Errata – LCB File No. R059-16

Blue italic = Proposed language found in LCB File No. R056-16 [*Red italic in brackets*] = Proposed omitted material found in LCB File No. R059-16 *Green italic* = New language proposed in Errata [Red brackets] = Proposed omitted material in Errata.

Section 18

Sec. 18. NAC 449.61166 is hereby amended to read as follows:

449.61166 [1. The obstetric center shall establish such policies and procedures as are necessary for the control of infectious agents and disease. The policies and procedures must:
(a) Include a method of disposal, cleaning and treatment of equipment, linens, and supplies

contaminated with blood or bodily fluids; and

(b) Be in conformance with universal precautions established by the Centers for Disease Control and Prevention and with all applicable local, state and federal laws.

2. The] An obstetric center shall establish a program to monitor the health of each employee of the obstetric center. The program must include, but not be limited to:

[(a)] *I.*[Annual testing for tuberculosis;] <u>Maintaining a separate personnel file for each</u> employee of the center that must include, without limitation, documentation that the employee has had the tests or obtained the certificates required by NAC 441A.375 and

[(b)] 2. Documentation as to whether the employee has had:

[(1)] (*a*) Rubella and, if so, when the employee had rubella.

[(2)] (b) A vaccination for rubella and, if so, when the employee had the vaccination.

[3. A copy of the precautions established by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services may be obtained for a cost of \$46, plus shipping and handling, from:

The National Technical Information Service of the Centers for Disease Control and Prevention Research Department

5285 Port Royal Road

Springfield, Virginia 22161

Reference No. PB86133022

(703) 487-4870]

Rationale: To bring obstetric centers to the tuberculosis screening standards found in NAC Chapter 441A, the Infectious Diseases and Toxic Agents chapter, to help ensure the safety of patients.

Section 21

Sec. 21. NAC 449.61174 is hereby amended to read as follows:

449.61174 1. [An] *Except as otherwise provided in subsection 2, an* obstetric center must have a written agreement with at least: :

(a) One *licensed* hospital [or medical facility licensed to provide high-risk perinatal] that is capable of providing a higher level of obstetrical and neonatal care [;] than the obstetric center; and

(b) One transportation service which can provide a vehicle with equipment appropriate to the needs of a maternal patient or newborn baby during a transfer for the obstetric center,

-> that assures the expedient transfer of a maternal patient or newborn baby in accordance to established written protocols of the obstetric center when a maternal patient or newborn baby requires care beyond the capability of the obstetric center or a maternal patient is deemed to have a condition or the potential for such a condition that would result in an abnormal or complicated delivery.

An obstetric center that does not have a written agreement with a licensed hospital pursuant to subsection 1 must send a certified letter requesting such an agreement to at least one licensed hospital that provides a higher level of obstetrical and neonatal care than the obstetric center. If the hospital refuses to enter into such an agreement or does not respond to the certified letter within 30 days after the letter is mailed, the obstetric center is not required to have such an agreement. If an obstetric center does not have such an agreement, the obstetric center shall notify each maternal patient in writing that it does not have such an agreement.
 An obstetric center must be located within 30 minutes of normal driving time of a licensed hospital that provides obstetrical care.

4. An obstetric center must have policies and procedures:

<u>1.</u> (a) That require a physician with whom the obstetric center has entered into an agreement pursuant to subsection 4 of NAC 449.61152 or a designee of the physician to be available during labor and delivery; and

(b) For the emergency transfer of a patient to a licensed hospital.

2. The policy must define "available" as used in subsection (4) (1) (a) of Section 21.

5. The [medical] director of the obstetric center shall:

(a) Determine the criteria and conditions under which a maternal patient or newborn baby should be considered for transfer. The criteria and conditions must be included in the written policy and procedures for the obstetric center.

(b) Annually review those criteria and conditions.

[3.] 6. An obstetric center must establish written procedures to determine the level of care and the mode of transportation required to ensure that the maternal patient and newborn baby receive expeditious and safe care appropriate to the needs of the maternal patient or newborn baby during the transfer.