

**ERRATA TO PROPOSED REGULATION OF THE STATE BOARD OF HEALTH  
LCB FILE NO. R153-22**

**EXPLANATION – Matter in *italics* is new; matter in brackets [omitted material] is material to be omitted. *Green bold italic* is proposed new language to LCB Draft of R153-22.**

**PROPOSED REGULATION OF THE  
STATE BOARD OF HEALTH**

**LCB File No. R153-22**

**August 8, 2022**

**AUTHORITY: NRS 441A.120, 441A.150 and 441A.920.**

**[REPORTING OF ATTEMPTED SUICIDE]**

**NAC 441A.XXX “Suicide attempt” defined. (NRS 441A.120, 441A.150) “Suicide attempt” is a nonfatal self-directed potentially injurious behavior with any intent to die as a result of the behavior; and**

- 1. Results in a patient receiving services from a provider of health care in a clinical setting; and**
- 2. Corresponds to the code “suicide and suicide attempt” as established in the International Classification of Diseases, most recent Revision, Clinical Modification, adopted by the National Center for Health Statistics and the Centers for Medicare and Medicaid Services.**

**NAC 441A.XXX Provider of health care required to report attempted suicide; exceptions. (NRS 441A.120, 441A.150)**

- 1. The Medical Facilities and Providers of Health Care required to report a case or suspected case of suicide are:**
  - a. A Community Triage Center as defined by NRS 449.0031;**
  - b. A Rural Hospital as defined by NRS 449.0177;**
  - d. A Hospital as defined by NRS 449.012;**
  - e. A Psychiatric Hospital as defined by NRS 449.0165;**
  - f. A provider of health care as defined by NRS 629.031, who provides services within the facilities listed in sections 1(a) through 1(e) of this section, to a patient who has attempted suicide.**
- 2. The Facilities and Providers of Health Care listed in Section 1 shall, regardless of whether the patient is alive and not later than 7 days after discharging the patient, report the suicide attempt or suspected suicide attempt to the Chief**

**Medical Officer or his or her designee as required by subsection 2 of NRS 441A.150. If such a provider of health care provides services at a medical facility, the medical facility may submit the report on behalf of the provider.**

**NAC 441A.XXX Contents of report; provision of supplemental or additional information. (NRS 441A.120, 441A.150)**

**1. A medical facility or provider of health care shall include in a report of attempted suicide made pursuant to subsection 2 of NRS 441A.150 if known:**

**(a) The name, address and telephone number of the provider of health care making the report;**

**(b) The name, address, telephone number, sex, race, ethnicity, gender identity, sexual orientation, occupation, military/veteran status and date of birth of the patient made a suicide attempt or suspected suicide attempt;**

**(c) The number assigned to the medical record of the patient;**

**(d) The date on which the suicide attempt or suspected suicide attempt occurred;**

**(e) A statement of the disposition of the patient;**

**(f) Any code set forth in the International Classification of Diseases, most recent Revision, Clinical Modification, adopted by the National Center for Health Statistics and the Centers for Medicare and Medicaid Services, or the code used in any successor classification system adopted by the National Center for Health Statistics and the Centers for Medicare and Medicaid Services, that corresponds to or is otherwise related to the suicide attempt or suspected suicide attempt; and**

**(g) Any other information requested by the Chief Medical Officer or his or her designee.**

**2. In addition to the information required by subsection 1, a provider of health care may include in the report:**

**(a) Results from toxicology tests conducted by a laboratory concerning the suicide attempt or suspected suicide attempt;**

**(b) A statement of whether the patient was pregnant on the date on which the suicide attempt or suspected suicide attempt occurred;**

**(c) The social security number of the patient; and**

**(d) Any other information that the provider of health care believes is relevant to the report.**

**3. After making a report pursuant to subsection 2 of NRS 441A.150, a provider of health care may provide supplemental or additional information as it becomes available.**

**NAC 441A.XXX Adoption of procedures by medical facility to ensure that only one provider of health care reports suicide attempts; adoption of administrative procedures by Chief Medical Officer to track and analyze reports. (NRS 441A.120, 441A.150)**

**1. A medical facility that may have more than one provider of health care provide services to a patient who has attempted suicide or is suspected of having attempted suicide shall adopt administrative procedures to ensure that only one such provider of health care makes the report of the suicide attempt required by subsection 2 of NRS 441A.150.]**

## REPORTING OF ATTEMPTED SUICIDE

### *Section 1. Definitions.*

*1. "Attempted suicide" means an action by a person that:*

*(a) Is intended to cause the death of the same person who committed the action but does not cause the death of that person;*

*(b) Results in the person receiving services from a provider of health care in a clinical setting, and:*

*(c) Corresponds to the code "suicide and suicide attempt" as established in the International Classification of Diseases, Tenth Revision, Clinical Modification, or any successor classification system, adopted by the National Center for Health Statistics and the Centers for Medicare and Medicaid Services of the United States Department of Health and Human Services.*

*Sec. 2. A provider of health care who initially treats a patient who has attempted suicide or is suspected to have attempted suicide shall report the case or suspected case of attempted suicide to the Chief Medical Officer or his or her designee in accordance with Sec. 3 if the treatment is provided in:*

*(a) A community triage center, as defined in NRS 449.0031; or*

*(b) A hospital, as defined in NRS 449.012, including, without limitation:*

*(1) A rural hospital, as defined in NRS 449.0177; and*

*(2) A psychiatric hospital, as defined in NRS 449.0165.*

*Sec. 3. A provider of health care who is required to report a case or suspected case of attempted suicide pursuant to Sec. 2 shall include in the report required pursuant to subsection 3 of NRS 441A.150, to the extent that the information is known:*

*(a) The name, date of birth, address and telephone number of the patient who attempted Suicide or is suspected of attempting suicide;*

*(b) The name, address and telephone number of the provider of health care who treated the patient;*

*(c) The following demographic information for the patient:*

*(1) Sex;*

*(2) Gender identity or expression;*

*(3) Race;*

*(4) Ethnicity;*

*(5) Sexual orientation;*

*(6) Occupation; and*

*(7) Military or veteran status;*

*(d) The identification number of the medical record of the patient;*

*(e) The date of the attempted suicide or suspected attempted suicide;*

*(f) The disposition of the patient;*

*(g) A code that corresponds to attempted suicide or suspected attempted suicide, as defined in the International Classification of Diseases, Tenth Revision, Clinical Modification, or any successor classification system, adopted by the National Center for Health Statistics and the Centers for Medicare and Medicaid Services of the United States Department of Health and Human Services; and*

*(h) Any other information requested by the Chief Medical Officer or his or her designee.*

*2. In addition to the information required by subsection 1, a provider of health care may include in the report required by subsection 3 of NRS 441A.150:*

*(a) Results from a toxicology test conducted by a laboratory relating to the attempted suicide or suspected attempted suicide;*

*(b) A statement of whether the patient was pregnant or postpartum at the time of the attempted suicide or suspected attempted suicide;*

*(c) The social security number of the patient; and*

*(d) Any other information that the provider of health care believes is relevant.*

*Sec. 4. A provider of health care who is required to report a case or suspected case of attempted suicide pursuant to section 3 of this regulation shall report the case or suspected case not later than 30 days after discharging the patient.*

*Sec. 5. A provider of health care may provide to the Chief Medical Officer supplemental or additional information as it becomes available after initially reporting the case or suspected case of attempted suicide.*

*Sec. 6. A medical facility listed in section 3 of this regulation shall adopt administrative procedures to ensure that only one provider of health care will report a case or suspected case of attempted suicide pursuant to subsection 3 of NRS 441A.150 when multiple providers of health care treat the case or suspected case.*

*Sec. 7. Health care providers required to report a case of attempted or suspected suicide pursuant to section 3 of this regulation that willfully fails, neglects or refuses to comply with this requirement is guilty of a misdemeanor and, in addition, may be subject to an administrative fine of \$1,000 for each violation, as determined by the Board.*

*Sec. 8. On or before April 15 of each year, the Division shall compile a report summarizing the information submitted to the Chief Medical Officer in the previous calendar pursuant Sec. 3 and submit the report to the Patient Protection Commission created by NRS 439.908.*