

# Nevada State Board of Medical Examiners

## Notification of Emergency License During Declaration of Emergency Directive 011

On April 1, 2020, Governor Sisolak issued Emergency Directive 011 to temporarily waive licensing requirements for the following: physicians, physician assistants, respiratory care practitioners and perfusionists. The waiver applies to qualified providers who currently hold a valid license in good standing in another state. Ineligible providers include those whose licenses have been revoked or voluntarily surrendered as a result of disciplinary proceedings. All individuals working under this directive must complete this form and return it to the Nevada State Board of Medical Examiners. You are not required to obtain approval from the Nevada State Board of Medical Examiners; once you have submitted this form, you are immediately eligible to begin working under the directive.

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

I am a:  Medical Doctor  Physician Assistant  Perfusionist  Practitioner of Respiratory Care

Please list your license(s) in all jurisdictions. You may attach a separate page if necessary:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I attest that all current, expired, inactive or retired licenses are not revoked or voluntarily surrendered as a result of disciplinary proceedings.

I attest that all current, expired, inactive or retired licenses are in good standing (you are still in good standing if your license was suspended for non-payment of fees or continuing education).

Signature: \_\_\_\_\_

(We will accept an electronic signature.)

Date: \_\_\_\_\_

You may fax the completed form to 775-688-2551, email to [nsbme@medboard.nv.gov](mailto:nsbme@medboard.nv.gov), or mail to 9600 Gateway Drive, Reno, NV 89521.