Nevada Overdose Reporting
Frequently Asked Questions

Who is required to report?
Per Nevada Administrative Code (NAC) 441A. 100, a “provider of healthcare” means a physician, nurse or veterinarian licensed in accordance with state law or a physician assistant licensed pursuant to Nevada Revised Statutes (NRS) Chapter 630 or 633.

Is a dentist required to report?
No, a healthcare provider of a discipline not listed in NAC 441A.100 is not required to report. For example, dentists are licensed pursuant to NRS Chapter 631, and therefore are not required to report.

What if a “provider of healthcare” is made aware that their patient overdosed previously (i.e. the overdose is not the primary reason for the current interaction with the patient)?
The provider of healthcare should only report the overdose if the primary reason for the visit is to address the overdose. This law is not intended to report on previous overdoses that the provider of healthcare was not addressing during the current interaction with the patient.

How do I report?
All reports will go the Division of Public and Behavioral Health via fax to 775-684-5999. If you are interested in establishing electronic reporting, please contact Julia Peek at jpeek@health.nv.gov. The form can be found prescribe365.nv.gov.

What if I do not have or collect some of the variables indicated on the form?
Please indicate that it is not collected or not available and submit the form with the information you do have.

What type of overdose is reportable?
As defined in the emergency regulations, a drug overdose or suspected drug overdose is reportable if the suspected drug is categorized as a schedule I, II, III, or IV drug by the United States Drug Enforcement Administration.

Does a hospice need to report?
Based on the intent of the overdose reporting, it is not intended to collect overdose data to identify individuals with a terminal illness who are receiving palliative medication at the end of life. In this case, the provider of healthcare need not submit a report.

How long are the emergency regulations in effect?
The emergency regulations (found here: http://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Resources/opioids/AB474-Emergency-Regulations.pdf) will be effective for 120 days, starting on Friday, January 19, 2018.

How can I provide input on the permanent regulations?
There are many opportunities to provide feedback on the permanent regulations.
• Small businesses can reply through January 24, 2018 to the small business impact survey on the DPBH website found here: http://dpbh.nv.gov/Resources/opioids/AB474-Regulations/.
• Any member of the public can provide feedback on the regulations at the public workshops planned for mid-February. These meetings will be posted on the DPBH website as well as the Nevada Public Notice Website found here: https://notice.nv.gov/.
• If you are unable to provide feedback in these mechanisms, you can provide written comments to Julia Peek, Deputy Administrator, Community Services at jpeek@health.nv.gov.

If multiple providers of healthcare treated the same patient during the overdose, are all of them required to report?
It is the intention of the law to receive one overdose report per patient. As noted in Section 3 of the emergency regulations, a medical facility in which more than one provider of healthcare may know of, or provide services to, a person who has or is suspected of having suffered a drug overdose shall establish administrative procedures to ensure that the health authority or Chief Medical Officer or his or her designee, as applicable, is notified. The facility should note in the procedure which provider of healthcare is required to report on behalf of that patient interaction.

Can a healthcare facility report on behalf of their providers of healthcare?
Yes, a weekly batched electronic report from the facility is the preferred method of reporting. If you are interested in establishing electronic reporting, please contact Julia Peek at jpeek@health.nv.gov.