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**DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
*Helping people. It's who we are and what we do.*



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## Technical Bulletin on Denial of Rights Reporting FAQ

**1. Is this a new regulation?**

No. Reporting of physical, mechanical, and chemical restraints are required by NRS 433.534.

**2. Which hospitals are required to report the use of physical, mechanical, and chemical restraints?**

The NRS 433.534 requires that all facilities including hospitals, clinics or other institutions operated by a public or private entity, for the care, treatment and training of consumers must submit any and all consumer denial of rights reports to the Commission on Behavioral Health.

**3. Our hospital is not a mental health facility. Do we have to report the use of restraints?**

All hospitals must report the use of restraints. However, the requirement applies only to patients to are held involuntarily pursuant to NRS 433A.150.

**4. I am working in a medical-surgical emergency department. Do I have to report the use of restraints?**

All facilities including hospitals, clinics or other institutions are subject to reporting requirements. However, the requirement applies only to patients that are held involuntarily pursuant to NRS 433A.150.

**5. What denial of rights should be reported?**

Use of physical (NRS 433.5493(3)), mechanical (NRS 433.5496(3)) and chemical (NRS 433.5503(2)) restraints on a consumer must be reported as a denial of rights to the Commission.

**6. Should I report the use of medications for psychiatric emergency as a chemical restraint?**

This will depend on the purpose of medication administration. A chemical restraint, pursuant to NRS 433.5456, means the administration of drugs to a person for the specific and exclusive purpose of controlling an acute or episodic behavior that places the person or others at a risk of harm when less restrictive alternative intervention techniques have failed to limit or control the behavior. The term does not include the administration of drugs prescribed by a physician, physician assistant or advanced practice registered nurse as standard treatment for the mental or physical condition of the person.

7. **What information should be included when reporting physical, mechanical, and chemical restraints to the Commission on Behavioral Health?**

The NRS does not specify the scope of information to be reported. The DPBH includes the following information in their report to the Commission on Behavioral Health:

- a. Name of the facility and patient's medical record number,
- b. Rationale for seclusion and/or restraint,
- c. Methods used to avoid restraint and seclusion,
- d. Patient's family or legal guardian notified of the seclusion or restraint event,
- e. Is the patient medically compromised,
- f. Physician's clinical assessment justifying use of seclusion or restraint,
- g. Behavioral criteria necessary for release,
- h. Type of the restraint used with start and end times.

8. **Does the Commission on Behavioral Health provide a template for reporting?**

No. However, private facilities could modify the DPBH form for their needs. To request a copy of the DPBH Seclusion and Restraint form, please contact Autumn Blattman at [a.blattman@health.nv.gov](mailto:a.blattman@health.nv.gov) or 775-684-5850.