

ALASKA LEGISLATURE COMMITTEE FILES

2007-2008

SHES

124



**Degrees in Naturopathic Medicine
Frequently Asked Questions**

Frequently asked questions

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1. Can you compare the colleges? Which one is best?

We treat as confidential the information we receive from naturopathic medicine programs. All accredited programs have our recommendation, but we do not rank them. Each naturopathic college has unique qualities. We encourage prospective students to visit the campuses and to participate in the schools' student-for-a-day programs.

2. Does CNME recognize home-study schools or external-degree programs?

Many correspondence schools offer N.D. or N.M.D. degrees or diplomas. Some are exempt from state regulations because they claim a religious purpose or they do not recruit students from their home states. Correspondence programs do not prepare students for practice as state or provincial licensed naturopathic physicians, and the programs are not eligible for affiliation with our agency. In states and provinces without licensing laws, it is generally not illegal for those who obtain N.D. or N.M.D. degrees from correspondence schools to use the initials after their names; they may not, however, legally represent themselves as physicians or engage in the practice of medicine unless they are otherwise licensed as medical practitioners. Although correspondence courses can be effective in many disciplines, naturopathic licensing agencies do not believe they are adequate for preparing students to practice as licensed physicians. The American Association of Naturopathic Physicians and the Canadian Association of Naturopathic Doctors do not consider those who obtain N.D. or N.M.D. degrees from correspondence schools to be part of the naturopathic medical profession.

3. Is there a difference between the N.D. and the N.M.D. degree?

Universities and colleges may choose to call the naturopathic degree they confer either the "Doctor of Naturopathy" or the "Doctor of Naturopathic Medicine" degree. These are two different names for the same degree. By either name, the degree is

usually abbreviated "N.D.," but an institution that refers to its naturopathic credential as the "Doctor of Naturopathic Medicine" degree may abbreviate it either "N.D." or "N.M.D." Presently, all colleges and universities with accredited or candidate naturopathic medicine programs confer the Doctor of Naturopathic Medicine degree or, in Canada, the Doctor of Naturopathic Medicine diploma. In all states and provinces that regulate naturopathic medicine, except Arizona, naturopathic physicians use the N.D. initials after their names. In Arizona, they may use either the N.D. or N.M.D. initials; the different sets of initials do not indicate a difference in scope of practice, but only a preference by the individual physicians. The N.D. initials are the ones more widely associated with the naturopathic medical profession and are the only ones used in the corporate seals of both the American Association of Naturopathic Physicians and the Canadian Association of Naturopathic Doctors.

4. **What does "candidate for accreditation" mean?**
Candidacy is a status of affiliation with us that indicates a naturopathic medicine program satisfies our agency's 17 eligibility requirements – e.g., that it is properly organized, is adequately supported financially, has good facilities and a qualified faculty, offers an appropriate curriculum, and accurately represents itself to prospective students. Candidacy, however, is not accreditation and does not ensure eventual accreditation. We grant candidacy when a program meets our eligibility requirements, complies with our standards to the degree expected for its stage of development, and is progressing toward accreditation. If it does not achieve accreditation within five years, the program loses affiliation with us for at least one year and until deficiencies are corrected. A new program may apply for candidacy at any time, but CNME will not grant candidacy until after at least its first academic year with students enrolled full time. A naturopathic medicine program may not be accredited until it has graduated its first class. Students and graduates of candidate programs are eligible to apply for the Naturopathic Physicians Licensing Examinations, administered by the North American Board of Naturopathic Examiners.
5. **What criteria does CNME use in evaluating naturopathic medicine programs?**
The evaluation process involves a comprehensive self-study by the program, periodic visits to the campus by CNME teams, and ongoing monitoring. Evaluation teams have three or more trained members, with at least one a practicing naturopathic

physician, another a member of the Council, and another not affiliated with the naturopathic profession, its colleges, or CNME. Our *Handbook of Accreditation for Naturopathic Medicine Programs* contains our objectives, eligibility requirements, standards, policies, procedures, Articles of Incorporation, and Bylaws. The handbook may be ordered for \$20 (U.S.), prepaid:

Council on Naturopathic Medical
Education
P.O. Box 178
Great Barrington, MA 01230

Or, download a free PDF version of the handbook. The PDF file (81 pages, 800KB) may be opened and printed with Adobe Acrobat Reader, a free download.

6. Where may N.D.s practice?

Fourteen states and four provinces allow the practice of naturopathic medicine: Alaska, Arizona, British Columbia, California, Connecticut, Hawaii, Idaho, Kansas, Maine, Manitoba, Montana, New Hampshire, Ontario, Oregon, Saskatchewan, Utah, Vermont, and Washington. Washington, D.C., Puerto Rico and the U.S. Virgin Islands also have licensing laws for naturopathic doctors. In a number of states and provinces where there is not yet professional licensure, naturopathic medical associations are actively engaged in legislative initiatives to pass licensing laws. The scope of practice varies from state to state and province to province. In states and provinces without naturopathic licensing laws, many who hold the N.D. degree also hold other degrees, such as the Doctor of Medicine, Doctor of Chiropractic, or Masters in Oriental Medicine degree, and they practice under licenses for those professions. Others offer services that do not violate their states' medical practice acts. Most naturopathic physicians are in the states and provinces that regulate the profession.

7. How is CNME organized?

CNME was incorporated in August 1978 under the District of Columbia Nonprofit Corporation Act and is recognized by the U.S. Internal Revenue Service as a 501(c)(3) nonprofit organization. The Agency is run by a Board of Directors that works in partnership with the agency's Executive Director. Presently, two of CNME's eleven board members are public members; a public member is not affiliated in any way with the naturopathic profession. The board has three positions for institutional member representatives, who are elected rotationally for

three-year terms from among administrators and faculty members at the four accredited naturopathic medicine programs. Our Articles of Incorporation also require from four to six profession members, who must be licensed naturopathic physicians. Five profession members currently serve on the board.

8. How does someone start a new naturopathic college?

Establishing a new naturopathic program within an existing college or university is preferable to beginning a freestanding naturopathic medical college, unless the organizing group has the necessary assets and extensive experience in higher education administration. CNME can refer organizations with the potential for developing a new program to consultants. Any new program, to qualify for accreditation, would likely need to be in a state or province that licenses naturopathic physicians, because students do their clinical training primarily under practicing naturopathic physicians. Additionally, state authorities might not approve a college's request to grant the N.D. degree in a state that does not allow the practice of naturopathic medicine.

9. May I be licensed in the United States or Canada if I attend an overseas naturopathic college?

Because no international standards for naturopathic education exist other than those for the U.S. and Canada, students who graduate from naturopathic colleges in other countries are not eligible to apply for the Naturopathic Physicians Licensing Examinations. The exams are administered twice a year at the state and provincial level by the North American Board of Naturopathic Examiners, Portland, Oregon (www.nabne.org). Students who attend an overseas school may have some course credits accepted for transfer to a U.S. or Canadian school if the foreign school is a graduate-level institution and governmentally recognized. If you plan to spend the first year or two of naturopathic studies at a foreign school, you should first check with one of the U.S. or Canadian naturopathic colleges to learn if any credits may be transferred later.

10. May I be licensed in the United States if I attend naturopathic college in Canada, and vice versa?

If you graduate from a CNME-recognized naturopathic program in the U.S., you may apply for a license in the four Canadian provinces that regulate naturopathic medicine. If you graduate from a

CNME-recognized college in Canada, some states will accept your licensing application, but several will not. This is because private colleges in Canada do not confer degrees but "diplomas," e.g., the Doctor of Naturopathic Medicine diploma. Some state laws have language that specifically requires an N.D. "degree." U.S. students who plan to attend naturopathic college in Canada should first check with the naturopathic licensing agencies in the states where they plan to practice to make sure they can apply for a license with a Canadian diploma. See question 6 above for the names of the states and two U.S. territories that license naturopathic doctors. For information on contacting the naturopathic licensing agency in one of these states or territories, please refer to naturopathic.org for contact information.

11. What is the difference between CNME and the other organizations that accredit naturopathic programs?

CNME is the organization that accredits programs which prepare students to become licensed naturopathic physicians. It is the accrediting agency accepted by the U.S. and Canadian professional associations for licensed naturopathic doctors, and it is the agency recognized by the North American Board of Naturopathic Examiners. CNME is also the only naturopathic accreditor with membership in the Association of Specialized and Professional Accreditors. This organization accepts as members those accreditors recognized by the Secretary of Education or that meet ASPA's own criteria. Among the almost 50 agencies that belong to ASPA are the recognized accreditors for allopathic (M.D.), osteopathic (D.O.), chiropractic (D.C.), acupuncture, and dental programs. Other naturopathic accrediting agencies accredit correspondence and other schools that do not prepare students to practice as licensed naturopathic physicians. None is recognized by the Secretary of Education, and none of the schools or programs they accredit has institutional accreditation from a recognized regional accrediting agency. Comparing the published standards, policies, procedures, and bylaws of accrediting agencies is one way to determine their differences. For CNME, these documents are in its Handbook. Please see question 5 above for information on obtaining the Handbook.

12. What does "recognition by the U.S. Secretary of Education" mean?

Accrediting agencies with the Secretary of Education's recognition have been found in

compliance with the federal regulations that apply to accrediting agencies. The recognition means the schools or specialized educational programs that the accreditor accredits are eligible to seek participation in programs sponsored by federal agencies. Students and graduates of U.S. naturopathic medicine programs with CNME accreditation are eligible to apply for such federal programs as the Academic Research Enhancement Awards and the Loan Repayment Program administered by the National Institutes of Health's National Center for Complementary and Alternative Medicine.

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Last updated December, 2007

Textbook of Natural Medicine

Arnold S. Relman, M.D.

January 9, 2001

This two-volume textbook, published in a second edition in 1999, is edited by two naturopaths -- one the president, and the other a member of the faculty of Bastyr University, which is the leading school of naturopathic medicine in the country. The textbook has over 1,600 pages and 57 contributors (most of whom practice and/or teach naturopathic medicine), and it purports to provide "well-documented standards of practice for natural medicine." I therefore take it to be an up-to-date summary of what is taught about the practice of naturopathic medicine and how its practitioners are expected to provide care for the patients who consult them.

Among the criteria we have adopted for deciding whether a complementary and alternative ("CAM") practice should be licensed by the State are: (a) evidence that the practice "confers measurable benefits" to those who use it (Criterion #2), and (b) evidence that the use of "some or all of the modalities within a practice that fall within the accepted standards of the practice may result in direct patient harm" (Criterion #5). A close reading of this textbook should provide some answers to these crucial questions about the potential benefit and harm of naturopathic practices as currently taught.

I borrowed a copy of the Textbook of Natural Medicine (the "Textbook") and studied it carefully over a period of several days in an attempt to answer these questions. My conclusion is that the licensing of naturopathic medical practitioners as independent providers of primary health care would endanger the health and safety of the public and would not result in health benefits commensurate with its risks. There is abundant evidence in the Textbook to support this conclusion, but I summarize below only a few of the most problematic examples of the deficiencies and dangers in naturopathic practices.

1) The textbook describes the diagnosis and treatment of only 70 "specific health problems," and they are simply listed in alphabetical order, without regard to the nature of the condition or the organ(s) involved. In comparison, standard textbooks of conventional medicine provide a much more rational and systematic presentation that includes hundreds of disease conditions and describes them in much greater depth and detail. The Textbook includes in its 70 chapters on specific diseases nothing about cancer, diseases of the blood (including leukemias and anemias), nothing about heart attacks or serious abnormal rhythms of the heart (such as atrial fibrillation), and virtually nothing about kidney diseases, chronic obstructive pulmonary disease, cirrhosis of the liver, or about many common and serious infections such as pulmonary tuberculosis, malaria, syphilis, meningitis, encephalitis or bacterial endocarditis. Lacking adequate education about these diseases, naturopathic practitioners might fail to diagnose them in a timely fashion or delay in referring patients for appropriate medical treatment,

2) Many of the treatments recommended in the Textbook for the 70 diseases are not *likely* to be effective, and treatments proven to be effective are often totally ignored. This could endanger the health and safety of patients *with* serious diseases who relied solely on care from a naturopathic practitioner. As explained in the Textbook, naturopathy objects to the use of pharmaceutical agents and depends instead on the use of herbal or "natural" remedies of unproven value. Here are some examples of common, serious diseases that are dangerously mistreated in the naturopathic Textbook:

A) The chapter on the treatment of anginal (coronary artery) heart disease does not even mention the use of nitrates, beta-blockers or calcium-channel blockers -- all of which are

standard, effective, FDA-approved treatment for this condition. Failure to use one or more of these agents in the treatment of severe angina would probably be considered medical malpractice. There is no mention of "statin" drugs to lower cholesterol and prevent further progression of coronary heart disease. The use of angioplasty or bypass surgery for patients unresponsive to pharmacologic therapy is dismissed. "Chelation" -- a totally irrational and unproven form of treatment -- is discussed favorably. However, at the end of this chapter, it is stated that "patients with unstable angina pectoris . . . should be hospitalized", thus tacitly admitting that naturopathic methods may be ineffective and that serious cases may require medical or surgical treatment found only in hospitals.

B) The chapter on congestive heart failure recommends unproven nutritional supplements, but says nothing about the standard (and usually effective) treatment with diuretics and ACE-inhibitors, which have been shown to give comfort to, and prolong, the lives of these patients. It does, however, admit that "In later stages, adjunct (prescription) drug therapy is Usually necessary", but gives no details,

C) The chapter on high blood pressure says nothing about the diagnostic work up that is often needed to rule out certain curable causes (such as certain diseases of the adrenal gland, or obstruction in the aorta or the renal arteries). It recommends diet lifestyle changes and the use of herbs but admits that severe cases unresponsive to these "natural" measures may require treatment with pharmaceuticals (presumably under the management of a conventional medical doctor). However, it ends with the dangerous advice that once control of high blood pressure has been achieved with drugs, the naturopathic physician should have the patient "taper off" the medications. For some such patients, a reduction in medication risks sudden resurgence of severe hypertension and the possibility of a stroke or heart attack. Most patients with severe hypertension need to remain on medication indefinitely, or for many years.

D) The chapter on diabetes says very little about the use of insulin, nothing about oral hypoglycemic drugs, and nothing about the diagnosis, prevention or treatment of diabetic acidosis-- except to warn that it is a medical emergency that will require hospitalization,

E) The chapter on epilepsy says nothing about the use of anti-epileptic drugs, without which many cases simply could not be adequately controlled. Uncontrolled epilepsy is dangerous.

F) The chapter on HIV infection and AIDS advocates various types of herbal and "natural" remedies but gives no information about conventional drug therapy. Although it is admitted that no clinical studies have yet demonstrated the effectiveness of naturopathic medical care in HIV infection when used alone, or even as a supplement to conventional medical treatment, the chapter nevertheless ends with this advice: "We urge physicians to apply the principles of naturopathic medicine in the care of their HIV positive patients." As if this neglect of the proven life-prolonging value of anti-viral pharmacotherapy were not shocking enough, the chapter also fails to recommend drug treatment of pregnant women with HIV infections, which is standard practice for the prevention of HIV transmission to the newborn. Neglect of such treatment would surely be considered malpractice in the medical profession.

G) The chapter on the treatment of asthma is also seriously deficient because it says nothing about the use of bronchodilator drugs, or drugs that block the allergic response in the lining of the respiratory passages, or about the short-term use of adrenal steroids for emergency cases. These are all well-established treatments for asthma; and it is difficult to imagine

how serious cases could be managed without them. However, the Textbook advises naturopathic physicians to refer patients with acute asthmatic attacks to a hospital emergency room. This acknowledging that naturopathic remedies may not work and that seriously ill patients will need treatment by conventional medical methods. But this advice is also deficient in that it fails to mention that appropriate medical treatment could prevent the onset of attacks that require emergency care.

3) As already noted, naturopathic teaching (as exemplified in the Textbook) claims that "natural" herbal remedies are generally superior to pharmaceuticals in the treatment of most diseases -- despite the fact that the FDA forbids the manufacturers of herbal preparations and dietary supplements from making therapeutic claims. The textbook nevertheless devotes a large section to herbs and dietary supplements in which many such claims are made, often with little or no credible supporting evidence in the peer-reviewed scientific literature. At the same time, the Textbook omits entirely (or mentions only in passing) the use of many standard, proven pharmaceuticals that modern medicine has found useful or even essential in the treatment of serious diseases. For example:

- Antibiotics are given only cursory consideration and often mentioned only as a last resort.
- Nothing is said about the antibiotic treatment of syphilis tuberculosis or meningitis.
- Chemotherapeutic agents for cancer are dismissed despite the fact that they are known to be effective in certain types of tumors and in leukemias.
- There is no mention of the use of anticoagulants (blood-thinners) in the treatment of blood clots or their use to prevent embolic strokes in patients with atrial fibrillation. (These diseases are not even mentioned.)
- There is no mention of diuretic drugs that are sometimes absolutely essential in the treatment of edema due to heart failure or kidney disease.

Perhaps most disturbing of all, there is no mention of opioid drugs in the treatment of intractable pain. Morphine and its derivatives are often essential for the relief of patients in the terminal stages of cancer. It is almost incomprehensible that nowhere in the numerous discussions of the management of pain by a great variety of "natural" methods is there a reference to the use of morphine or other analgesic drugs. Obviously, as any experienced physician knows, there are alternatives to drugs that may help -- particularly when pain is mild, moderate or only intermittent. But in advanced cancer, morphine is often the only way to afford relief, and it seems remarkable that the Textbook should omit such an essential form of treatment.

Primary care practitioners whose education does not include the use of prescription drugs simply cannot be expected to provide effective and safe care for many serious conditions they are likely to encounter. While it is true that unnecessary or inappropriate use of drugs is harmful, and that even proper usage of drugs can sometimes cause serious reactions, there can be no doubt that on balance prescription drugs have been enormously beneficial, and that drugs will be even more important in the future. The anti-pharmaceutical bias of naturopathic education (as illustrated in the Textbook) therefore poses real risks for patients who rely on naturopaths for the management of their illnesses. Without prompt and appropriate drug therapy many patients with serious diseases will die.

I recognize that there are probably large variations in philosophy and medical education among naturopathic practitioners. Some may practice more prudently than others and may use conventional medical treatments more frequently and work more closely with conventional medical practitioners. But we should make public policy decisions based on the standards of practice that are being taught, not on our opinions about individual practitioners. Judging by the standards of practice presented in the Textbook, it seems clear that the risks to many sick patients seeking care from the average naturopathic practitioner would far outweigh any possible benefits.

Dr. Relman is Emeritus Professor of Medicine and of Social Medicine, Harvard Medical School; Editor-in-Chief Emeritus of *The New England Journal of Medicine*; and a member of the Massachusetts Board of Registration in Medicine (BORM). He prepared this report while serving as BORM's representative to the Special Legislative Commission on Complementary and Alternative Medical Practitioners, an ad hoc group formed to provide advice to the Massachusetts legislature.

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This article was revised on April 10, 2002.

Bureau of Naturopathic Medicine

A Bureau of the California Department of Consumer Affairs



Findings and Recommendations Regarding the Prescribing and Furnishing Authority of a Naturopathic Doctor

**Tonya Blood, Chief
Bureau of Naturopathic Medicine**

**Presented to the California State Legislature
January 2007**

APPENDIX*

Meeting Agendas

Curriculum at Approved Schools

Other States' Laws

Hierarchy of Healing

Letter from Northwest Jury Verdicts

Letter from NCMIC

* For copies of items listed in the appendix, please contact the Bureau of Naturopathic Medicine at (916) 574-7991 or naturopathic@dca.ca.gov

The Bureau, along with the Committee, would like to also extend gratitude to special consultants, Dr. Virginia Osborne, National College of Naturopathic Medicine, Dr. Craig Runbeck, Executive Director, Arizona Naturopathic Physician Board of Medical Examiners, and Professor Debra Woliner, Southwest College of Naturopathic Medicine, for their invaluable assistance and expertise.

I am very pleased to have served as the Bureau Chief during the development of this report and to be able to present this report with the unanimous findings and recommendations of this Committee. Without their extensive knowledge, experience, and commitment to the field of naturopathic medicine, these reports would not have been possible.

Sincerely,

Tonya Blood, Chief
Bureau of Naturopathic Medicine

Naturopathic Formulary Advisory Committee

The Naturopathic Formulary Advisory Committee (the Committee) was appointed by Charlene Zettel, Director of the Department of Consumers Affairs. The Committee is chaired by Dr. Peter Wannigman, a pharmacist and ND, and is vice-chaired by Dr. Soram Singh Khalsa, a medical doctor. The Committee consists of three pharmacists, three medical doctors, and three NDs. The committee first met on June 26, 2005, and has met every 4-6 weeks for over a year to determine the recommendations included in this report. Biographies of the committee members are contained in the Appendix.

Brief History of Naturopathic Medicine

Naturopathic medicine is one of the oldest continuously licensed health care professions in the country. Its roots lie in German traditions of "Water Cure" or hydrotherapy advocated by Sebastian Kneipp in the mid-19th century. Dr. Benedict Lust, considered to be the Father of Naturopathic Medicine, expanded upon the European water cure and herbal therapies to develop a comprehensive philosophy and system of health which he brought to the United States around the turn of the century.

In 1901, Dr. Lust opened the American School of Naturopathy in Manhattan. Its approach emphasized diet, exercise, physical medicine, herbs, and homeopathy as ways to improve and maintain good health. Naturopathic medicine grew quickly as a profession and by 1925 there were approximately 2,500 practicing naturopathic doctors and more than a dozen schools. During this period, regulations were enacted in many states, with about half of the states licensing or regulating naturopathic medicine. This rise in popularity created strong opposition from allopathic medicine, which labeled naturopathic medicine as "quackery."

Naturopathic medicine experienced a significant decline in popularity from the post World War II era until the 1970s as most health care at that time centered on the allopathic medical model and the increased use and development of drugs and antibiotics. In the 1970s, with increased interest in holistic and alternative health care, naturopathic medicine experienced a resurgence of interest with expanded educational programs and state licensure. In the past 30 years, naturopathic medicine has experienced dramatic growth with new schools being established, standardization of education and accreditation, and expanded research on safety and efficacy of naturopathic practices.

In 2003, California became the 13th state to recognize naturopathic medicine and provide licensure to naturopathic doctors.

➤ **Treat the Whole Person:**

Naturopathic doctors attempt to take into consideration all the factors that make up patients' lives and affect their health and well-being.

➤ **Prevention:**

Naturopathic medicine emphasizes the prevention of disease, assesses risk factors, and makes appropriate interventions with patients to prevent illness.

Most naturopathic doctors provide primary care natural medicine through office-based, private practice. In states where NDs have been licensed for many years, they often work in collaboration with medical doctors, and routinely refer patients to each other for optimum management of a patient's healthcare.

Bureau Information

The Act, which created the Bureau, was effective January 1, 2004. Before the Bureau could issue any licenses, a Bureau Chief and staff were hired. Equipment was purchased to support the Bureau's activities. Emergency regulations were drafted to implement the Act. An application process was developed, files were set up, application forms and a website were created. The first ND license was issued on January 14, 2005. There are currently 211 newly licensed NDs in California.

The Bureau is staffed by one full-time analyst. The analyst is responsible for all activities of the Bureau, including answering phones, analyzing qualifications for licensure, issuing licenses, responding to correspondence, coordinating legislative, regulatory, and budgetary activities, preparing reports, and administering all disciplinary and enforcement activities. The Bureau is completely funded by application and licensing fees.

Requirements for Licensure

In order to be licensed as an ND in California, the Act and the California Code of Regulations require an applicant to:

- Have obtained a degree in naturopathic medicine from an approved naturopathic medical school. (Section 3630)
- Pass Parts I and II of the Naturopathic Physicians Licensing Examination [An applicant who graduated prior to 1986 must have passed a state or Canadian provincial exam.] (Section 3631)
- Submit fingerprints, and not have been convicted of any crime that would be grounds to deny licensure. (Sections 144, 480, 3630)
- Request verification of good standing for any other licenses held in California or another state be submitted directly to the Bureau from the licensing entity. (Section 3633)

Council on Naturopathic Medical Education, or an equivalent federally recognized accrediting body for naturopathic doctor education.

- To qualify as an approved naturopathic medical school, a naturopathic medical program located in Canada or the United States shall offer a full-time, doctoral-level, naturopathic medical education program with its graduates being eligible to apply to the Bureau for licensure and to the North American Board of Naturopathic Examiners that administers the naturopathic licensing examination.

Approved Schools

To be eligible for licensure in California, an applicant must have graduated from one of six approved naturopathic medical schools. Each of these schools has met the requirements listed above for accreditation by CNME. Four of the approved schools are located within the United States and two are in Canada. A brief synopsis of the schools is given below. As can be seen below, the number of pharmacology hours required for graduation at the approved schools varies from 42 to 110. More detailed information on each of the schools, including admission requirements and curriculum may be found in the Appendix.

School	Year Established	Class Size*	Pharmacology Hours Required for Graduation
National College of Naturopathic Medicine Portland, Oregon	1956	81	72 hours
Bastyr University Seattle, Washington	1977	260	55 hours
Southwest College of Naturopathic Medicine and Health Sciences Scottsdale, Arizona	1993	65	110 hours
University of Bridgeport College of Naturopathic Medicine Bridgeport, Connecticut	1996	19	44 hours
Canadian Naturopathic Medical College Toronto, Ontario, Canada	1978	135	110 hours
Boucher Institute of Naturopathic Medicine New Westminster, British Columbia, Canada	2001	16	42 hours
* Number of graduates in 2006.			

exam format will consist of extensive clinical case summaries for which the candidate must answer a series of questions relevant to diagnosis and treatment for each case.

Part I of the examination is also being restructured and updated. The new integrated Part I of the examination will be administered to candidates beginning in 2008.

The Bureau must receive a report directly from NABNE with an applicant's passing scores on both Parts I and II of the NPLEX before a license will be issued.

The NPLEX is administered twice a year at six different test sites through the U.S. and Canada.

Continuing Education

In order to renew his or her license, an ND must satisfactorily complete 60 hours of approved continuing education biennially. (This requirement is waived for the first renewal.) The continuing education submitted must meet the following requirements (Section 3635):

- ***At least 20 hours shall be in pharmacotherapeutics.***
- No more than 15 hours may be in naturopathic medical journals or osteopathic or allopathic medical journals, or audio or videotaped presentations, slides, programmed instruction, or computer-assisted instruction or preceptorships.
- No more than 20 hours may be in any single topic.
- No more than 15 hours of the continuing education requirements for the specialty certificate in naturopathic childbirth attendance shall apply to the 60 hours of continuing education requirement.

The continuing education requirements may be met through continuing education courses approved by the California Naturopathic Doctors Association, the American Association of Naturopathic Physicians, the Medical Board of California, the California State Board of Pharmacy, the State Board of Chiropractic Examiners, or the Bureau.

Scope of Practice

The Act authorizes an ND to:

- Order and perform physical and laboratory examinations for diagnostic purposes, including, but not limited to, phlebotomy, clinical laboratory tests, speculum examinations, orificial examinations, and physiological function tests (Section 3640(a)).

- **Prescribe, dispense, or administer a controlled substance, except as authorized.**
- **Administer therapeutic ionizing radiation or radioactive substances.**
- **Practice or claim to practice any other system or method of treatment for which licensure is required, unless otherwise licensed to do so.**
- **Administer general or spinal anesthesia.**
- **Perform an abortion.**
- **Perform any surgical procedure.**
- **Perform acupuncture or traditional Chinese and Asian medicine, including Chinese herbal medicine, unless also licensed in California as an acupuncturist.**

pharmacotherapeutics are able to prescribe drugs and controlled substances. Southwest College in Tempe, Arizona has made this additional training part of their required curriculum for NDs.

Hawaii state law authorizes NDs to prescribe vitamins, minerals, amino acids, and fatty acids.

Idaho passed a bill in 2005 authorizing licensure of NDs. The bill creates a formulary council to establish a formulary for use by NDs that is consistent with the training and education of NDs. The formulary will be reviewed on an annual basis. To date, the formulary has not been completed.

Kansas passed an ND licensing law in 2003. It authorizes an intravenous and intramuscular formulary which must be under the supervision of a physician. Kansas is the only state, other than California, which requires continuous MD supervision for prescribing.

Maine NDs are allowed to independently prescribe noncontrolled legend drugs after completing a 12-month collaborative relationship with a licensed allopathic or osteopathic physician to review the NDs prescribing practices.

Montana law requires a five-member formulary committee to establish a natural substance formulary list and review the list on an annual basis. Among other items, the approved list of natural substances contains antibiotics and hormones.

Oregon NDs have wide prescribing authority. All substances on the formulary are recommended by the formulary council and approved by the State Board of Naturopathic Examiners.

Utah NDs are allowed to prescribe noncontrolled drugs that are consistent with competent practice of naturopathic medicine and are approved in collaboration with the Naturopathic Formulary Advisory Peer Committee.

Vermont law authorizes the Commissioner of Health to establish the formulary with the advice of advisory appointees. The formulary lists the substances that are authorized as well as their route of administration, and in some instances even the specific dose and length of treatment.

Washington state law was recently amended to allow NDs a broader formulary. HB 1546 of 2005 defined naturopathic medicines to mean "vitamins; minerals, botanical medicines; homeopathic medicines; hormones; and those legend drugs and controlled substances consistent with naturopathic medical practice in accordance with rules established by the secretary." An updated formulary has not yet been completed.

The AANP recommended that further work on practice principles move to the academic community. Throughout the 1990's clinical faculty and practitioners built on the core foundation throughout the 1990's. In 1997, "The Process of Healing, a Unifying Theory of Naturopathic Medicine" was published in the Journal of Naturopathic Medicine (Zeff). The article presented three principles underlying the practice of naturopathic medicine. The first of these is the characterization of disease as a *process* rather than a *pathologic entity*. The second is the focus on the determinants of health rather than on pathology. The third is the concept of a therapeutic hierarchy. As taught in naturopathic medical schools, the therapeutic hierarchy is a guideline to applying the modalities of naturopathic medicine according to unique needs of an individual patient.

1. Establish the conditions for health.
2. Stimulate the self-healing mechanisms (*Vis Medicatrix Naturae*).
3. Support weakened or damaged systems or organs.
4. Address structural integrity.
5. Address pathology using specific natural substances, modalities or interventions.
6. Address pathology using specific pharmacologic or synthetic substances.
7. Suppress pathology.

Here is an example of a child with Recurrent Otitis Media (ear infections), a common reason for seeking naturopathic care. Using the hierarchy above:

1. Look for and address obstacles to health - allergies, environmental irritants (e.g., 2nd hand cigarette smoke), diet high in simple sugars, etc.
2. Stimulate the healing power of nature with therapies like homeopathy and hydrotherapy.
3. Support affected systems such as immune support - Vitamins C and A, oligopolysaccharides; respiratory support with herbs like Hydrastis or Berberis.
4. Address structural factors with soft tissue manual therapy like lymphatic drainage.
5. Treat the pathology with specific natural therapies such as topical Garlic-Hypericum oil.
6. Typically children respond well experiencing fewer infections with faster recovery. Should a child experience a particularly severe ear infection, it may be necessary to prescribe a course of antibiotics.
7. If the infection does not subside, referral to a MD may be necessary.

Another scenario might involve a child who experiences significant relief and the parents bring the child in for a sore throat, that turns out to be Group A Strep. The safest, most effective, and most convenient treatment would be for the naturopathic doctor to prescribe a course of appropriate antibiotics.

However, in the interest of ensuring maximum public safety and taking the most conservative approach, the final position of the Committee was to recommend a limited inclusionary formulary. The inclusionary formulary included in the recommendation section of this report was drafted with the intention of allowing for the use of the most common medications necessary for safe and efficacious use in primary care medicine. An ND would still need to qualify and receive a furnishing number as outlined in regulation, and would additionally have to complete 20 hours of pharmacology for each license renewal. The Committee determined that the inclusionary formulary would be the most functional for both NDs and pharmacists.

Formulary Upkeep

As can be seen from the information given above, most states appoint an advisory committee that has the authorization to create and update the state's ND formulary. Currently a statutory change would be necessary to allow the Bureau or a Committee to determine and update the formulary. It would be much easier for the Bureau through the Committee or the Naturopathic Advisory Council to update the formulary through regulation rather than through a more lengthy statutory process. This would be true particularly in the case of a drug that is later discovered to be unsafe, or if a safer more effective drug becomes available. In order to protect consumers, an emergency regulation could be adopted which would remove the unsafe drug from the formulary. Intravenous formulary upkeep should also be done by the Bureau through the regulatory process.

Routes of Administration Need to Be Clarified for Prescribing

Section 3640(d) of the Act states that "[a] naturopathic doctor may utilize routes of administration that include oral, nasal, auricular, ocular, rectal, vaginal, transdermal, intradermal, subcutaneous, intravenous, and intramuscular."

Section 3640 (c)(1) authorizes a naturopathic doctor to "dispense, administer, order, and prescribe or perform the following:

"(1) Food, extracts of food, nutraceuticals, vitamins, amino acids, minerals, enzymes, botanicals and their extracts, botanical medicines, homeopathic medicines, all dietary supplements and nonprescription drugs as defined by the federal Food, Drug, and Cosmetic Act, ***consistent with the routes of administration identified in subdivision (d).***" (Emphasis added.)

The sponsors of SB 907 (California Naturopathic Doctors Association) intended for naturopathic doctors to be able to administer the substances authorized by Section 3640(c)(1) through any of the authorized routes of administration, including intramuscular (IM) and intravenous (IV) when safe and appropriate. After SB 907 was passed, there was some confusion as to whether NDs were

COMMITTEE RECOMMENDATIONS

There are two main factors to be considered when making recommendations for naturopathic medicine formulary laws. First, it is paramount that the act of prescribing or IV administration be done safely by a competently trained ND. Secondly, the substance being administered must be prepared in a way to provide for absolute patient safety. Both of these factors were considered by the Committee in many arduous discussions in order to prepare the recommendations provided in this report.

Recommendation # 1—Prescribing Laws Need to Be Clarified.

It was the intent of the sponsors of SB 907, and the intent of the clarification to Section 3640(c)(1) in AB 302 that NDs are to be recognized as independent intravenous and intramuscular prescribers for the substances listed in Section 3640(c)(1)—food, extracts of food, nutraceuticals, vitamins, amino acids, minerals, enzymes, botanicals and their extracts, botanical medicines, homeopathic medicines, all dietary supplements and nonprescription drugs as defined by the federal Food, Drug, and Cosmetic Act. The Committee recommends that statutory and/or regulatory changes be made to effectuate this clarification in the pharmacy laws and the Act.

Recommendation # 2—Regulation of the Ocular Route.

Section 3627 requires the Bureau to make recommendations regarding the required supervision and protocols for utilization of the ocular route of prescription drug administration. Section 4234(d) of Division 40 of Title 16 of the California Code of Regulations specifies that an ND may only use the ocular route of administration if he or she is clinically competent in that area. Clinical competence is defined as possessing and exercising the degree of learning, skill, care and experience ordinarily possessed and exercised by a member of the appropriate discipline in clinical practice. Use of the ocular route is limited by the authorized formulary (see Ophthalmic Agents in Recommendation #6). The Committee has determined that further regulation of this route is not necessary.

Recommendation # 4—IV Formulary.

It is the recommendation of the Committee that NDs who have successfully completed an approved IV continuing education course as specified above be able to independently administer the following substances via the IV route of administration.

I. Category: Amino Acids and Glutathione

II. Category: Vitamins

III. Category: Minerals

IV. Category: Electrolytes, Sugars, and Diluents

V. Category: Chelating Agents:

⇒ Substances:

1. DMPS	2. EDTA
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VI. Any substance that may be prescribed or furnished by an ND which is part of an Institutional Review Board (IRB) approved study.

Recommendation # 6—Pharmaceutical Formulary.

It is recommended that changes be made to statutory law and subsequently to the Bureau's regulations to allow NDs to be able to independently prescribe, without supervision or protocol, from the formulary below (in addition to what is currently allowed by Section 3640.7). It is recommended that this formulary be included and maintained in the California Code of Regulations, rather than in statute. It is further recommended that a statutory change be made in order to require the Bureau in consultation with the Committee and the Naturopathic Advisory Council to review and update the naturopathic formulary on an annual basis. Changes to the formulary by the Bureau would be recommended by the Committee and approved by the Naturopathic Advisory Council.

ANTIBIOTICS

Amebecides
Antifungal agents
Anthelmintics
Antimalarial preparations (includes artemesin, derived from *Artemesia annua*)
Antiprotozoal agents
Antiviral agents
Bacitracin
Cephalosporins and related antibiotics
Fluroquinolones
Macrolides
Nitrofurantoin
Metronidazole
Neomycin
Nitrofurans
Penicillins
Quinalones
Sulfonamides
Tetracyclines

PAIN CONTROL AGENTS

Salicylates
NSAIDS
Opioid Analgesic Combinations - Schedules III, IV, and V only

GASTROINTESTINAL AGENTS

Proton pump inhibitors
Antidiarrheals
Gallstone Solubilizing Agents
H. pylori agents

CARDIOVASCULAR AGENTS

Anti-hyperlipidemic agents

RENAL AND GENITOURINARY AGENTS

Vaginal Preparations

DIAGNOSTIC AGENTS

In vitro Diagnostics Aids
In vivo Diagnostic Biologicals

VACCINES

ANTI-DIABETIC AGENTS

IV FORMULARY

I. Category: Amino Acids and Glutathione

II. Category: Vitamins

III. Category: Minerals

IV. Category: Electrolytes, Sugars, and Diluents

V. Category: Chelating Agents:

⇒ Substances:

3. DMPS	4. EDTA
---------	---------

VI. Any substance that may be prescribed or furnished by an ND which is part of an Institutional Review Board (IRB) approved study.

Soram Singh Khalsa, MD, Vice Chair

Board certified in internal medicine, Dr. Soram Khalsa is a clinical professor of medicine and Chairman of the Advisory Committee for the Environmental Medicine Center of Excellence at Southwest College of Naturopathic Medicine in Phoenix, Arizona. He also serves as Medical Director for the East-West Medical Research Institute.

Dr. Khalsa is a founding member of the American Holistic Medical Association and a founding member of the American Academy of Medical Acupuncture. He is also a member of the Outside Scientific Advisory Board for the NIH-sponsored Center on Botanical Studies at the David Geffen School of Medicine at the University of California, Los Angeles (UCLA). In his private medical practice, he integrates phytotherapeutics, homeopathy, acupuncture and environmental medicine with traditional internal medicine.

Dr. Khalsa graduated from Yale University and attended Case Western Reserve School of Medicine in Cleveland. After an internship at St. Luke's Hospital in Cleveland, he completed a residency at the Hospital of the Good Samaritan in Los Angeles. He continued his study of complementary medicine in North America, as well as Europe and Asia. He is an associate physician in the Division of Internal Medicine at Cedars-Sinai Medical Center.

Cynthia Watson, MD

Cynthia Mervis Watson is board certified in family medicine and is the medical director of Watson Wellness in Santa Monica, California. She is a staff member of Santa Monica UCLA and St. John's Hospital and also serves as a clinical faculty instructor in the Department of Family Medicine at UCLA. In her practice, Dr. Watson takes an integrative healing approach to medicine using natural hormone therapy, nutrition, herbal medicine, and homeopathy.

Dr. Watson has written several books and articles. Love Potions, A Guide to Aphrodisiacs and Sexual Pleasures was initially published in 1993 and an updated edition was released in June of 2003. Her other publications include: User's Guide to Easing Menopausal Symptoms Naturally, a guide for women wanting to use a natural approach to menopause and All About Lipoic Acid. She was a co-author on "Improved Immune Activation Markers in Chronic Fatigue and Immune Dysfunction (CFIDS) Patients Treated with Thymic Protein A", published in the Journal of Nutritional and Environmental Medicine.

In 1973, Dr. Watson studied herbal and homeopathic medicine in a one-year work-study program at a naturopathic hospital in the Black Forest region of Germany. From there she returned to the U.S. to complete her bachelor's degree in chemistry at Duquesne University in Pittsburgh, graduating Magna

the Advisory Council for the newly established California Bureau of Naturopathic Medicine.

The multi-disciplinary clinic she founded at Cedars-Sinai in the department of Medicine in 1998 allowed her to explore the practical and philosophical issues that both facilitate and impede the development of Integrative Medicine as a discipline. Contributing to the national development of integrative medicine, she serves as the Co-chairperson of the Clinical Practice Committee of the Academic Consortium of Integrative Medicine (an organization of the leading medical schools practicing and teaching in this area).

Most recently she is serving as the co-director of the Integrative Medicine Health and Wellness Program at the Venice Family Clinic, the largest free clinic in the United States. Her clinical practice now involves educating cancer patients in integrative therapies at the Ted Mann Family Integrative Oncology Program at UCLA.

Her current research interests include reviewing the evidence for the safety and efficacy of natural therapies, especially botanicals. Dr. Hardy's recently completed a book for Reader's Digest, *Best Remedies* that focuses on Integrative Medicine. She is also conducting a review of the quality of research trials in herbal medicine and is finishing a systematic review on the effects of dietary supplements on coagulation for the Office of Dietary Supplements.

Trevor Holly Cates, ND

Dr. Trevor Holly Cates received a Doctor of Naturopathic Medicine degree from the National College of Naturopathic Medicine and is a licensed naturopathic doctor in California. Co-founder of the Santa Barbara Center for Natural Medicine, Dr. Cates provides individualized naturopathic care with a focus on women and children's healthcare. Dr. Cates was appointed by Governor Schwarzenegger to the Bureau of Naturopathic Medicine Advisory Council of which she serves as vice-chairperson. She is a member of the American Association of Naturopathic Physicians, the National Center for Homeopathy, the Homeopathic Association of Naturopathic Physicians, the California Naturopathic Doctors Association, and the Holistic Pediatric Association.

Paul Mittman, ND

Paul Mittman, ND, DHANP, graduated from National College of Naturopathic Medicine in 1985. He completed a 2 year residency, and later directed research on natural therapies at the College. Dr. Mittman's practice integrates the foundations of naturopathic medicine – improved nutrition, lifestyle enhancement through exercise and stress reduction, with homeopathy and botanical medicine. A Diplomate of the Homeopathic Academy of Naturopathic Physicians, Dr. Mittman has been the editor of *Similimum* and the *New England Journal of*

part-time practice in Marin County, California.

Arthur Presser, Pharmacist

Arthur M. Presser, PharmD, DPh, is an Adjunct Assistant Professor of Pharmacy Practice at the University of Southern California School of Pharmacy and the Curriculum Coordinator of the Complimentary and Alternative Medicine Program. After beginning his career in conventional pharmacy in 1969, he switched his focus to integrative medicine in 1980. Dr. Presser is the author of three books in this field, including the *Pharmacist's Guide to Medicinal Herbs*, *The Nature Pharmacist's Vitamin Primer* and *The Medicinal Herb Primer*, his work has also been featured in numerous health magazines and newsletters. He is a frequent guest lecturer on complementary and alternative medicine for consumers, retailers and health professionals, and has appeared on many television and radio shows. Presser has committed himself to spending more time educating consumers, retailers, and health professionals alike in the safe use of nutrients and herbals to promote a higher level of wellness. To this end he is currently also the President of Huntington College of Health Sciences, a fully accredited distance learning institution.

Larry Woodhouse, Pharmacist

Larry Woodhouse is Director of Product and Business Development at McGuff Company, McGuff Compounding Pharmacy Services and McGuff Pharmaceuticals and Editor of the McGuff Company and Compounding Pharmacy Newsletter. He received Doctor of Pharmacy Degree from University of California, San Francisco School of Pharmacy and participated in an American Society of Health System Pharmacist Residency at the University of California, Irvine Medical Center.

Identifying the Similarities and Differences:

An analysis of two medical training programs -- Bastyr University's Naturopathic Doctorate (ND) compared to the University of Washington's Medical Doctorate (MD) program

Admissions Criteria

Similarities -- Overall, a high degree of similarity exists between the programs.

- ❖ Both programs:
 - Expect applicants to have completed, but do not require completion of, a baccalaureate degree.
 - Encourage a strong background in the humanities and liberal arts.
 - Require a strong background in the sciences, including chemistry, biology, and physics.
 - While not required for admission, biochemistry is very strongly recommended.
 - Allow for waiving a limited number of academic requirements under exceptional circumstances.

Differences

- ❖ Medical College Admissions Test (MCAT):
 - Required for University of Washington (UW) medical school, taken no later than fall in the year prior to possible matriculation.
 - Under *exceptional* circumstances, GRE scores may be considered for admission, but MCAT must be taken prior to matriculation.
 - Not required for Bastyr University (BU) naturopathic medical school
- ❖ Required courses:
 - UW specifies science requirements by number of credit hours* for each:
 - Chemistry (18*), biology (12*), and physics (4*), plus additional "open" science credits (8*).
 - BU specifies science requirements by number of courses for each:
 - Chemistry (4, for science majors), physics (1, college level), algebra or pre-calculus (1, college level), and psychology (1, introductory course recommended).
 - Additionally, BU requires a minimum of 3 quarter credits in general biology for science majors, with a lab.
- ❖ Additional Notes:
 - UW provides mean statistics for the entering class 2004 – GPA 3.71, MCAT scores (Verbal 10.3; Physical Sciences 10.8; Biological Sciences 11.1 and mode of "C" in writing) -- BU does not.
 - UW states:
 - "All candidates must demonstrate substantial academic ability in their major field as well as in the required science courses."
 - "Candidates should be proficient in the use of the English language and of basic mathematics, and are expected to have a basic understanding of personal computing and information technologies."
 - BU requires admissions committee review for all chemistry and biology courses not completed within 7 years of matriculation, and may require additional courses if deemed appropriate.
 - BU allows submission of test scores for prerequisite consideration as noted below:
 - AP, IB, CLEP, or GRE for math, psychology, or physics.
 - AP or IB for biology or chemistry.

Preclinical/Basic Sciences and Didactic Clinical Training

Similarities

- ❖ Both programs emphasize:
 - Anatomy, including gross (with cadaver dissection), histology, embryology and neuroscience
 - Physiology
 - Biochemistry
 - Pathology
 - Immunology and infectious disease
 - Clinical medicine – utilizing a systems-based approach, including
 - Cardiovascular, respiratory, endocrine/reproductive, urinary, musculoskeletal, skin and gastrointestinal systems
- ❖ Both programs include courses in:
 - Psychology
 - Pharmacology
 - Human Nutrition
 - Evaluation of medical research literature
 - Epidemiology and public health

Differences

- ❖ In some cases, both programs offer courses in a particular area, but one will emphasize it more heavily. For example:
 - BU more heavily emphasizes human nutrition, requiring four courses (12 credits*) to the UW's one (1 credit*).
 - BU more heavily emphasizes psychology/counseling, requiring five courses (12 credits*) to the UW's three (8 credits*).
 - UW more heavily emphasizes pharmacology, offering two courses (8 credits*) to BU's one (5 credits*).
- ❖ The BU didactic program includes a number of courses with no equivalent course at the UW. Examples of these include:
 - Naturopathic clinical theory and case analysis.
 - Specialty care for individuals at certain points in the life cycle, such as family medicine, pediatrics, and geriatrics
 - Overview courses in world traditional medical systems including Ayurvedic and Traditional Chinese Medicine
 - Traditional medical therapeutic approaches such as botanical, homeopathic, and physical medicine (i.e. massage, hydrotherapy, naturopathic manipulation).
 - More recent developments in natural health, including environmental medicine, clinical ecology, and clinical (orthomolecular) nutrition.
 - Medical law and practice management.
- ❖ Some courses offered at the UW as electives are required by BU, such as:
 - Medical ethics and the philosophy of healing/being a physician.
- ❖ Elective options:
 - BU provides a wide range of elective options for their ND students, and requires completion of 15 credits* for graduation. However, many are not all listed in BU's published curricular information.
 - The UW's published curricular information lists a minimum of 37 available elective credits* by course name and number. It remains unclear exactly how many elective credits are required for graduation and whether or not additional courses are offered but not listed.

Clinical Training

Similarities

- ❖ Both programs emphasize training in the clinical setting, where the student receives practical, hands-on training from licensed practicing physicians.

Differences

- ❖ BU naturopathic students complete a total of 25 shifts, all in the outpatient setting. The only specialized shifts completed are in physical medicine (4 shifts). Three shifts are completed as preceptorships, with independently practicing physicians.
- ❖ UW medical students complete 10 rotations of varying lengths in numerous areas of specialized as well as general medicine. Some of these are in the outpatient setting, others in an inpatient setting. In total, they complete a total of 58 weeks of these rotations, with the greatest emphasis on general medicine (12 weeks).
- ❖ All inpatient setting rotations such as surgery and trauma/emergency medicine are required by UW, but unavailable to BU naturopathic students (or with very limited availability as preceptorships).
- ❖ UW students are required to complete a rotation in obstetrics and gynecology; BU students complete rotations in childbirth only if enrolled in the separate midwifery program.
- ❖ UW students may complete elective rotations in rural/underserved community medicine; BU students may volunteer in these programs away from school (although preceptorship credits may be available).

Licensure Examinations

- ❖ Both MD and ND licensure require successful completion of a two-step examination process, one covering basic or pre-clinical sciences, and a second covering clinical sciences.
 - MD students complete the United States Medical Licensure Examination (USMLE) Part I at some point prior to their last year, and the USMLE Part II during their final year of enrollment at UW.
 - ND students complete the Naturopathic Physician Licensure Examination (NPLEX) Basic Sciences exams after their second academic year, and the Clinical Sciences exams post-graduation.

Sources

- ❖ <http://eduserv.hscer.washington.edu/uwsom/> Accessed 5 April 2005
- ❖ <http://www.washington.edu/students/crscat/humbio.html> Accessed 5 April 2005
- ❖ <http://www.bastyr.edu/academic/naturopath/curriculum.asp?track=4> Accessed 6 April 2005
- ❖ http://biomed.uaa.alaska.edu/A_Z/Curriculum.htm Accessed 7 April 2005

Comparison of curriculum hours for US Naturopathic Medical Schools

School	Academic Hours	Credits	Clinical Hours	Credits	Total
Bastyr University	3291.5	268.5q	1100*	47q	4391.5
NCNM	3078	224.5q	1572	65.5q	4650
SCNM	3325*	313q	1340	67q	4665
Bridgeport	3564	169s	1296	36s	4860

* Bastyr: Bastyr has the narrowest definition of what constitutes clinical credits, excluding, for instance, the clinical credits assigned to Grand Rounds. The other schools include these clinical credits in their totals, thus explaining this apparent discrepancy between Bastyr and the other naturopathic programs.

Comparison of average curriculum hours for US Naturopathic, Chiropractic and Allopathic Schools

+ Source: Coulter IB, Adams AH, Sandefur R. Niagara Chiropractic Society On Line: Chiropractic in the United States: Training, Practice and Research; Chapter III: Chiropractic Traini

Profession	Academic Hours	Clinical Hours	Total
Naturopathic	3315	1327	4642
Chiropractic+	3790	1010	4800
Allopathic			
Osteopathic			

Naturopathic Education Related to Diagnosis and Treatment

Proposed Bill Language	1 st and 2 nd Year ND Education	3 rd and 4 th Year ND Education	ND Clinical Education	Total Hours and Exams	States & Territories with Licensure
<p>The practice of the profession of naturopathy or naturopathic medicine is defined as a system of health care for the prevention, diagnosis, treatment and prescribing for human health conditions, injury, and disease; the promotion or restoration of health; and the support and stimulation of a patient's inherent self-healing processes through patient education and the use of natural therapies and therapeutic substances.</p>	<p>Diagnosis (Credits): Basic Sciences Gross Anatomy Lec/Lab (16.5) Biochemistry (12) Physiology Lec/Lab (14) Embryology (3) Histology (5) Immunology (4) Neuroscience (5.5) Pathology (12) Infectious Disease (6.5) Physical/Clinical Diagnosis Lec/Lab (12) Clinical Lab Diagnosis Lec/Lab (10.5)</p>	<p>Diagnosis and Treatment (Credits): Naturopathic Case Analysis (2.5) Cardiology (3) Gynecology (3) Normal Maternity (3) EENT (2) Pediatrics (4) Environmental Medicine (1.5) Public Health (1.5) Gastroenterology (2) Dermatology (2) Endocrinology (3) Geriatrics (2) Urology (1.5) Oncology (2) Psychological Assessment (2) Addictions and Disorders (2) Sports Medicine (2) Orthopedics (2) Neurology (2) Rheumatology (1.5) Pulmonary Medicine (1.5) Radiographic Interpretation Lec/Lab (7) Diagnostic Imaging (2)</p>	<p>2nd Year (credits) Clinic Entry (2) Clinical Exam Clinical Preceptorships (1)</p>	<p>1st and 2nd year total: 154.5 credits 1700 hours</p> <p>3rd and 4th year total: 161 credits 1770 hours</p> <p>Clinical – direct patient 1120 hours</p> <p>Total Credits: 315.5 credits 4590 hours</p> <p>Minimum Requirements 4100 hours total 1200 hours clinical 720 hours direct patient care</p>	<p>Licensed to Diagnose and Treat:</p> <p>Alaska Arizona California Connecticut DC Hawaii Idaho Kansas Maine Montana New Hampshire Oregon Puerto Rico Utah Vermont Virgin Islands Washington</p>
	<p>Treatment (Credits): Naturopathic Clinical Theory (2) The Determinants of Health (1.5) Research Methods (2) Principles of Chinese Medicine (3) Massage (1.5) Hydrotherapy/Physiotherapy Lec/Lab (3) Fundamentals of Ayurvedic medicine (2) Botanical Medicine (8) Naturopathic Philosophy (1.5) Homeopathy (8) Naturopathic Counseling (6) Dietary Systems and Assessment (3) Macro and Micronutrients (3) Naturopathic Manipulation (2) Pharmacology (5)</p>	<p>Treatment (Credits): Naturopathic Clinical Theory (1) Botanical Medicine (4) Diet and Nutrient Therapy (6) Naturopathic Counseling (2) Minor Office Procedures (3) Medical Procedures (3) Naturopathic Manipulation (9) Family Medicine (2) The Healing Systems (1) Adv. Naturopathic Therapeutics (4) Clinical Ecology (2) Interim Patient Care (2) Ethics (1) Jurisprudence (1) Practice Management (4) Electives (15)</p>	<p>3rd & 4th Year Clinical Training</p> <ul style="list-style-type: none"> • 1120 hours of direct patient care • Minimum of 350 patient contacts (usually 750-1000 patient contacts) • Clinical Competencies • Grand Rounds • Clinical Preceptorships (2) (132 hours of preceptorships) 	<p>Basic Science Board Exams (After 2nd Year): Anatomy, Physiology, Biochemistry, Microbiology and Pathology</p> <p>Clinical Board Exams (After 4th Year): Physical & Clinical Diagnosis, Lab Diagnosis & Diagnostic Imaging, Emergency Medicine, Botanical Medicine, Pharmacology, Nutrition, Psychology, Physical Medicine, Homeopathy, and Minor Surgery</p>	

Dana Owen

From: Strickler, Jenny R (CED) [jenny.strickler@alaska.gov]
Sent: Thursday, January 24, 2008 3:25 PM
To: Dana Owen
Subject: FW: SB 107 - Naturopaths

From: Strickler, Jenny R (CED)
Sent: Thursday, January 24, 2008 3:21 PM
To: 'dana.owen@legis.state.ak.us'
Cc: Saddler, Sally A (CED)
Subject: SB 107 - Naturopaths

Hi Dana,

As requested, here is a recap of our telephone conversation yesterday and the department's concerns with SB 107 and CSSB 107(L&C) work draft.

1. One public member on a five member board is normal. Currently, there are 10 licensing boards that consist of five members each with one position being a public member.

The Department has the following concerns –

- 1. Allowing expanded naturopathic practice to include prescriptive authority and minor surgery with only 60 hours of pharmacology training and 30 hours of pharmacology for renewal. In contrast:
 - a) Physicians Assistants and Advanced Nurse Practitioners are both required to have at least 6 years of education and at least one year of clinical rotation or preceptor oversight before being allowed prescriptive authority or to perform invasive procedures; additionally, both are only allowed to practice under an approved collaborative plan with a licensed medical doctor.
 - b) Veterinarians must possess a minimum of 8 years of education before "Junior" surgery training begins in the 7th year of schooling. Pharmacology training spans approximately 6 years of education before writing prescriptions.
 - c) Medical doctors invest 8 to 12+ years of education.
- 2. There are only 44 current licensees in Alaska, of which 7 have out-of-state addresses.
- 3. In FY 05 there were zero (-0-) complaints; FY 06 there was 1 complaint re: unlicensed activity; FY 07 there were zero (-0-) complaints; FY 08 to date there has been no complaints.
- 4. There have been no substantial regulation projects, aside from fee adjustments, in the past several years.
- 5. If expanded practice is allowed, a regulatory entity (Board/Council) will be needed. However, the Board should be established through Boards and Commission's in the Office of the Governor, not within the department to be appointed by the Commissioner. Boards and Commissions already have a process in place to establish regulatory entities. To duplicate the process within a department would be cumbersome.
- 6. As a suggestion, if expanded practice is allowed, perhaps naturopaths should operate under a collaborative plan with a medical physician like the Physicians Assistants or Advanced Nurse Practitioners for public protection and safety.
- 7. Creation of a new regulatory entity for 44 licensees will be an expensive proposition for the 44 licensees who are already subject to the self-sufficiency statutes of AS 08.01.065. Fees will be increased tremendously to support operating costs of the Council.

If you have further questions that I can help with, please let me know.

1/25/2008

Thank you.
Jenny

Jennifer Strickler, Chief
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1/25/2008

Alaska State Medical Association

4107 Laurel Street • Anchorage, Alaska 99508 • (907) 562-0304 • (907) 561-2063 (fax)

April 17, 2007

Honorable Johnny Ellis, Chair Senate Labor and Commerce Committee
 State Capitol, Room 9
 Juneau, AK 99801-1182
 RE: SB107 – Naturopathic Scope of Practice

Transmitted By Fax: 907-465-2529

Dear Senator Ellis:

The Alaska State Medical Association (ASMA) represents physicians statewide and is primarily concerned with the health of all Alaskans.

ASMA opposes SB107 and urges you to oppose it as well. Training for naturopaths is less rigorous than for medical doctors in both length and depth of study. Its emphasis on natural healing does not allow sufficient time for its students to fully learn the accepted pathology, physiology, and pharmacology necessary to treat most medical conditions. To allow naturopaths to prescribe drugs and perform "minor" surgery is unsafe for Alaskan patients.

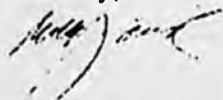
It needs to be pointed out that there is no such thing as "minor" surgery. For example, suturing simple lacerations and removing simple moles often requires complex surgical techniques and knowledge. The decisions involved with selecting optimal closure techniques or biopsy type (and the associated risks of each) are not mastered after a short course of study. While it may seem simple to biopsy a mole, it is much more complex to determine what type of biopsy is best for which lesions, or to assess which lesions could be cancerous and at higher risk of spreading if diagnosed or biopsied incorrectly. As surgeons are quick to point out: there is no such thing as "minor surgery" there are just minor surgeons....

In 2004, many of the same issues were presented via SB306 in its initial version. At the end of the 23rd Legislature, SB306 was enacted with not expanding any scope of practice for naturopaths. It did, however, create a task force, "Task Force on Naturopath Scope of Practice". That task force did not produce a report and thus left undone its important investigative elements. Those elements being comparing the education and training of naturopaths to medical doctors; investigating what an appropriate scope of practice would be for naturopaths, for prescription of drugs; investigating what an appropriate scope of practice for naturopaths would be for minor surgery and other non-pharmacological treatments; examine the potential structure and operation of any collaborative protocols and agreements for naturopaths with other licensed practitioners; investigate the liability issues involved with any collaborative arrangements; and to investigate any other issues found to be relevant by the task force. These same issues remain and need to be thoroughly investigated before any consideration is given to acting on this bill.

ASMA strongly feels that its resources as well as the Legislature's resources should be spent in finding solutions for Alaska's current acute shortage in physicians estimated to be a 30% shortage at this time. Spending time and resources exploring and debating expanded scope of practice for naturopaths will slow the efforts to recruit the highly trained physicians in sufficient numbers that we need today and in the future.

ASMA urges you to oppose SB107.

Sincerely,



By: Roland Gower, MD, President
 For: The Alaska State Medical Association

cc: Members, Senate Labor and Commerce Committee

Alaska State Legislature

Interim: (May - Dec.)
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Senator Bettye Davis

CS for Senate Bill 107 (), 25-LS0702K (3\7\08)

“An Act relating to naturopaths and to naturopathic practice; establishing an Alaska Naturopathic Council; amending the duties of the Board of Pharmacy relating to the naturopathic practice; and providing for an effective date.”

Explanation of CSSB 107() 25-LS0702\K

After the February 13, 2008 Senate HESS Committee hearing on the “M” version from Labor and Commerce Committee, CSSB 107(L&C), 25-LS0702M, the Chair concluded that changes were required in oversight, training, and experience in order to expand naturopathic scope of practice into areas for the most part formerly reserved to allopathic MDs and DOs, *i.e.*, minor surgery, prescribing prescription drugs, and ordering medical laboratory tests and imaging. Changes in the CS include:

1. The Alaska Naturopathic Council is increased from 5 to 7 members, including 3 naturopaths, 1 medical doctor, 1 pharmacist, and 2 members of the public who have no direct financial interest in naturopathic practice or the health care industry.
2. Members of the Alaska Naturopathic Council are to be appointed by the governor, *i.e.*, to be established through Boards and Commissions in the governor’s office, not the Department of Commerce, Community and Economic Development.
3. Naturopaths must have practiced for five years before being allowed the expanded scope of practice in minor surgery, prescribing prescription drugs, and ordering medical laboratory tests and imaging.
4. Naturopaths qualified and licensed to prescribe prescription drugs must take 15 contact hours of pharmacy educational training each year.
5. Naturopaths who independently perform minor surgery must first have received a minimum of 1200 clinical hours of training under supervision of medical doctors, physician’s assistants, or nurse practitioners.

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MEMORANDUM

March 7, 2008

SUBJECT: Requested Blank Committee Substitute for Senate Bill 107
(Work Order No. 25-LS0702\K)

TO: Senator Bettye Davis
Attn: Thomas Obermeyer

FROM: Alphcus Bullard
Legislative Counsel

This memorandum accompanies the draft committee substitute you requested. I have two comments and a concern about the constitutionality of some of the requested provisions.

Substantive Due Process

Some provisions of this draft could be interpreted to run afoul of the substantive due process prohibition against unreasonable and arbitrary legislation. Substantive due process under art. I, sec. 7, Constitution of the State of Alaska protects against unreasonable and arbitrary legislation. The constitutional guarantee of substantive due process assures that legislation is not arbitrary, but is based on some rational policy. Allam v. State, 830 P.2d 435 (Alaska App. 1992).

A person's right to substantive due process is violated if the person is subject to "a legislative enactment [that] has no reasonable relationship to a legitimate governmental purpose." Concerned Citizens of South Kenai Peninsula v. Kenai Peninsula Borough, 527 P.2d 447, 452 (Alaska 1974). Those provisions of this draft that (1) require a naturopath to have practiced for five years before being able to order or conduct medical imaging, perform minor surgery, or qualify for a prescription endorsement and (2) mandate that a naturopath must receive 1,200 hours of training in minor surgery under the supervision of a licensed physician, physician's assistant, or nurse practitioner (but not a qualified naturopath) could be challenged on substantive due process grounds.

Any due process judicial review of this legislation would begin with the assumption the legislation is proper. The party asserting a denial of due process would have the burden of showing that no rational basis exists for the challenged legislation. If any conceivable legitimate public policy for the legislation is apparent on its face or is offered by those defending the legislation, the opponents of the measure must disprove the factual basis for such a justification. Municipality of Anchorage v. Leigh, 823 P.2d 1241 (Alaska 1992).

Senator Bettye Davis

March 7, 2008

Page 2

Arguably the state has a rational basis in making sure that naturopaths are properly trained and qualified. Whether this justification would support the specific provisions of this committee substitute as being reasonable related to this legitimate governmental purpose, or whether a court would find that they are fundamentally unfair or arbitrary is unknown.

Comments

1. I changed the membership of the Alaska Naturopathic Council (Council) from five to seven members in the manner you requested. Would you also like to change the number of members necessary to constitute a quorum? See the draft's sec. 08.45.052(c).

2. You requested that the pharmacist and physician members of the Council be recommended by the Board of Pharmacy and the State Medical Board respectively and be appointed by the governor. If the governor is required to appoint the members recommended by the respective boards, this is little different than the boards themselves making the appointments. This draft requires each board to provide the governor a list of pharmacists or physicians for possible appointment to the Council. Is this consistent with your intent? See the draft's sec. 08.45.052(f).

If I can be of further assistance, please do not hesitate to contact me.

TLAB:mc

08-151.med

Enclosure

25-LS0702K
Bullard
3/7/08

CS FOR SENATE BILL NO. 107()

**IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-FIFTH LEGISLATURE - SECOND SESSION**

BY

**Offered:
Referred:**

Sponsor(s): SENATOR DAVIS BY REQUEST

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to naturopaths and to the practice of naturopathy; establishing an**
2 **Alaska Naturopathic Council; amending the duties of the State Medical Board and the**
3 **Board of Pharmacy relating to naturopathic practice; and providing for an effective**
4 **date."**

5 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

6 *** Section 1. AS 08.45.030 is amended to read:**

7 **Sec. 08.45.030. Issuance of license.** The department shall issue a license to
8 practice naturopathy to an applicant who provides proof satisfactory to the department
9 that the applicant has received a degree from an accredited four-year college or
10 university, has paid the applicable fees, and

11 (1) on or before December 31, 1987, has graduated from a school of
12 naturopathy that required four years of attendance at the school and after graduation
13 has received a license in another state after passing an examination for licensure in
14 that state and is licensed by a state at the time of application; or

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(2) after December 31, 1987, has

(A) graduated from a school of naturopathy that required four years of attendance at the school and at the time of graduation the school was accredited or a candidate for accreditation by the Council on Naturopathic Medical Education or a successor organization recognized by the United States Department of Education; and

(B) passed the Naturopathic Physicians Licensing Examination.

* Sec. 2. AS 08.45 is amended by adding a new section to read:

Sec. 08.45.045. Scope of practice as a naturopath. (a) A naturopath may

(1) use physical examinations consistent with naturopathic medical education and training for diagnostic purposes; and

(2) perform and administer therapies consistent with naturopathic medical education and training.

(b) A naturopath who has practiced naturopathy for at least five years may

(1) order or conduct medical imaging and laboratory examinations consistent with naturopathic medical education and training;

(2) under a prescription endorsement issued under AS 08.45.056, administer and prescribe prescription drugs and medical devices as approved for use by naturopaths by the Alaska Naturopathic Council; and

(3) subject to (c) of this section, perform minor surgery.

(c) Minor surgery may be performed by a naturopath licensed under this chapter only if the naturopath has submitted proof satisfactory to the department that the naturopath has completed at least 1,200 hours of training in minor surgery under the supervision of a licensed physician, physician's assistant, or nurse practitioner.

* Sec. 3. AS 08.45.050 is amended to read:

Sec. 08.45.050. Restrictions on practice of naturopathy. A person who practices naturopathy may not

(1) except as authorized under AS 08.45.056, give, prescribe, or recommend in the practice

(A) a prescription drug;

(B) a controlled substance;

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(C) a poison;

(2) engage in surgery, except minor surgery as authorized under AS 08.45.045(b) and (c);

(3) use the word "physician" in the person's title;

(4) use general or spinal anesthetics; or

(5) administer ionizing radioactive substances for therapeutic purposes.

* Sec. 4. AS 08.45 is amended by adding new sections to read:

Sec. 08.45.052. Alaska Naturopathic Council. (a) The Alaska Naturopathic Council is established in the department. The council consists of seven members appointed by the governor. Three members shall be naturopaths licensed under AS 08.45.030 who have been engaged in the practice of naturopathic medicine in the state for at least five years immediately preceding appointment, with at least one naturopathic member that lives outside the third judicial district; one member shall be a pharmacist, appointed under (e) of this section; one member shall be a physician appointed under (c) of this section; and two members shall be public members with no direct financial interest in a naturopathic practice or the health care industry.

(b) Members of the Alaska Naturopathic Council shall serve staggered terms of three years unless removed for cause.

(c) Four members of the council constitute a quorum for the transaction of all business properly before the council.

(d) When appointing naturopaths under (a) of this section, the governor may consider licensed naturopaths who have been nominated by the Alaska Association of Naturopathic Physicians.

(e) When appointing pharmacists and physicians under (a) of this section, the governor may appoint a pharmacist from the list of names submitted by the Board of Pharmacy under AS 08.80.030(b) and a physician from the list of names submitted by the State Medical Board under AS 08.64.101.

(f) In the event of the death, resignation, or removal of a member, the vacancy shall be filled for the unexpired portion of the term in the same manner as the original appointment.

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Sec. 08.45.054. Duties of the council. The Alaska Naturopathic Council shall

(1) establish a list of prescription drugs and medical devices that are consistent with naturopathic education and practice that the department may approve for use by naturopaths authorized under AS 08.45.056;

(2) review the list of prescription drugs and medical devices approved for use by naturopaths authorized under AS 08.45.056 annually and on request by the department;

(3) meet at the request of the department to review allegations of misconduct involving naturopaths licensed under this chapter or persons claiming to be naturopaths;

(4) advise the department on the approval of naturopathic medical programs; and

(5) advise the department on the adoption of regulations under AS 08.45.056.

Sec. 08.45.056. Prescription endorsement. (a) The department shall issue a prescription endorsement to a naturopath licensed under this chapter, who has practiced naturopathy for five years, who is qualified under AS 08.45.045(b), and who submits proof satisfactory to the department that the naturopath has

(1) successfully completed at least 60 hours of education from a program approved by the Alaska Naturopathic Council;

(2) met other requirements establishing proof of competency and professional qualifications that the department, in consultation with the Alaska Naturopathic Council, considers necessary to ensure the continued protection of the public; and

(3) obtained the appropriate registration issued by the Federal Drug Enforcement Administration.

(b) An endorsement issued under (a) of this section authorizes the licensee to prescribe and administer prescription drugs and medical devices that are on the formulary approved by the Alaska Naturopathic Council under AS 08.45.054.

(c) An endorsement issued under (a) of this section is valid for two years unless revoked or suspended by the department.

1 (d) The department may not renew an endorsement issued under (a) of this
2 section unless the licensee submits proof satisfactory to the department that the
3 licensee has completed at least 15 hours of pharmaceutical education in each of the
4 past two years.

5 * **Sec. 5.** AS 08.45 is amended by adding a new section to read:

6 **Sec. 08.45.110. Fees.** The department shall set fees under AS 08.01.065 for
7 each of the following:

- 8 (1) a license issued under this chapter;
9 (2) a temporary license issued under this chapter;
10 (3) renewal of a license issued under this chapter;
11 (4) a prescription endorsement issued under this chapter.

12 * **Sec. 6.** AS 08.45.200 is amended by adding a new paragraph to read:

13 (4) "minor surgery"

14 (A) means the use of

15 (i) operative, electrical, or other methods for surgical
16 repair and care incidental to superficial lacerations and abrasions or
17 superficial lesions and the removal of foreign bodies located in
18 superficial tissues; and

19 (ii) antiseptics and local anesthetics in connection with
20 methods authorized under (A) of this paragraph;

21 (B) does not include use of general or spinal anesthetics,
22 surgery of the body cavities, or specialized surgery, such as plastic surgery,
23 surgery involving the eyes, or surgery involving tendons, ligaments, nerves, or
24 blood vessels;

25 * **Sec. 7.** AS 08.64.101 is amended to read:

26 **Sec. 08.64.101. Duties.** The board shall

- 27 (1) examine and issue licenses to applicants;
28 (2) develop written guidelines to ensure that licensing requirements are
29 not unreasonably burdensome and the issuance of licenses is not unreasonably
30 withheld or delayed;
31 (3) after a hearing, impose disciplinary sanctions on persons who

1 violate this chapter or the regulations or orders of the board;

2 (4) adopt regulations ensuring that renewal of licenses is contingent
3 upon proof of continued competency on the part of the licensee; [AND]

4 (5) under regulations adopted by the board, contract with private
5 professional organizations to establish an impaired medical professionals program to
6 identify, confront, evaluate, and treat persons licensed under this chapter who abuse
7 alcohol, other drugs, or other substances or are mentally ill or cognitively impaired;
8 and

9 (6) nominate licensed physicians for appointment to the Alaska
10 Naturopathic Council established under AS 08.45.052.

11 * Sec. 8. AS 08.80.030(b) is amended to read:

12 (b) In order to fulfill its responsibilities, the board has the powers necessary
13 for implementation and enforcement of this chapter, including the power to

14 (1) elect a president and secretary from its membership and adopt rules
15 for the conduct of its business;

16 (2) license by examination or by license transfer the applicants who are
17 qualified to engage in the practice of pharmacy;

18 (3) assist the department in inspections and investigations for
19 violations of this chapter, or of any other state or federal statute relating to the practice
20 of pharmacy;

21 (4) adopt regulations to carry out the purposes of this chapter;

22 (5) establish and enforce compliance with professional standards and
23 rules of conduct for pharmacists engaged in the practice of pharmacy;

24 (6) determine standards for recognition and approval of degree
25 programs of schools and colleges of pharmacy whose graduates shall be eligible for
26 licensure in this state, including the specification and enforcement of requirements for
27 practical training, including internships;

28 (7) establish for pharmacists and pharmacies minimum specifications
29 for the physical facilities, technical equipment, personnel, and procedures for the
30 storage, compounding, and dispensing of drugs or related devices, and for the
31 monitoring of drug therapy;

1 (8) enforce the provisions of this chapter relating to the conduct or
2 competence of pharmacists practicing in the state, and the suspension, revocation, or
3 restriction of licenses to engage in the practice of pharmacy;

4 (9) license and regulate the training, qualifications, and employment of
5 pharmacy interns and pharmacy technicians;

6 (10) issue licenses to persons engaged in the manufacture and
7 distribution of drugs and related devices;

8 **(11) nominate licensed pharmacists for appointment to the Alaska**
9 **Naturopathic Council established under AS 08.45.052.**

10 * **Sec. 9.** AS 08.80.400 is amended to read:

11 **Sec. 08.80.400. Other licensees not affected.** This chapter does not affect the
12 practice of medicine by a licensed medical doctor and does not limit a licensed
13 medical doctor, osteopath, podiatrist, physician assistant, advanced nurse practitioner,
14 dentist, veterinarian, dispensing optician, naturopath, or optometrist in supplying a
15 patient with any medicinal preparation or article within the scope of the person's
16 license.

17 * **Sec. 10.** The uncodified law of the State of Alaska is amended by adding a new section to
18 read:

19 **TRANSITION: REGULATIONS.** The Department of Commerce, Community, and
20 Economic Development may proceed to adopt regulations necessary to implement the
21 changes made by this Act. The regulations take effect under AS 44.62 (Administrative
22 Procedure Act), but not before the effective date of sec. 13 of this Act.

23 * **Sec. 11.** The uncodified law of the State of Alaska is amended by adding a new section to
24 read:

25 **TRANSITIONAL PROVISIONS.** Notwithstanding AS 08.45.052, as enacted in sec. 4
26 of this Act, the terms of the first members of the Alaska Naturopathic Council appointed by
27 the governor are as follows: (1) the licensed physician member, one licensed naturopath
28 member, and one public member shall be appointed for two-year terms; (2) the licensed
29 pharmacist member and one licensed naturopath member shall be appointed for three-year
30 terms; and (3) one licensed naturopath member and one public member shall be appointed for
31 a one-year term. The department shall specify the term of office of each licensed naturopath

1 and public member appointed subject to this subsection.

2 * **Sec. 12.** Section 10 of this Act takes effect immediately under AS 01.10.070(c).

3 * **Sec. 13.** Except as provided in sec. 12 of this Act, this Act takes effect July 1, 2009.

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MEMORANDUM

March 17, 2008

SUBJECT: Alaska Naturopathic Board (CSSB 107(),
Work Order No. 25-LS0702\L)

TO: Senator Bettye Davis
Attn: Thomas Obermeyer

FROM: Alpheus Bullard *AB*
Legislative Counsel

This memorandum accompanies the draft committee substitute and an accompanying sectional summary that you requested.

This draft of CSSB 107() (25-LS0702\L) transforms the "Alaska Naturopathic Council" (council) which was to serve in an advisory capacity to the Department of Commerce, Community, and Economic Development (department) into an "Alaska Naturopathic Board" (board) and amends the manner in which the pharmacist and physician members of the council/board are selected.

While I preserved what could be preserved from CSSB 107() (25-LS0702\K), recasting the council as a board necessitated changes in AS 08.45 (Naturopaths) beyond those provisions that were added to or amended in AS 08.45 by the previous committee substitute. The first two sections of 25-LS0702\L relate to the mechanics of the council's becoming a board. Sections three and four provide for the establishment and organization of the Alaska Naturopathic Board and the board's duties and powers.

The board is composed of the same members as was the council, but the manner in which the physician and pharmacist members are selected has changed. In the previous committee substitute, the pharmacist and physician members of the council were appointed by the governor from lists of names submitted by the Board of Pharmacy and the State Medical Board respectively; in this draft the governor is free to appoint any licensed pharmacist and licensed physician.

The board also differs from the council with the addition of sec. 08.45.003(b) that requires the board to (1) select a chair and secretary and (2) meet at least twice a year or at the request of either the board's chair or the department. The duties (and powers) of the board have also been expanded beyond those that the council exercised to account for the board's increased responsibilities.

Senator Bettye Davis

March 17, 2008

Page 2

Because there is no one way in which boards are established, it was necessary for me to take certain liberties in construing how an Alaska Naturopathic Board would operate. Starting with the idea that there are not many naturopaths to regulate in Alaska, I left licensing, enforcement issues, and the collection of fees to the department, while providing that the board may request that the department make certain licensing decisions or invoke disciplinary action against a naturopath licensed under the chapter.

Please review the draft carefully to make sure that it is consistent with your intent.

TLAB:med
08-185.med

Enclosure

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MEMORANDUM

March 17, 2008

SUBJECT: Sectional Summary of CSSB 107()
(Work Order No. 25-LS0702\L)

TO: Senator Bettve Davis
Attn: Thomas Obermeyer

FROM: Alpheus Bullard *ZAB*
Legislative Counsel

You have requested a sectional summary of the above-described bill.

As a preliminary matter, note that a sectional summary of a bill should not be considered an authoritative interpretation of the bill and the bill itself is the best statement of its contents. If you would like an interpretation of the bill as it may apply to a particular set of circumstances, please advise.

Section 1. Adds the Alaska Naturopathic Board to the list of boards and professions to which AS 08.01 applies.

Section 2. Adds the Alaska Naturopathic Board (board) to a list of boards that may request that the Department of Commerce, Community, and Economic Development (department) provide assistance and treatment to the boards' licensees who abuse alcohol, drugs, or other substances.

Section 3. Adds new sections to AS 08.45 (Naturopaths)

Sec. 08.45.003. Provides for the establishment and organization of the Alaska Naturopathic Board.

Sec. 08.45.005. Provides the duties and powers of the board.

Section 4. Amends AS 08.45.030 to provide that the board shall request the department to issue a license to practice naturopathy to an applicant who has provided satisfactory proof of the applicant's educational qualifications and paid the applicable fees.

Section 5. Amends AS 08.45.035(a) to provide that the board shall request the department to issue a temporary license to practice naturopathy to an applicant who has

provided satisfactory proof to the board of the applicant's qualifications and paid the applicable fees.

Section 6. Adds a new section to AS 08.45 defining the scope of practice of naturopaths.

Section 7. Amends AS 08.45.050 (Restrictions on the practice of naturopathy) to (1) allow a licensed naturopath under AS 08.45.056 to be able to prescribe certain substances and engage in minor surgery authorized under AS 08.45.045 and (2) prohibit a naturopath from using general or spinal anesthetics and administer ionizing radioactive substances for therapeutic purposes.

Section 8. Establishes a "prescription endorsement" allowing certain naturopaths to prescribe and administer certain prescription drugs and medical devices.

Section 9. Amends AS 08.45.100 to provide that both the department and the board shall adopt regulations to implement AS 08.45.

Section 10. Adds a new section that provides what fees may be charged by the department under AS 08.45.

Section 11. Provides new definitions for AS 08.45.

Section 12. Adds naturopaths to the list of licensees whose practices are not limited by the statutes applicable to pharmacists in AS 08.80, as long as the naturopath is acting within the scope of the license or endorsement under AS 08.45.

Section 13. Adds a provision to uncodified law allowing the department to adopt regulations necessary to implement the Act.

Section 14. Adds a provision to uncodified law that provides transitional provisions governing the terms of the first members of the Alaska Naturopathic board.

Section 15. Gives an immediate effective date to sec. 13 so that the regulations process can start before the rest of the bill takes effect (90 days after becoming law).

Section 16. Provides that the Act, except as provided in sec. 15, will take effect July 1, 2009.

25-LS0702L
Bullard
3/17/08

CS FOR SENATE BILL NO. 107()

**IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-FIFTH LEGISLATURE - SECOND SESSION**

BY

**Offered:
Referred:**

Sponsor(s): SENATOR DAVIS BY REQUEST

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to naturopaths and to the practice of naturopathy; establishing an**
2 **Alaska Naturopathic Board; and providing for an effective date."**

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 *** Section 1. AS 08.01.010(26) is amended to read:**

5 (26) Alaska Naturopathic Board (AS 08.45.003) [REGULATION
6 OF THE PRACTICE OF NATUROPATHY UNDER AS 08.45];

7 *** Sec. 2. AS 08.01.050(d) is amended to read:**

8 (d) At the request of one of the following boards, the department may contract
9 with public agencies and private professional organizations to provide assistance and
10 treatment to persons licensed by the board who abuse alcohol, other drugs, or other
11 substances:

12 (1) Board of Social Work Examiners;

13 (2) Board of Dental Examiners;

14 (3) Board of Dispensing Opticians;

- 1 (4) State Medical Board;
- 2 (5) Board of Nursing;
- 3 (6) Board of Examiners in Optometry;
- 4 (7) Board of Pharmacy;
- 5 (8) State Physical Therapy and Occupational Therapy Board;
- 6 (9) Board of Professional Counselors;
- 7 (10) Board of Psychologist and Psychological Associate Examiners;
- 8 (11) Board of Veterinary Examiners; [AND]
- 9 (12) Board of Marital and Family Therapy; and
- 10 (13) the Alaska Naturopathic Board.

11 * Sec. 3. AS 08.45 is amended by adding new sections to read:

12 **Sec. 08.45.003. Board created; organization.** (a) There is created the Alaska
13 Naturopathic Board. The board consists of seven members appointed by the governor.
14 Three members shall be naturopaths licensed under this chapter who have been
15 engaged in the practice of naturopathic medicine in the state for at least five years
16 immediately preceding appointment, at least one of whom lives outside the third
17 judicial district. One member shall be a licensed pharmacist. One member shall be a
18 licensed physician. Two members shall be public members who, in addition to the
19 limitations imposed under AS 08.01.025, may not have a direct financial interest in the
20 health care industry other than as a consumer of health care services.

21 (b) The board shall select from among its members a chair and a secretary.
22 The board shall meet at least twice a year, and additional meetings shall be held on
23 request of the chair or on request of the department.

24 (c) Members of the board shall serve staggered terms of three years unless
25 removed for cause.

26 (d) Four members of the board constitute a quorum for the transaction of all
27 business properly before the board.

28 (e) When appointing naturopaths under (a) of this section, the governor may
29 consider licensed naturopaths who have been nominated by the Alaska Association of
30 Naturopathic Physicians.

31 (f) In the event of the death, resignation, or removal of a member, the vacancy

1 shall be filled for the unexpired portion of the term in the same manner as the original
2 appointment.

3 **Sec. 08.45.005. Duties of the board.** (a) The board shall

4 (1) establish a list of prescription drugs and medical devices that are
5 consistent with naturopathic education and practice that may be prescribed and
6 administered by a naturopath holding a prescription endorsement, and review the list
7 of prescription drugs and medical devices annually and on request by the department;

8 (2) review allegations of misconduct involving naturopaths licensed
9 under this chapter or persons claiming to be naturopaths;

10 (3) approve naturopathic medical programs;

11 (4) implement the continuing education requirement of
12 AS 08.45.056(d); and

13 (5) adopt regulations necessary to implement this chapter in a manner
14 that protects public health.

15 (b) The board may

16 (1) conduct hearings on charges of alleged violations of this chapter or
17 regulations adopted under this chapter;

18 (2) invoke, or request the department to invoke, disciplinary action
19 against a licensee.

20 * **Sec. 4.** AS 08.45.030 is amended to read:

21 **Sec. 08.45.030. Issuance of license.** The board shall request the department
22 to [SHALL] issue a license to practice naturopathy to an applicant who provides proof
23 satisfactory to the board [DEPARTMENT] that the applicant has received a degree
24 from an accredited four-year college or university, has paid the applicable fees, and

25 (1) on or before December 31, 1987, has graduated from a school of
26 naturopathy that required four years of attendance at the school and after graduation
27 has received a license in another state after passing an examination for licensure in
28 that state and is licensed by a state at the time of application; or

29 (2) after December 31, 1987, has

30 (A) graduated from a school of naturopathy that required four
31 years of attendance at the school and at the time of graduation the school was

1 accredited or a candidate for accreditation by the Council on Naturopathic
2 Medical Education or a successor organization recognized by the United States
3 Department of Education; and

4 (B) passed the Naturopathic Physicians Licensing Examination.

5 * Sec. 5. AS 08.45.035(a) is amended to read:

6 (a) The board shall request the department to [SHALL] issue a temporary
7 license to practice naturopathy to an applicant who has applied for and is qualified to
8 take the next Naturopathic Physicians Licensing Examination offered after the date of
9 application and provides proof satisfactory to the board [DEPARTMENT] that the
10 applicant

11 (1) has paid the applicable fees:

12 (2) meets the requirements of AS 08.45.030(2)(A); and

13 (3) [(2)] has not previously failed the Naturopathic Physicians
14 Licensing Examination.

15 * Sec. 6. AS 08.45 is amended by adding a new section to read:

16 Sec. 08.45.045. Scope of practice as a naturopath. (a) A naturopath may

17 (1) use physical examinations consistent with naturopathic medical
18 education and training for diagnostic purposes; and

19 (2) perform and administer therapies consistent with naturopathic
20 medical education and training.

21 (b) A naturopath who has practiced naturopathy for at least five years may

22 (1) order or conduct medical imaging and laboratory examinations
23 consistent with naturopathic medical education and training;

24 (2) under a prescription endorsement issued under AS 08.45.056,
25 administer and prescribe prescription drugs and medical devices as approved for use
26 by naturopaths by the board; and

27 (3) subject to (c) of this section, perform minor surgery.

28 (c) Minor surgery may be performed by a naturopath licensed under this
29 chapter only if the naturopath has submitted proof satisfactory to the board that the
30 naturopath has completed at least 1,200 hours of training in minor surgery under the
31 supervision of a licensed physician, physician's assistant, or nurse practitioner.