttable presumption of professional incompetence. (NRS 633.291, 633.561, 633.571)

For the purposes of this chapter and chapter 633 of NRS, if a mental or physical examination or a medical competency examination determines that:

1. An osteopathic physician is not competent to practice osteopathic medicine; or
2. A physician assistant is not competent to perform medical services under the supervision of a supervising physician,
↳ with reasonable skill and safety to patients, the Board will consider that determination to constitute a rebuttable presumption of professional incompetence with regard to the osteopathic physician or physician assistant.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R192-07, eff. 12-17-2008)

REPORTS

NAC 633.380 Reports of certain information concerning surgeries: Submission; failure to comply with requirements. (NRS 633.291, 633.524)

1. An osteopathic physician shall, on or before January 31 of each year, submit to the Board, on a form to be provided by the Board, the report required pursuant to NRS 633.524.

2. Failure to comply with the requirements of this section or NRS 633.524 may subject the osteopathic physician to disciplinary action as provided by law.

(Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006; A by R192-07, eff. 12-17-2008)

ADMINISTRATIVE PROCEEDINGS

General Provisions

NAC 633.400 Conduct and record of hearings. (NRS 633.291)

1. Each hearing of a contested case will be conducted in accordance with the provisions of this chapter and chapter 233B of NRS and, if the hearing concerns a disciplinary proceeding, chapter 622A of NRS and NRS 633.509 to 633.681, inclusive.

2. Except as otherwise provided in subsection 3, the President, or a member of the Board designated by him, will preside over the hearing.

3. If the hearing concerns a disciplinary proceeding, the Board or a hearing officer or panel designated by the Board will preside over the hearing.

4. An electronic or stenographic record will be made of all contested hearings before the Board.

[Bd. of Osteopathic Med., Art. IX §§ 1-4, eff. 9-15-80]—(NAC A by R057-02, 10-24-2002; R208-05, 2-23-2006)

NAC 633.410 Rulings on preliminary matters. (NRS 633.291)

1. The Board, the President or the member of the Board, the hearing officer or the panel designated to preside over a hearing may issue rulings on all preliminary matters, including, without limitation, scheduling matters, protective orders, the admissibility of evidence, and other procedural or prehearing matters.

2. A ruling by the President, member of the Board, hearing officer or panel on a preliminary matter is subject to reconsideration by the entire Board upon the request of a Board member or the motion of a party.

3. The failure of a party who is affected by a ruling on a preliminary matter to move for reconsideration of the ruling does not constitute:

- (a) Consent to the ruling; or
- (b) Waiver of any objection previously made to the ruling.

4. For the purposes of this section, a matter is preliminary if it is not dispositive of a disciplinary proceeding or other contested case or a substantive issue therein.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R208-05, 2-23-2006)

NAC 633.420 Appearance and representation of parties. (NRS 633.291)

1. Except as otherwise provided in subsection 2, a party may appear at a hearing in person or by an attorney.

2. If the hearing concerns a contested case other than a disciplinary proceeding governed by chapter 622A of NRS, a party shall attend the hearing on the merits in person unless the President or presiding officer waives the requirement of the attendance of the party.

3. If a party who is required pursuant to subsection 2 to attend a hearing in person fails to do so without having obtained a waiver of the requirement of his attendance pursuant to subsection 2, the Board may:

- (a) Determine that his failure to attend the hearing in person shall be deemed:
 - (1) An admission of all matters and facts contained in the record with respect to the party; and
 - (2) A waiver of the right to an evidentiary hearing; and
- (b) Take action based upon such admission or upon any other evidence, including affidavits, without any further notice or a hearing.

4. If a party retains an attorney to represent him before the Board, the attorney shall so notify the Board not later than 10 days after he is retained. Thereafter:

(a) The attorney shall sign all motions, oppositions, notices, requests and other papers, including requests for subpoenas; and

(b) The Board will serve all notices, motions, orders, decisions, and any other papers or pleadings upon the attorney.

5. An attorney appearing as counsel in any proceeding other than a disciplinary proceeding must be an attorney at law, admitted to practice and in good standing before the highest court of any state. If the attorney is not admitted and entitled to practice before the Supreme Court of Nevada, he must be associated with an attorney so admitted and entitled to practice.

6. An attorney appearing as counsel in a disciplinary proceeding shall comply with the provisions of NRS 622A.310.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R208-05, 2-23-2006)

NAC 633.430 Procedure at hearings. (NRS 633.291)

1. In a hearing other than a hearing concerning a disciplinary proceeding, the President or presiding officer will call the hearing to order and proceed to take the appearances on behalf of the Board, the applicant or the osteopathic physician or physician assistant. The legal counsel for the Board will present the evidence for the Board first and, if the Board allows closing arguments, will present the closing arguments for the Board first.

2. In a hearing concerning a disciplinary proceeding, the Board, hearing officer or panel shall conduct the hearing in accordance with the provisions of NRS 622A.380.

3. The notice of hearing, any petition, answer, response or written stipulation, and, if the hearing concerns a disciplinary proceeding, the complaint or any other responsive pleading, becomes a part of the record without being read into the record, unless a party requests that the document be read into the record.

4. The Board, President, presiding officer, hearing officer or panel may, at any time:

- (a) Question a witness;
- (b) Request or allow additional evidence, including additional rebuttal or documentary evidence;
- (c) Make proposed opinions, findings of fact and conclusions of law;
- (d) Issue appropriate interim orders;
- (e) Recess the hearing as required; and

(f) Set reasonable limits of time for the presentation of testimony.

5. If closing briefs are permitted, the Board, President, presiding officer, hearing officer or panel shall establish a time frame for the submission of the closing briefs.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R208-05, 2-23-2006; A by R192-07, eff. 12-17-2008)

NAC 633.440 Proposed findings of fact and conclusions of law. (NRS 633.291)

1. The Board, President, hearing officer, panel or a member of the Board designated to preside over and conduct a hearing may require a party in any disciplinary proceeding or other contested case to file proposed findings of fact and conclusions of law at the close of the proceeding. The Board, President, hearing officer, panel or member of the Board shall fix the period within which the proposed findings of fact and conclusions of law must be filed.

2. Each proposed finding of fact and conclusion of law must be clearly and concisely stated and numbered. Each proposed finding of fact must specifically show, by appropriate reference to the transcript, the testimony that supports the finding.

3. The proposed findings of fact and conclusions of law, accompanied by a certificate of service, must be filed by each party with the Board, President, hearing officer, panel or member of the Board, and one copy must be served upon each party to the proceeding.

Disciplinary Proceedings

NAC 633.450 Summary suspension of license by Board. (NRS 633.291, 633.651)

1. If a complaint has been filed against an osteopathic physician pursuant to NRS 633.531 or against a physician assistant pursuant to section 12 of LCB File No. R192-07, the Board may order the summary suspension of the license of the osteopathic physician or physician assistant pending disciplinary proceedings.

2. The Board will issue such an order if it determines that:

(a) The osteopathic physician or physician assistant has violated a provision of this chapter or chapter 633 of NRS;

(b) The summary suspension of the license is necessary to prevent a further violation of this chapter or chapter 633 of NRS; and

(c) The public health, safety or general welfare imperatively requires the summary suspension of the license.

3. An order summarily suspending a license:

(a) Must:

(1) Comply with the applicable provisions of NRS 233B.127; and

(2) Set forth the grounds upon which the order is issued, including a statement of facts;

(b) Is effective upon service on the osteopathic physician or physician assistant of the order and complaint; and

(c) Remains in effect until the Board:

(1) Modifies or rescinds the order; or

(2) Issues its final order or decision on the underlying complaint.

4. A hearing on the complaint must be held within 45 days after the effective date of the suspension.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R192-07, eff. 12-17-2008; a by R154-09, eff 10-15-2010)

NAC 633.454 Hearing officer or panel: Authority of Board; duties; findings and recommendations. (NRS 633.291, 633.660)

1. The Board may appoint a hearing officer or panel to preside over and conduct a hearing concerning a disciplinary proceeding in the manner set forth in chapter 622A of NRS.

2. If the Board appoints a hearing officer or panel pursuant to subsection 1, the Board may:

- (a) Revoke the appointment and assume responsibility for presiding over and conducting the hearing; or
 - (b) Designate another hearing officer or panel to preside over and conduct the hearing.
3. If a hearing officer or panel presides over and conducts a hearing concerning a disciplinary proceeding, the hearing officer or panel shall, after the close of all evidentiary hearings, file with the Board and serve on each party to the hearing written findings and recommendations that include, without limitation:
- (a) A proposed order;
 - (b) The findings of fact and conclusions of law of the hearing officer or panel;
 - (c) The reasons and bases for its findings of fact and conclusions of law; and
 - (d) The recommendations of the hearing officer or panel.
4. Pursuant to NRS 622A.300, the written findings and recommendations of a hearing officer or panel are subject to review by the entire Board.
5. Upon review of the written findings and recommendations of a hearing officer or panel, the Board may, subject to the provisions of NRS 233B.124 and subsection 5 of NRS 622A.300, approve, reject or modify the written findings and recommendations, in whole or in part, and may take any other action that the Board deems appropriate to resolve the case.
- (Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006)

NAC 633.457 Hearing officer or panel: Rulings regarding admissibility of evidence; referral of matter to Board. (NRS 633.291)

- 1. In a disciplinary proceeding, a ruling made by a hearing officer or panel presiding over and conducting a hearing concerning the disciplinary proceeding regarding the admissibility of evidence is subject to review by the Board.
 - 2. In extraordinary circumstances, when a prompt decision by the Board is necessary to promote substantial justice, the hearing officer or panel shall refer the matter to the Board for a determination and may recess the hearing pending the determination.
- (Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006)

NAC 633.460 Meeting or conference of parties before hearing. (NRS 633.291)

- 1. The parties to a disciplinary proceeding shall meet or confer, not later than 20 days before the hearing, and:
 - (a) Exchange copies of all documents that each party intends to offer as evidence in support of its case.
 - (b) Identify, describe or produce all tangible things, other than documents, that each party intends to offer as evidence in support of its case and, if requested, arrange for the opposing party to inspect, copy, test or sample such evidence under reasonable supervision.
 - (c) Exchange written lists of persons that each party intends to call as witnesses in support of its case. The list must identify each witness by name and position and, if known, business address. If no business address is available, the party intending to call the witness shall disclose the home address of the witness or make the witness available for service of process. The list must also include, for each witness, a summary of the proposed testimony and the purpose for which the witness will be called.
- 2. As used in this section, "parties to a disciplinary proceeding" includes:
 - (a) An osteopathic physician who has been served with a formal complaint alleging a disciplinary violation pursuant to NRS 633.541 or a physician assistant who has been served with a formal complaint alleging a disciplinary violation pursuant to section 12 of [regulations identified as LCB File No. R192-07];
 - (b) The attorney, if any, representing the osteopathic physician or physician assistant; and
 - (c) The legal counsel for the Board.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R208-05, 2-23-2006)

NAC 633.463 Prehearing conference. (NRS 633.291)

- 1. In a disciplinary proceeding, the Board, hearing officer or panel may, upon its own motion or a motion by a party, hold a prehearing conference not later than 10 days before a hearing concerning a disciplinary

proceeding to:

- (a) Formulate or simplify the issues involved in the proceeding;
- (b) Obtain an admission of fact or stipulation of the parties;
- (c) Arrange for the exchange of prefiled direct testimony of a witness ordered by the Board, hearing officer or panel;
- (d) Limit the number of witnesses;
- (e) Rule on any pending procedural motions, motions for discovery or motions for protective orders; or
- (f) Establish any other procedure which may expedite the orderly conduct and disposition of the proceeding.

2. Notice of any prehearing conference must be provided to all parties to the disciplinary proceeding. Except as otherwise ordered for good cause shown, the failure of a party to attend a prehearing conference constitutes a waiver of any objection to the agreements reached or rulings made at the prehearing conference.

3. The actions taken and the agreements made at a prehearing conference:

- (a) Must be made part of the record;
 - (b) Control the course of subsequent proceedings unless modified by the Board, hearing officer or panel;
- and

(c) Are binding upon the parties to the disciplinary proceeding and any person who subsequently becomes a party to the disciplinary proceeding.

(Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006)

NAC 633.466 Stipulations regarding facts in issue. (NRS 633.291)

1. With the approval of the Board, hearing officer or panel presiding over and conducting a hearing concerning a disciplinary proceeding, the parties to the disciplinary proceeding may stipulate as to any fact in issue, either by written stipulation introduced in evidence as an exhibit or by an oral statement made upon the record. The stipulation is binding only upon the parties so stipulating and is not binding upon the Board, hearing officer or panel.

2. A stipulation may be considered by the Board, hearing officer or panel as evidence at a hearing concerning the disciplinary proceeding. Notwithstanding the stipulation of the parties, the Board, hearing officer or panel may require proof of the facts stipulated to by independent evidence.

(Added to NAC by Bd. of Osteopathic Med. by R208-05, eff. 2-23-2006)

NAC 633.470 Action by Board after hearing. (NRS 633.291, 633.651) If the Board, after a hearing on the merits in a disciplinary proceeding, finds that the osteopathic physician is:

1. Not guilty as charged in the formal complaint, the Board will issue a final order dismissing the charges and notify the osteopathic physician that the charges have been dismissed.

2. Guilty as charged in the formal complaint, the Board may:

- (a) Before agreeing on a punishment, consider all relevant factors, including, without limitation:
 - (1) The danger to the health or safety of the public from the violation;
 - (2) The economic benefit received by the osteopathic physician from the violation;
 - (3) Any mitigation or aggravation by the osteopathic physician of the effects of the violation;
 - (4) The extent to which the osteopathic physician demonstrates his good faith;
 - (5) Any previous history of violations by the osteopathic physician;
 - (6) Whether the osteopathic physician knew or, as a competent osteopathic physician, should have known that the action complained of violated a law, a regulation or a condition on his license;
 - (7) Whether the osteopathic physician has initiated remedial measures to prevent similar violations;
 - (8) The magnitude of penalties imposed on other osteopathic physicians for similar violations;
 - (9) The proportionality of the penalty in relation to the misconduct; and
 - (10) If the osteopathic physician offered evidence of mitigating factors, all such evidence.

(b) Agree on punishment that may, in addition to any sanction authorized pursuant to subsection 1 of NRS 633.651, require the osteopathic physician to:

- (1) Participate in a program, approved by the Board, to correct alcohol or drug dependence or any other impairment;
- (2) Practice only under supervision approved by the Board and paid for by the osteopathic physician;
- (3) Perform public service approved by the Board without compensation;
- (4) Submit to a physical or mental examination or a medical competency examination for the purposes of determining his fitness to practice osteopathic medicine with reasonable skill and safety to patients;
- (5) Fulfill certain training or educational requirements approved by the Board; and
- (6) Pay all costs incurred by the Board relating to his disciplinary proceedings.

(c) Issue and serve on the osteopathic physician its final order.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R192-07, eff. 12-17-2008)

NAC 633.480 Decision or order by Board. (NRS 633.291, 633.651)

1. A decision or order in a disciplinary proceeding adverse to an osteopathic physician or physician assistant must:

- (a) Be in writing;
- (b) Except as otherwise provided in subsection 5 of NRS 233B.121, include findings of fact and conclusions of law; and
- (c) Specifically set forth the punishment imposed on the osteopathic physician or physician assistant.

2. Except as otherwise provided in NRS 633.671, an order of the Board is effective upon being served on the osteopathic physician or physician assistant.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R192-07, eff. 12-17-2008)

NAC 633.490 Removal of limitation on or restoration of license. (NRS 633.291, 633.681)

1. If a person whose practice of osteopathic medicine has been limited, or whose license to practice osteopathic medicine has been suspended, revoked or placed on inactive status, applies to the Board:

- (a) Pursuant to NRS 633.481 for the restoration of the revoked license;
- (b) Pursuant to NRS 633.491 for the renewal of the license; or
- (c) Pursuant to NRS 633.681 for the removal of the limitation or suspension or for the reinstatement of his revoked license,

the Board may require the person to submit to an examination testing his competence to practice osteopathic medicine.

2. The Board will not remove a limitation or suspension or reinstate a revoked license unless:

- (a) The applicant proves by clear and convincing evidence that the requirements for the removal of the limitation or suspension or for the reinstatement of the revoked license have been met; and
- (b) The applicant proves by evidence satisfactory to the Board that he:
 - (1) Has complied with all the terms and conditions set forth in any final order of the Board limiting his practice or suspending or revoking his license; and
 - (2) Is capable of practicing osteopathic medicine in a safe manner.

(Added to NAC by Bd. of Osteopathic Med. by R057-02, eff. 10-24-2002; A by R154-09, eff 10-15-2010)