



**OPIOID**  
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# A Guide to Safer Prescribing



# Nevada's Prescribing Law

The Nevada law, A474, effective Jan 1., 2018 is detailed and extensive in regulating the prescribing of opioids; Below are the most relevant sections, but it is worth taking a look at the whole thing: <https://archive.leg.state.nv.us/Session/79th2017/Bills/AB/AB474.pdf>

Sec. 53. 1. Before issuing an initial prescription for a 26 controlled substance listed in schedule II, III or IV for the 27 treatment of pain, a practitioner must: 28 (a) Have established a bona fide relationship, as described in 29 subsection 4 of NRS 639.235, with the patient; 30 (b) Perform an evaluation and risk assessment of the patient 31 that meets the requirements of subsection 1 of section 54 of this 32 act; 33 (c) Establish a preliminary diagnosis of the patient and a 34 treatment plan tailored toward treating the pain of the patient and 35 the cause of that pain; 36 (d) Document in the medical record of the patient the reasons 37 for prescribing the controlled substance instead of an alternative 38 treatment that does not require the use of a controlled substance; 39 and 40 (e) **Obtain informed written consent to the use of the 41 controlled substance that meets the requirements of subsection 2 42 of section 54 of this act from: 43 (1) The patient, if the patient is 18 years of age or older or 44 legally emancipated and competent to give such consent; (2) The parent or guardian of a patient who is less than 18 2 years of age and not legally emancipated; or 3 (3) The legal guardian of a patient of any age who has been 4 adjudicated mentally incompetent.**

**The informed written consent obtained pursuant to 28 paragraph (e) of subsection 1 of section 53 of this act must 29 include,** without limitation, information concerning: 30 (a) The potential risks and benefits of treatment using the 31 controlled substance, including if a form of the controlled 32 substance that is designed to deter abuse is available, the risks and 33 benefits of using that form; 34 (b) Proper use of the controlled substance; 35 (c) Any alternative means of treating the symptoms of the 36 patient and the cause of such symptoms; 37 (d) The important provisions of the treatment plan established 38 for the patient pursuant to paragraph (c) of subsection 1 of section 39 53 of this act in a clear and simple manner; 40 (e) The risks of dependency, addiction and overdose during 41 treatment using the controlled substance; 42 (f) Methods to safely store and legally dispose of the controlled 43 substance; 44 (g) The manner in which the practitioner will address requests 45 for refills of the prescription, including, without limitation, an explanation of the provisions of section 55 of this act, if 2 applicable; 3 (h) If the patient is a woman between 15 and 45 years of age, 4 the risk to a fetus of chronic exposure to controlled substances 5 during pregnancy, including, without limitation, the risks of fetal 6 dependency on the controlled substance and neonatal abstinence 7 syndrome; 8 (i) If the controlled substance is an opioid, the availability of 9 an opioid antagonist, as defined in NRS 453C.040, without a 10 prescription; and 11 (j) If the patient is an unemancipated minor, the risks that the 12 minor will abuse or misuse the controlled substance or divert the 13 controlled substance for use by another person and ways to detect 14 such abuse, misuse or diversion.