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The meeting was called to order at 10:02 am on Tuesday, January 30, 1979 with Senator Keith Ashworth in the Chair.

PRESENT: Chairman Keith Ashworth
Vice-Chairman Joe Neal
Senator Rick Blakemore
Senator Clifton Young
Senator Wilbur Faiss
Senator Jim Kosinski

GUESTS: Senator Mel Close
Mr. Fred L. Hillerby, Executive Director, Nevada
Hospital Association

Chairman Ashworth opened the meeting with a discussion of S.B. 70 and it was the opinion of the committee that the bill did not belong in the committee on Human Resources and Facilities.

Senator Young moved that S.B. 70 be re-referred to the Committee on Taxation.

Senator Kosinski seconded the motion.

The motion carried.

Chairman Ashworth opened the hearing on S.B. 5.

Senator Mel Close began the testimony on S.B. 5 and stated it was the work of the Uniform Law Commission and has been recommended for adoption nationwide. The bill covers a serious problem faced throughout the nation; that is, when does a person actually die. The bill provides that a person actually dies when the brain ceases to function regardless of life support systems. Doctors and hospitals have difficulty now because they may become involved in litigation should they choose to withdraw life-support systems. Senator Close had spoken with Dr. Hammargren, Secretary of the Neurological Associates of Nevada, who was unable to testify today because of being in surgery, and Dr. Hammargren and his associates informed him that they support the bill unanimously and wished the committee to be aware.

Senator Young asked how many states have adopted the bill and Senator Close said that several have but could not give an exact number.

Senator Young questioned if it was difficult to tell when the cessation of life occurred. Senator Close said that he did not believe so and referred to the device that registers brain activity. Senator Young asked if one could tell when cessation is irreversible and Senator Close said he understood that once the brainwave goes flat on the scanning device, so far as they know, it is irreversible.

Senator Kosinski asked if Senator Close knew if the medical community felt comfortable with this type of legislation in the states in which it has been passed. Senator Close said he could not say as far as the other states are concerned but the Nevada groups concerned in this area have been trying to draft legislation until they found the Uniform Law Commission had drafted acceptable legislation. Senator Kosinski questioned whether based on the terminology, "reasonable medical standard," physicians might still be somewhat reluctant to "pull the plug." He asked Senator Close if he felt his doctor contact would be willing to come and testify and Senator Close felt he would.

Senator Faiss asked if a single doctor or a group of doctors make the determination to take a person off of life-support systems. Senator Close felt that it would depend upon the circumstances once there is a lack of brain activity. Senator Faiss said he felt it might be a good idea to have more than one doctor make the determination. Senator Close felt that doctors are very careful due to the legal ramifications.

Senator Neal asked Senator Close if he was familiar with the Karen Quinlan case. Senator Close said that she had brain activity so this bill would not pertain to cases such as that. Senator Neal also asked what the origin of the bill was and Senator Close said that the Uniform Law Commission chooses areas to study of nationwide concern. This particular bill has been the object of study for approximately six years.

Senator Neal expressed concern about the individual who has been declared dead in the ambulance but somehow regains consciousness. Senator Close said that sophisticated equipment would be needed to make the determination that the brain had ceased to function and that equipment would not be available on ambulances or in circumstances where there was no sophisticated equipment. Senator Neal stated that he felt this bill had more of an urban application.

Chairman Ashworth said that his main area of concern is when an individual has been declared dead but still has other vital signs, when would one make out the death certificate. Senator Close said that if this circumstance occurs and there are vital signs, it is only because of artificial devices. It is his understanding that when a person's brain is in fact dead, the other parts of the body are not operating.

Senator Young asked if it would be a matter of locality rule in the matter of "reasonable medical standards" or would it be national. Senator Close felt it would be a matter of locality rule.

Senator Young asked what would happen if a person's last will and testament directed he be kept under artificial stimulus as long as could conceivably be done. Senator Close felt that would last as long as the money lasted.

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Fred Hillerby testified that he had checked with the hospital staffs to see if there was any problem with the bill and there was none. Their medical staffs feel that if an electroencephalogram indicates a flat response, they are comfortable they are not prematurely removing life-support equipment. Senator Kosinski asked if this sophisticated equipment would only be available in urban areas and Mr. Hillerby felt it would be available in most hospitals. Mr. Hillerby felt that there would not be a problem between urban and rural because a person can be declared dead without using an electroencephalogram because they are not being maintained by equipment.

Senator Kosinski asked if to Mr. Hillerby's knowledge, there have been cases in Nevada where this bill would have been applicable. Mr. Hillerby said he knew of none.

There being no further testimony, Chairman Ashworth closed the hearing on S.B. 5.

Chairman Ashworth presented BDR 40-146* given him by Senator Kosinski which exempts certain premises from requirements applicable to food establishments.

Senator Young moved to introduce
BDR 40-146 as a Committee Introduction.

Senator Faiss seconded the motion.

The motion carried.

Chairman Ashworth presented BDR 54-530** which permits registered nurses to perform additional functions under certain circumstances presented by Senator Glaser.

Senator Young moved to introduce
BDR 54-530 as a Committee Introduction.

Senator Blakemore seconded the motion.

The motion carried.

Senator Blakemore presented BDR 40-150⁺ which changes certain requirements respective to licenses in construction applications of health facilities' agencies.

Senator Young moved to introduce
BDR 40-150 as a Committee Introduction.

Senator Blakemore seconded the motion.

The motion carried.

*SB 148 + SB 146
**SB 145

Chairman Ashworth presented BDR 33-469* which provides for a state register of historic places.

Senator Neal moved to introduce
BDR 33-469 as a Committee Introduction.

Senator Young seconded the motion.

The motion carried.

After some discussion, the committee decided to hold any action on S.B. 5 until further testimony from the medical community.

Chairman Ashworth stated he had received the amendments to S.B. 24. He asked Senator Kosinski why it was necessary for S.B. 24 to be effective upon passage and approval. Senator Kosinski said there has been some discussion of evaluation of the rural clinics program prior to adoption of the budget. In the event this bill is passed, there will be an evaluation of the program. Chairman Ashworth asked the committee to bear in mind the testimony and the objection of the Nevada Nurses' Association.


Senator Young moved to Amend and Do Pass
S.B. 24.

Senator Kosinski seconded the motion.

The motion carried unanimously.

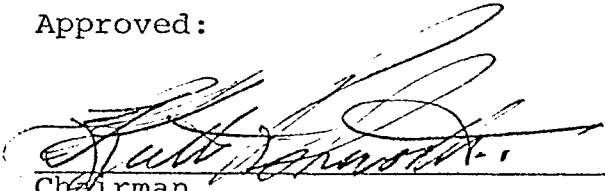
There being no further business, Chairman Ashworth adjourned the meeting at 10:41 am.

Respectfully submitted,



Roni Ronemus
Committee Secretary

Approved:



Chairman
Senator Keith Ashworth

*SB 147