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**DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS**

NEVADA STATE BOARD OF NURSING

NOTICE OF INTENT TO ACT UPON A REGULATION

**NOTICE OF HEARING FOR THE ADOPTION, AMENDMENT, REVISION, OR REPEAL
OF REGULATIONS OF THE NEVADA STATE BOARD OF NURSING**

LCB File No. R087-25

The Nevada State Board of Nursing will hold a public hearing at 10:00 a.m., on Wednesday, March 11, 2026, at the Nevada State Board of Nursing board meeting held in Las Vegas, Nevada.

For those wishing to attend in person, the physical location of the Hearing is at the Hilton Garden Inn Las Vegas Strip South, 7830 S. Las Vegas Blvd., Las Vegas, NV 89123.

For those wishing to attend virtually by computer, mobile app, or telephone, the Hearing will also be held virtually via Microsoft Teams. The link to the Teams meeting is:

To join by Video/Teleconference:

<https://teams.microsoft.com/meet/27838373357618?p=VesMOI4wY84i48XavB>

To join by meeting ID through Microsoft Teams:

Meeting ID: 278 383 733 576 18

Passcode: rb2aU3G6

To join by telephone:

775-321-6111

Phone conference ID: 716 247 863#

Reno: 6005 Plumas St., Suite 100, Reno, Nevada 89519 - Telephone (888) 590-6726 - Fax (775) 687-7707

Las Vegas: 5820 S. Eastern Avenue, Suite 200, Las Vegas, Nevada 89119 - Telephone (888) 590-6726 - Fax (702) 486-5803
www.nevadanursingboard.org

The purpose of the public hearing is to receive comments from all interested persons regarding the adoption, amendment, or repeal of regulations that pertain to chapter 632 of the Nevada Administrative Code, LCB File No. R087-25.

The Nevada State Board of Nursing adopted the proposed regulations in LCB File No. R087-25 at a Regulation Hearing conducted on January 14, 2026. Upon presentation at the Legislative Commission meeting held on February 26, 2026, sufficient concerns were raised such that a second Regulation Hearing was deemed advisable to determine whether or not Section 4 of LCB File No. R087-25 should be deleted and the revised LCB File possibly adopted.

The following information is provided pursuant to the requirements of NRS 233B.0603(1)(a):

1. The need for and the purpose of the proposed regulation or amendment.

The proposed regulation is necessary to implement the requirements of Assembly Bill 319 that passed during the 2025 Nevada Legislative Session. AB 319 allows Medical Assistants (MA) to perform clinical tasks under the supervision of Advanced Practice Registered Nurses (APRN) and Registered Nurses (RN). AB 319 also required the Nevada State Board of Nursing to adopt regulations governing the supervision of MAs by APRNs and RNs. The proposed regulations provide definitions, limits on APRN and RN supervision and delegation, limits on APRN and RN remote supervision, and prohibited activities by APRNs and RNs.

2. If the proposed regulation is a temporary regulation, the terms of the substance of the proposed regulation to be adopted, amended or repealed, or a description of the subjects and issues involved.

The proposed regulation is not a temporary regulation.

3. If the proposed regulation is a permanent, a statement explaining how to obtain the approved or revised text of the proposed regulation.

A copy of the proposed regulation amendment is attached to this notice.

4. The estimated economic effect of the regulation on the business which it is to regulate and on the public. These must be stated separately and in each case must include:

(a) Both adverse and beneficial effects.

Adverse effects

The Board does not anticipate any adverse economic impact from this regulation on businesses or the public.

Beneficial effects

The Board anticipates the beneficial effect to the public would be the greater access to health care by the addition of Medical Assistants, who are qualified health care workers, to be supervised by APRNs and RNs.

- (b) Both immediate and long-term effects.

Immediate effects

The Board does not anticipate any immediate economic effect on businesses or the public.

Long-term effects

The Board does not anticipate any long-term economic effect on businesses or the public.

5. The methods used by the agency in determining the impact on a small business.

The proposed regulation involves the supervision of Medical Assistants by APRNs and RNs. This proposed regulation involves the supervisory relationship between health care workers. This supervisory relationship will not impact small businesses.

6. The estimated cost to the agency for enforcement of the proposed regulation.

There will be no significant cost to the Nevada State Board of Nursing for the enforcement of the proposed regulation.

7. A description of and citation to any regulations of other state or local government agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Nevada State Board of Nursing is not aware of any similar regulations of other state or government agencies that the proposed regulations overlap or duplicate.

8. If the regulation is required pursuant to federal law, a citation and description of the federal law.

This regulation is not required by federal law.

9. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

This regulation does not include any provisions that are more stringent than a federal regulation that regulates the same activity.

10. Whether the proposed regulation establishes a new fee or increases an existing fee.

This regulation does not provide a new fee or increase of fees.

11. If the proposed regulation is a temporary regulation, each address at which the text of the regulation may be inspected and copied.

The proposed regulation is not a temporary regulation.

Persons wishing to comment upon the proposed action of the Nevada State Board of Nursing may appear at the scheduled Public Hearing or may address their comments, data, views, or arguments in written form to the Nevada State Board of Nursing, 6005 Plumas Street, Suite 100, Reno, Nevada 89519, or at the e-mail address: nursingboard@nsbn.state.nv.us. Written submissions must be received by the Board by March 10, 2026, at 5:00 p.m. If no person who is directly

affected by the proposed action appears to request time to make an oral presentation, the Board may proceed immediately to act upon any written submissions.

A copy of this notice and the regulation to be adopted, amended, or repealed will be on file at the State Library, 100 Stewart Street, Carson City, Nevada for inspection by members of the public during business hours. Additional copies of the notice and regulation to be adopted, amended or repealed will be available at the offices of the Nevada State Board of Nursing. The addresses of those offices are: Reno: 6005 Plumas Street, Suite 101, Reno, Nevada 89519; Las Vegas: 5820 Eastern Avenue, Suite 200, Las Vegas, Nevada 89119 for inspection by members of the public during business hours. This notice and the text of the proposed regulation are also available at the State of Nevada Register of Administrative Regulations, which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653 and on the Internet at <http://www.leg.state.nv.us/>. Copies of this notice and the proposed regulation will also be mailed to members of the public at no charge upon request.

Upon adoption of any regulation, the agency, if requested to do so by an interested person, either before adoption or within 30 days thereafter, will issue a concise statement of the principal reasons for and against its adoption and incorporate therein its reason for overruling the consideration urged against its adoption.

This notice of hearing has been posted at the following locations:

Nevada State Board of Nursing
6005 Plumas Street, Suite 100
Reno, Nevada 89519

Nevada State Board of Nursing
5820 S. Eastern Ave., Suite 200
Las Vegas, Nevada 89119

By email to all persons on the Board's email list for noticing of administrative regulations
By email for posting by the Nevada State Library, Archives and Public Records Administrator.
Publishing to the Nevada Legislature website <http://leg.state.nv.us/App/Notice/A/>.
Publishing to the Nevada State Board of Nursing website: <https://nevadanursingboard.org>
Publishing to the Nevada Public Notices website www.notice.nv.gov
Publishing to the Legislative Counsel Bureau website www.leg.state.nv.us/Division/LCB

Posted on March 3, 2026

**ADOPTED REGULATION OF
THE STATE BOARD OF NURSING**

LCB File No. R087-25

EXPLANATION – Matter in *italics* is new; matter in brackets ~~omitted material~~ is material to be omitted.

AUTHORITY: §§ 1-5, NRS 632.120, as amended by section 70 of Assembly Bill No. 319, chapter 246, Statutes of Nevada 2025, at page 1634.

A REGULATION relating to nursing; authorizing the delegation of clinical tasks to medical assistants under certain conditions; authorizing the remote supervision of medical assistants under certain conditions; prohibiting a delegating practitioner from taking certain actions; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law authorizes the State Board of Nursing to adopt regulations establishing requirements governing the supervision of a medical assistant. (NRS 632.120, as amended by section 70 of Assembly Bill No. 319, chapter 246, Statutes of Nevada 2025, at page 1634)

Section 2 of this regulation defines the term “delegating practitioner” to mean a registered nurse who delegates a clinical task to a medical assistant. **Section 3** of this regulation prescribes the conditions under which a delegating practitioner may delegate a clinical task to a medical assistant. **Section 3** also requires the employer of a medical assistant to document in the employment record of a medical assistant that the medical assistant is properly trained and competent to perform a delegated clinical task. **Section 3** additionally requires that a delegating practitioner be available to immediately supervise a medical assistant’s performance if the clinical task involves an invasive procedure. Finally, **section 3** prohibits a medical assistant from making a diagnosis, initiating any treatment or prescribing any drug.

Section 4 of this regulation authorizes a delegating practitioner to remotely supervise a medical assistant if the patient is located in a rural area and certain other conditions are met.

Section 5 of this regulation provides that a delegating practitioner is responsible for the safety and performance of a clinical task by a medical assistant. **Section 5** also prohibits a delegating practitioner from taking certain actions when delegating a clinical task to a medical assistant.

Section 1. Chapter 632 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 5, inclusive, of this regulation.

Sec. 2. As used in sections 2 to 5, inclusive, of this regulation, unless the context otherwise requires, “delegating practitioner” means a registered nurse, including, without limitation, an advanced practice registered nurse, who delegates the performance of a clinical task to a medical assistant pursuant to sections 2 to 5, inclusive, of this regulation.

Sec. 3. 1. Except as otherwise provided in this section, a delegating practitioner may delegate the performance of a clinical task to a medical assistant if:

(a) The delegating practitioner knows that the medical assistant possesses the knowledge, skill and training to perform the clinical task safely and properly;

(b) The medical assistant is not required to be certified or licensed to perform the clinical task;

(c) The medical assistant is employed by the delegating practitioner or the medical assistant and the delegating practitioner are employed by the same employer; and

(d) The employer of the medical assistant has complied with the requirements of subsection 2 as they relate to the clinical task.

2. The employer of a medical assistant shall document in the employment record of the medical assistant that the medical assistant has been appropriately trained and is competent to perform any clinical task or procedure delegated to the medical assistant.

3. Except as otherwise provided in section 4 of this regulation, if a delegating practitioner delegates to a medical assistant a clinical task which involves an invasive procedure, the delegating practitioner must be immediately available to exercise oversight in person while the medical assistant performs the clinical task.

4. A medical assistant shall not make a diagnosis, initiate any treatment or prescribe any drug.

~~Sec. 4. 1.—A delegating practitioner may supervise remotely a medical assistant to whom the delegating practitioner has delegated the performance of a task if:~~

~~(a) The patient is located in a rural area;~~

~~(b) The delegating practitioner is physically located a significant distance from the location where the task is to be performed;~~

~~(c) The delegating practitioner determines that the exigent needs of the patient require immediate attention;~~

~~(d) The patient and the delegating practitioner previously established a practitioner-patient relationship; and~~

~~(e) The delegating practitioner is immediately available by telephone or other means of instant communication during the performance of the task by the medical assistant.~~

~~2.—As used in this section, “rural area” means any area in this State other than Carson City, Henderson, Reno, Sparks, Las Vegas or North Las Vegas.~~

~~Sec. 5.—}A delegating practitioner retains responsibility for the safety and performance of each clinical task which is delegated to a medical assistant. A delegating practitioner shall not:~~

~~1. Delegate a clinical task that is not within the authority, training, expertise or normal scope of practice of the delegating practitioner;~~

~~2. Transfer to another registered nurse the responsibility of supervising a medical assistant during the performance of a clinical task unless the registered nurse knowingly accepts that responsibility;~~

~~3. Authorize or allow a medical assistant to delegate the performance of a clinical task delegated to the medical assistant to any other person; or~~

4. Delegate or otherwise allow a medical assistant to administer an anesthetic agent which renders a patient unconscious or semiconscious.