

**TITLE 4. PROFESSIONS AND OCCUPATIONS**  
**CHAPTER 18. NATUROPATHIC PHYSICIANS ~~BOARD OF MEDICAL BOARD~~**  
**EXAMINERS**

**ARTICLE 1. GENERAL PROVISIONS**

**R4-18-101. Definitions**

A. In addition to the definitions in A.R.S. §§ 32-1501 through 32-1581, the following definitions apply to this Chapter unless otherwise specified:

1. "Administrative completeness review" means the Board's process for determining that an applicant has provided, or caused to be provided, all of the application packet information and documentation required by statute or rule for an application for a license or a certificate.
2. "Applicant" means a person requesting from the Board an initial, temporary, or renewal license or certificate.
3. "Approved Specialty College or Program" means ~~any~~ a postdoctoral training program that awards a medical specialist certificate, and is certified by a Specialty Board of Examiners, The American Association of Naturopathic Physicians ("AANP") or another professional association or, another states licensing agency, and which is recognized by the Board. ~~is approved by one of the following:~~
  - ~~a. The Council on Naturopathic Medical Education,~~
  - ~~b. The American Association of Naturopathic Physicians, or~~
  - ~~c. The Arizona Naturopathic Medical Association.~~
4. "Chief medical officer" means a physician who is responsible for a clinical, preceptorship, internship, or postdoctoral training program's compliance with state and federal laws, rules, and regulations.
5. "Continuing medical education" or "CME" means courses, seminars, lectures, programs, conferences, and workshops related to subjects listed in A.R.S. § 32-1525(B), that are offered or sanctioned by one of the organizations referenced in R4-18-205 (B).
6. "Device" means the same as in A.R.S. § 32-1581(H)(1).
7. "Endorsement" means the procedure for granting a license in this state to an applicant who is currently licensed to practice naturopathic medicine by another

- state, district, or territory of the United States or by a foreign country that requires a written examination substantially equivalent to the written examination provided for in A.R.S. § 32-1525.
8. "Facility" means a health care institution as defined in A.R.S. § 36-401, office or clinic maintained by a health care institution or by an individual licensed under A.R.S. Title 32, Chapter 13, 14, 17, or 29, office or public health clinic maintained by a state or county, office or clinic operated by a qualifying community health center under A.R.S. § 36-2907.06, or an office or clinic operated by a corporation, association, partnership, or company authorized to do business in Arizona under A.R.S. Title 10.
  9. "Informed consent" means a document, signed by a patient or the patient's legal guardian, which contains the information in R4-18-802(A)(1), (A)(2), and (A)(3).
  10. "Institutional review board" means a group of persons that is approved according to guidelines of the United States Department of Health and Human Services, Office for Human Research Protection, which reviews investigational or experimental protocols and approves their use on animals or humans for the purposes of protecting the subjects of the investigational or experimental protocol from undue harm and assures that the research and its review is carried out according to guidelines of the United States Department of Health and Human Services, Office for Human Research Protection.
  11. "Internship" means clinical and didactic training by a doctor of naturopathic medicine certified by the Board according to A.R.S. § 32-1561.
  12. "License" means a document issued by the Board that authorizes the individual to whom it is issued to practice naturopathic medicine.
  13. "Medical student" means naturopathic medical student defined in A.R.S. § 32-1501(24).
  14. "Medication" means the same as drug defined in A.R.S. § 32-1501(15) or natural substance defined in A.R.S. § 32-1501(23).
  15. "National board" means any of the following:
    - a. The Federation of State Medical Licensing Boards,
    - b. The National Board of Chiropractic Examiners,

- c. The National Board of Medical Examiners,
  - d. The National Board of Osteopathic Examiners, or
  - e. The North American Board of Naturopathic Examiners.
16. "Procedure" means an activity directed at or performed on an individual for improving health, treating disease or injury, or making a diagnosis.
17. "Protocol" means an explicit detailed plan of an experimental medical procedure or test that is approved by an institutional review board.
18. "Resident physician in training" means a person who holds a degree of doctor of naturopathic medicine and is certified by the Board to diagnose and treat patients under supervision in an internship, preceptorship, or a post doctoral training program.
19. "Substantive review" means the Board's process for determining whether an applicant for licensure, certification, or approval meets the requirements of A.R.S. Title 32, Chapter 14 and this Chapter.
20. "Verified" means a notarized form dated, and signed by the applicant, affirming the information provided in the application, including any accompanying documents submitted by or on behalf of the applicant, is true and complete.

**R4-18-107 Fees**

A. Application fees are as follows:

- 1. Medical license, \$225
  - 2. Certificate to dispense, \$225
  - 3. Medical assistant certificate, \$100
  - 4. Clinical training certificate, \$100
  - 5. Preceptorship certificate, \$100
  - 6. Specialty certificate, \$225
- B. Arizona naturopathic jurisprudence examination, \$60

C. Annual renewal fees are as follows:

- 1. Medical license, \$165
- 2. Certificate to Dispense, \$225
- 3. Medical assistant certificate, \$150

4. Clinical training certificate, \$225
5. Preceptorship certificate, \$225
6. Renewal of Specialty certificate, \$225

D. Late renewal fees are as follows:

1. Medical license, \$83
2. Certificate to dispense, \$113
3. Medical assistant certificate, \$75
4. Clinical training certificate, \$113
5. Preceptorship certificate, \$113
6. Specialty certificate, \$113

E. Other fees are as follows:

1. For a duplicate license or certificate, \$20
2. For photocopying Board records, documents, letters, applications, or files, \$5 or \$0.25 per page, whichever is greater
3. For each audio tape or computer disk containing information requested, \$25
4. For written verification of a license or certificate, \$5
5. For the costs in locating a person who is licensed or certified, actual cost incurred by the Board
6. For each insufficient fund check, \$25

## **ARTICLE 2. LICENSES; SPECIALISTS CERTIFICATES; CONTINUING MEDICAL EDUCATION; RENEWAL**

### **R4-18-202. License by Examination**

In addition to the requirements of R4-18-201, an applicant for licensure by examination shall meet the requirements of A.R.S. Title 32, Chapter 14 and provide the Board:

1. A completed application form, provided by the Board, that is signed ~~and~~ dated ~~;~~ ; and verified; and shall include the following information:
  - a. Applicant's full name and any former names used by the applicant;
  - b. Applicant's place and date of birth;
  - c. Applicant's Social Security number;

- d. Applicant's home, business, and e-mail addresses;
- e. Applicant's home, business, and cell phone numbers;
- f. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, along with a copy of evidence;
- g. The name of the approved naturopathic college applicant graduated from, date of graduation, and date of clinical training completion;
- h. The date applicant took and passed the examination in Arizona naturopathic jurisprudence that is administered by the Board, and the required NPLEX examinations of Part I; Biomedical examination, Part II; Clinical Science examination, Part II; Core Clinical Science Examination, the Clinical Elective examination in acupuncture, and the Clinical Elective examination in minor surgery. Applicant must have taken and passed all the required examinations within a 5 year period immediately preceding the date of application submission to the Board;
- i. A list of all licenses or certificates issued or denied by any agency in any state, district or territory of the United States or another country. Applicant must cause to have a document submitted directly to the Board from each agency listed, containing the applicant's name, date of issuance or denial, current status, and whether or not any disciplinary actions are pending or have ever been taken;
- j. Whether applicant has ever been arrested, charged with, convicted of, or entered into a plea of no contest to a felony or a misdemeanor;
- k. Whether applicant has ever had a naturopathic medical license or certification, or any other profession license or certification denied, suspended, rejected or revoked by any state, district or territory of the United States or another country.
- l. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. § 32-1501;
- m. Whether applicant, in lieu of disciplinary action, has entered into a consent agreement or stipulation with a licensing agency in any state, district or territory of the United States or another country;

- n. Whether applicant currently has an open complaint or is involved in any open investigation in any agency or court of law, in any state, district or territory of the United States or another country;
- o. Whether applicant has ever had the authority to prescribe, dispense, or administer a natural substance, drug, or device limited, restricted, modified, denied, surrendered or revoked by a federal or state agency or court of law, in any state, district or territory of the United States or another country;
- p. Whether applicant has ever been found medically incompetent;
- q. Whether applicant has ever been a defendant in any malpractice matter that resulted in a settlement or judgment;
- r. Whether applicant has a medical condition, that in any way, impairs or limits applicant's ability to practice medicine; and
- s. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
2. A copy of the applicant's complete NPLEX examination record, ~~including the basic science examination, the clinical science examination, and the additional test sections of acupuncture, minor surgery, and homeopathy~~ to be sent directly to the Board by the North American Board of Naturopathic Examiners ("NABNE") or its successor;
3. A complete transcript sent directly to the Board from the approved school of naturopathic medicine from which the applicant graduated. The transcript shall include the date of graduation and the date of completion of clinical training;
4. A complete and legible fingerprint card, including the DPS processing fee as specified on the application form;
5. ~~The fee specified in R4-18-107.~~ A passport size photograph, taken no more than 60 days prior to application submission, that is signed on the back by the applicant; and
6. The fees specified in R4-18-107.

#### **R4-18-203. License by Endorsement**

In addition to the requirements of R4-18-201, an applicant for licensure by endorsement shall meet the requirements of A.R.S. Title 32, Chapter 14, and provide the Board:

1. A completed application form, provided by the Board, that is signed ~~and~~ , dated ; , and verified, and shall include the following information:
  - a. Applicant's full name and any former names used by the applicant:
  - b. Applicant's place and date of birth;
  - c. Applicant's Social Security number;
  - d. Applicant's home, business, and e-mail addresses;
  - e. Applicant's home, business, and cell phone numbers;
  - f. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, along with a copy of evidence;
  - g. The name of the approved naturopathic college applicant graduated from, date of graduation, and date of clinical training completion;
  - h. The date applicant took and passed the examination in Arizona naturopathic jurisprudence that is administered by the Board, and the required NPLEX examinations of Part I; Biomedical examination, Part II; Clinical Science examination, Part II; Core Clinical Science Examination, the Clinical Elective examination in acupuncture, and the Clinical Elective examination in minor surgery ;
  - i. A list of all licenses or certificates issued or denied by any Agency in any state, district or territory of the United States or another country. Applicant must cause to have a document submitted directly to the Board from each agency listed, containing the applicant's name, date of issuance or denial, current status, and whether or not any disciplinary actions are pending or have ever been taken;
  - j. Whether applicant has ever been arrested, charged with, convicted of, or entered into a plea of no contest to a felony or a misdemeanor;
  - k. Whether applicant has ever had a naturopathic medical license or certification, or any other profession license or certification denied, suspended, rejected or

- revoked by any agency in any state, district or territory of the United States or another country;
- l. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. § 32-1501;
- m. Whether Applicant, in lieu of disciplinary action, has entered into a consent agreement or stipulation with a licensing agency in any state, district or territory of the United States or another country;
- n. Whether applicant currently has an open complaint or is involved in any open investigation in any agency or court of law, in any state, district or territory of the United States or another country;
- o. Whether applicant has ever had the authority to prescribe, dispense, or administer a natural substance, drug, or device limited, restricted, modified, denied, surrendered or revoked by a federal or state agency or court of law; in any state, district or territory of the United States or another country;
- p. Whether applicant has ever been found medically incompetent;
- q. Whether applicant has ever been a defendant in any malpractice matter that resulted in a settlement or judgment;
- r. Whether applicant has a medical condition, that in any way, impairs or limits applicant's ability to practice medicine; and
- s. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
2. A document submitted directly to the Board by the agency by whom the applicant is licensed as a naturopathic physician that is signed and dated by an official of the agency and that contains:
- a. The applicant's name ; ;
  - b. The date of issuance of the license ; ;
  - c. The current status of the license ; ;
  - d. A statement of whether the applicant has ever been denied a license by the agency; ; and
  - e. A statement of whether any disciplinary action is pending or has ever been



- taken against the applicant-;
3. A copy of the applicant's complete NPLEX examination record, to be sent directly to the Board by the North American Board of Naturopathic Examiners ("NABNE") or its successor;
  4. A complete transcript sent directly to the Board from the approved school of naturopathic medicine from which the applicant graduated. The transcript shall include the date of graduation and the date of completion of clinical training;
  5. Applicant must provide evidence of being actively engaged, for at least three years immediately preceding the application, in one or more of the following:
    - a. The active practice as a licensed doctor of naturopathic medicine.
    - b. Participation in an approved internship, preceptorship or clinical training program in naturopathic medicine, as defined in A.R.S. 32-1501(4),(5), and (7).
    - c. Participation in an approved postdoctoral training program in naturopathic medicine, as defined in A.R.S. 32-1501(6).
    - d. Active in the resident study of naturopathic medicine at an approved school of naturopathic medicine, as defined in A.R.S. 32-1501(8)(a),(b).
  6. A complete and legible fingerprint card, including the DPS processing fee, as specified on the application form;
  7. A passport size photograph taken within 60 days prior to application submission, that is signed on the back by the applicant;
  8. The fees specified in R4-18-107; and
  9. For Applicants who were licensed in another state or a Canadian province before January 1, 2005, evidence of completion of additional sixty hours of ("CME") in the subject of pharmacotherapeutics. The CME must be offered, sanctioned, or accredited by one of the organizations referenced in R4-18-205 (B)(1),(2), or (4), and include an examination.
    - a. In the event the applicant cannot provide satisfactory evidence of completion of the required pharmacotherapeutics, or the required examinations, pursuant to A.R.S. §32-1524(E), and (G)(3), the applicant will have an additional 365 days from the date the Board notifies the applicant of the deficiency, to supply satisfactory evidence of completion.

#### **R4-18-204. Specialists Certificate**

To obtain a specialist certificate, a physician shall meet the requirements of A.R.S. Title 32, Chapter 14 and provide the Board:

1. A completed application form, provided by the Board, that is signed ~~and~~ dated ~~;~~ ,  
and verified, and shall include the following information:
  - a. Applicant's full name;
  - b. Applicant's current State of Arizona Naturopathic Physicians Medical License number;
  - c. Applicant's email address, phone number, and mailing address;
  - d. The name and address of the approved specialty college or program from which applicant completed postdoctoral specialty training;
  - e. The specialty for which applicant received training in, and a copy of the certificate of completion received in the specialty;
  - f. The name of the specialty board of examiners that approved the specialty program;
  - g. Whether applicant has a medical condition that, in any way, impairs or limits applicant's ability to practice medicine;
  - h. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. § 32-1501;
  - i. Whether applicant has ever had a naturopathic medical license or certification, or any other health profession license or certification denied, suspended, rejected or revoked by any agency in any state, district or territory of the United States or another country; and
  - j. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
2. ~~The name and address of the approved specialty college or program at which the licensee completed postdoctoral specialty training and the date of completion, and~~  
The fees specified in R4-18-107;

3. A letter from the specialty board that conducted the examination verifying, that the licensee is certified as a specialists in the specialty for which application is made; and
4. A certificate issued to a physician pursuant to A.R.S. § 32-1529(C.), shall be concurrently renewed, suspended or revoked, with that physician's license to practice naturopathic medicine.

**R4-18-206. Renewal of a License**

~~A.~~ To renew a license to practice naturopathic medicine, on or before January 1 of each year, a licensee shall submit a completed license application renewal form, that allows the Board to determine whether the applicant continues to meet the requirements of A.R.S. Title 32, Chapter 14. If an applicant makes a timely and complete application for renewal of the applicant's license, the physician may continue to practice until the application is approved or denied by the Board:

1. A completed application form, provided by the Board, that is signed, dated, and verified, and shall include the following information:
  - a. Applicant's full name;
  - b. Applicant's State of Arizona Naturopathic Physicians Medical License number and initial issuance date of the license;
  - c. Applicant's home, business, and e-mail addresses, and choice of mailing address;
  - d. Applicant's home, business, and cell phone numbers;
  - e. Applicant's attestation of completion of the Continuing Medical Education credit hours required to renew the medical license;
  - f. A statement indicating whether, during the last 12 months, applicant was arrested, charged with, convicted of, or entered into a plea of no contest to any criminal act;
  - g. A statement indicating whether, during the last 12 months, applicant had any licensing agency or board, in any state, district or territory of the United States or another country, initiate or take any action against any license or certificate that is or was held;
  - h. A statement indicating whether, during the last 12 months, in lieu of disciplinary action, applicant entered into a consent agreement or stipulation with any agency in

any state, district or territory of the United States or another country;

i. A statement of whether during the last 12 months applicant was named in a malpractice suit;

j. A statement of whether applicant has a complaint currently pending before any agency, or court of law, in any state, district or territory of the United States or another country;

k. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background: and

2. The fee specified in R4-18-107.

~~B. A licensee shall submit the licensure renewal fee required in R4-18/107 to the Board by mail or in person.~~

**R4-18-207. Reinstatement of an Expired License or Certificate**

A. In order to reinstate an expired license, an applicant must meet the requirements in A.R.S. § 32-1526, and pay a renewal and penalty fee for each year the license has been expired. In addition, the applicant must demonstrate completion of 30 hours of continuing medical education for each year the license has been expired. The CME must cover clinical application of naturopathic medical philosophy, pharmacology, and be accredited by the Accreditation Council on Continuing Medical Education or approved by any of the programs listed in R4-18-201(B)(2).

B. The applicant must provide the Board with:

1. A completed application form, provided by the Board, that is signed, dated, and verified; which shall include the following information:
  - a. Applicant's full name and any former names used by the applicant;
  - b. Applicant's place and date of birth;
  - c. Applicant's Social Security number;
  - d. Applicant's home, business, and e-mail addresses;
  - e. Applicant's home, business, and cell phone numbers;
  - f. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, and copy of evidence;

- g. The name of the approved naturopathic college applicant graduated from, date of graduation, and date of clinical training completion;
- h. A list of all license or certificates issued or denied by any agency in any state, district or territory of the United States or another country. Applicant must cause to have a document submitted directly to the Board from each agency listed, containing the applicant's name, date of issuance or denial, current status and whether or not any disciplinary actions are pending or have ever been taken;
- i. Whether applicant has ever been arrested, charged with, convicted of, or entered into a plea of no contest to a felony or a misdemeanor;
- j. Whether applicant has ever had a naturopathic medical license or certification, or any other health profession license or certification denied, suspended, rejected or revoked by any agency in any state, district or territory of the United States or another country;
- k. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. § 32-1501;
- l. Whether applicant, in lieu of disciplinary action, has entered into a consent agreement or stipulation with a licensing agency in any state, district or territory of the United States or another country;
- m. Whether applicant currently has an open complaint or is involved in any open investigation in any agency or court of law, in any state, district or territory of the United States or another country;
- n. Whether applicant has ever had the authority to prescribe, dispense, or administer a natural substance, drug, or device limited, restricted, modified, denied, surrendered or revoked by a federal or state agency or court of law, in any state, district or territory of the United States or another country;
- o. Whether applicant has ever been found medically incompetent;
- p. Whether applicant has ever been a defendant in any malpractice matter that resulted in a settlement or judgment;
- q. Whether applicant has a medical condition, that in any way, impairs or limits applicant's ability to practice medicine; and

- r. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
- 2. A complete and legible fingerprint card, including the DPS processing fee, as specified on the application form; and
- 3. A passport size photograph taken within 60 days prior to application submission that is signed on the back by the applicant.
- C. An applicant for reinstatement of an expired certificate to dispense must complete the renewal application form and pay the renewal and late fees for each year the certificate has been expired.
- D. An applicant for reinstatement of a certificate to dispense must complete the initial application form for the certificate. Pursuant to A.R.S. 32-1526(H), an applicant for reinstatement of an expired certificate shall pay all renewal and penalty fees.
- E. An applicant who held a specialty certificate that expired with the license, may request reinstatement of the certificate on the application for reinstatement of the medical license.

**R4-18-208. Reinstatement of a Retired License**

A. A person may apply to reinstate a retired license to active practice, upon payment of the renewal fee. As a condition of reinstatement of a retired license, Pursuant to A.R.S. §32-1528, each applicant shall provide proof of completion of 30 hours of continuing medical education, and provide the Board with:

- 1. A completed application form, provided by the Board, that is signed, dated, and verified; and shall include the following information:
  - a. Applicant's full name and any former names used by the applicant;
  - b. Applicant's place and date of birth;
  - c. Applicant's Social Security number;
  - d. Applicant's home, business, and e-mail addresses;
  - e. Applicant's home, business, and cell phone numbers;
  - f. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, and copy of evidence;

- g. The name of the approved naturopathic college applicant graduated from, date of graduation, and date of clinical training completion;
- h. The date applicant retired the license.
- i. A list of all license or certificates issued or denied by any agency in any state, district or territory of the United States or another country. Applicant must cause to have a document submitted directly to the Board from each agency listed, containing the applicant's name, date of issuance or denial, current status and whether or not any disciplinary actions are pending or have ever been taken;
- j. Whether applicant has ever been arrested, charged with, convicted of, or entered into a plea of no contest to a felony or a misdemeanor;
- k. Whether applicant has ever had a naturopathic medical license or certification, or any other health profession license or certification denied, suspended, rejected or revoked by any agency in any state, district or territory of the United States or another country;
- l. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. § 32-1501;
- m. Whether applicant, in lieu of disciplinary action, has entered into a consent agreement or stipulation with a licensing agency in any state, district or territory of the United States or another country;
- n. Whether applicant currently has an open complaint or is involved in any open investigation in any agency or court of law, in any state, district or territory of the United States or another country;
- o. Whether applicant has ever had the authority to prescribe, dispense, or administer a natural substance, drug, or device limited, restricted, modified, denied, surrendered or revoked by a federal or state agency or court of law in any state, district or territory of the United States or another country;
- p. Whether applicant has ever been found medically incompetent;
- q. Whether applicant has ever been a defendant in any malpractice matter that resulted in a settlement or judgment;

- r. Whether applicant has a medical condition, that in any way, impairs or limits applicant's ability to practice medicine, and;
  - s. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
  - 2. A complete and legible fingerprint card, including the DPS processing fee, as specified on the application form;
  - 3. A passport size photograph taken within 60 days prior to application submission that is signed on the back by the applicant;
  - 4. The fees specified in R4-18-107; and
  - 5. Proof of completion of 30 hours of CME taken, within the last 12 months prior to application submission. The CME is in addition to the 30 hours required each year for license renewal, must cover clinical application of naturopathic medical philosophy, pharmacology, and be accredited by the Accreditation Council on Continuing Education, or approved by any of the programs listed in R4-18-205(B)(2).
- B. An applicant for reinstatement of a retired certificate to dispense must complete the renewal application form for the certificate, and pay the fee specified in R4-18-107.
- C. An applicant who held a specialty certificate that retired with the license, may request reinstatement of the certificate on the application for reinstatement of the medical license.

**R4-18-209. Reinstatement of a Suspended, Revoked, or Surrendered License or Certificate**

- A. A person may apply to the Board for the termination of the suspension or reissuance of a revoked license. Pursuant to A.R.S. §32-1551, the Board shall make its determination on each application as it deems consistent with the public health, safety and just in the circumstances. The applicant must provide the Board with:
- 1. A completed application form, provided by the Board, that is signed, dated, and verified; which shall include the following information:
    - a. Applicant's full name and any former names used by the applicant;
    - b. Applicant's place and date of birth;
    - c. Applicant's Social Security number;



- d. Applicant's home, business, and e-mail addresses;
- e. Applicant's home, business, and cell phone numbers;
- f. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, and copy of evidence;
- g. The name of the approved naturopathic college applicant graduated from, date of graduation, and date of clinical training completion;
- h. Documentation showing that the basis for the suspension or revocation has been removed, and that suspension, termination or reinstatement of the license or certificate, does not constitute a threat to the public health or safety;
- i. A list of all license or certificates issued or denied by any agency in any state, district or territory of the United States or another country. Applicant must cause to have a document submitted directly to the Board from each agency listed, containing the applicant's name, date of issuance or denial, current status and whether or not any disciplinary actions are pending or have ever been taken;
- j. Whether applicant has ever been arrested, charged with, convicted of, or entered into a plea of no contest to a felony or a misdemeanor;
- k. Whether applicant has ever had a naturopathic medical license or certification, or any other health profession license or certification denied, suspended, rejected or revoked by any agency in any state, district or territory of the United States or another country;
- l. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. § 32-1501;
- m. Whether applicant, in lieu of disciplinary action, has entered into a consent agreement or stipulation with a licensing agency; in any state, district or territory of the United States or another country;
- n. Whether applicant currently has an open complaint or is involved in any open investigation in any agency or court of law, in any state, district or territory of the United States or another country;
- o. Whether applicant has ever had the authority to prescribe, dispense, or administer a natural substance, drug, or device limited, restricted, modified,

- denied, surrendered or revoked by a federal or state agency or court of law, in any state, district or territory of the United States or another country;
- p. Whether applicant has ever been found medically incompetent;
- q. Whether applicant has ever been a defendant in any malpractice matter that resulted in a settlement or judgment;
- r. Whether applicant has a medical condition, that in any way, impairs or limits applicant's ability to practice medicine, and;
- s. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background;
2. A complete and legible fingerprint card, including the DPS processing fee as specified on the application form;
3. A passport size photograph taken within 60 days prior to application submission that is signed on the back by the applicant;
4. The fees specified in R4-18-107; and
5. Proof of completion of 30 hours of CME for each year the license has been suspended or revoked. The CME is in addition to the 30 hours required each year for license renewal, must cover clinical application of naturopathic medical philosophy and pharmacology, and, be accredited by the Accreditation Council on Continuing Education, or approved by any of the programs listed in R4-18-205(B)(2);
- B. An applicant for reinstatement of a suspended or revoked certificate to dispense shall submit a complete renewal form, along with the fee specified in R4-18-107.
- C. An applicant who held a specialty certificate that was suspended or revoked with the license, may request reinstatement of the certificate on the application for reinstatement of the medical license.
- D. An applicant seeking licensure after the surrendered of a license or certificate must apply and meet the requirements as a new applicant.

## **ARTICLE 5. NATUROPATHIC CLINICAL TRAINING AND PRECEPTORSHIP TRAINING PROGRAM REQUIREMENTS**

**R4-18-501. Certificate to Engage in Clinical or Preceptorship Training**

- A. To obtain a certificate to engage in clinical or preceptorship training, an applicant shall submit to the Board, ~~an application packet that includes~~ 1. a completed application form provided by the Board, that allows the Board to determine if the applicant meets the requirements of A.R.S. § 32-1524. The application shall be verified, and include signed and dated by the applicant—the fee listed in R4-18-107;
- B. In addition to the requirements in subsection (A.), a naturopathic medical student who applies for a certificate to engage in clinical training shall comply with the requirements of A.R.S. § 32-1560, and, ~~a.~~ shall be attending an approved naturopathic medical school. ~~b.~~ Applicant must ~~;~~ arrange to have submitted directly to the Board, a letter from the chief medical officer of the medical school verifying, that the applicant will be entering clinical training, and the anticipated starting and completion dates. The Board may deny an application for any reason set forth in A.R.S. §32-1501(31), and , A.R.S. §32-1522 (A)(3) - (6):
- C. ~~Applicant must provide a legible fingerprint card, take and pass the Arizona naturopathic jurisprudence examination- the examination in Arizona naturopathic jurisprudence that is administered by the Board, with a minimum score of 75% ; ,~~ include with the application, a passport size photograph taken within 60 days prior to application submission, that is signed on the back by the applicant, provide a legible fingerprint card, including the DPS processing fee as specified on the application form;
- D. The application form for clinical training entry shall include;
1. Applicant's full name and any former names used by applicant;
  2. Applicant's place and date of birth;
  3. Applicant's Social Security number;
  4. Applicant's home and email address;
  5. Applicant's home and cell phone numbers;

6. The name and address of the approved naturopathic college applicant is attending; the name and address of clinical training program, the date of clinical entry and the date of completion of clinical entry;
7. The name of the Supervising Physician, and the name of the Chief Medical Officer of the Clinical Training program;
8. Whether applicant has ever been arrested, charged with, convicted of, or entered into a plea of no contest to a felony or a misdemeanor;
9. Whether applicant has ever had a naturopathic medical license or certification, or any other health profession license or certification denied, suspended, rejected or revoked by any agency in any state, district or territory of the United States or another country;
10. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. 32-1501;
11. Whether applicant, in lieu of disciplinary action, has entered into a consent agreement or stipulation with a licensing agency in any state, district or territory of the United States or another country;
12. Whether applicant currently has an open complaint or is involved in any open investigation in any agency or court of law, in any state, district or territory of the United States or another country;
13. Whether applicant has ever had the authority to prescribe, dispense, or administer a natural substance, drug, or device limited, restricted, modified, denied, surrendered or revoked by a federal or state agency or court of law, in any state, district or territory of the United States or another country;
14. Whether applicant has ever been found medically incompetent;
15. Whether applicant has ever been a defendant in any malpractice matter that resulted in a settlement or judgment;
16. Whether applicant has a medical condition, that in any way, impairs or limits applicant's ability to practice medicine;
17. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background; and

18. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, and copy of evidence.

- ~~C.~~ E. In addition to the requirements in subsection (A.), an applicant for a certificate to engage in a preceptorship training program shall comply with the requirements of A.R.S. § 32-1561 and arrange to ~~submit or~~ have submitted directly to the Board :
- ~~1. , an official transcript from the approved naturopathic medical school from which the applicant graduated; ;~~
  - ~~2. A Board approved verification form from the physician who will be responsible for the applicant's supervision and training; 3. ,~~
- F. ~~Applicant must provide a legible fingerprint card, take and pass the Arizona naturopathic jurisprudence examination~~ the examination in Arizona naturopathic jurisprudence that is administered by the Board with a minimum score of 75%; , include with the application, a passport size photograph taken within 60 days prior to application submission, that is signed on the back by the applicant, provide a legible fingerprint card, including the DPS processing fee as specified on the application form;
- G. The application form for preceptorship training shall include:
1. Applicant's full name and any former names used by applicant;
  2. Applicant's place and date of birth
  3. Applicant's Social Security number;
  4. Applicant's home and email address
  5. Applicant's home and cell phone numbers;
  - 6 The name, address, and medical license number of the Supervising Physician, designated Supervising Physician, if any, and Chief Medical Officer;
  7. Attestation signed by the Supervising Physician declaring they have read and understand A.R.S. § 32-1561, and R4-18-108, and agree to be the Supervising physician of record;
  8. Whether applicant has ever been arrested, charged with, convicted of, or entered into a plea of no contest to a felony or a misdemeanor;
  9. Whether applicant has ever had a naturopathic medical license or certification, or any other health profession license or certification denied, suspended, rejected

- or revoked by any agency in any state, district or territory of the United States or another country;
10. Whether applicant has ever been disciplined by any agency in any state, district or territory of the United States or another country, for any act of unprofessional conduct as defined in A.R.S. 32-1501;
11. Whether applicant, in lieu of disciplinary action by any agency, in any state, district or territory of the United States or another country, has entered into a consent agreement or stipulation with a licensing agency;
12. Whether applicant currently has an open complaint or is involved in any open investigation in any agency or court of law, in any state, district or territory of the United States or another country;
13. Whether applicant has ever had the authority to prescribe, dispense, or administer a natural substance, drug, or device limited, restricted, modified, denied, surrendered or revoked by a federal or state agency or court of law, in any state, district or territory of the United States or another country;
14. Whether applicant has ever been found medically incompetent;
15. Whether applicant has ever been a defendant in any malpractice matter that resulted in a settlement or judgment;
16. Whether applicant has a medical condition, that in any way, impairs or limits applicant's ability to practice medicine;
17. A detailed explanation and supporting documentation for each affirmative answer to questions regarding the applicant's background; and
18. A completed Arizona Statement of Citizenship and Alien Status for State Public Benefits, and copy of evidence.

**R4-18-502. Annual Renewal of a Certificate to Engage in Clinical or Preceptorship Training**

A holder of a certificate to engage in a ~~clinical or preceptorship~~ training shall renew the certification by submitting before the ~~anniversary~~ expiration date of the certificate ~~the~~ appropriate fee and; ~~1. A completed form provided by the Board that allows the Board to~~

~~determine whether the holder of the certificate continues to meet the requirements of A.R.S. Title 32 Chapter 14 and R4-18-501; and 2. A letter from the chief medical officer stating that the applicant is in good standing in the training program.~~ , a completed clinical training renewal form. A holder of a certificate to engage in preceptorship training shall renew the certification on or before July 1, by submitting a completed preceptorship renewal form.

1. Applicant must submit a completed application form provided by the Board, that for renewal of certification, that allows the Board to determine whether the holder of the certificate continues to meet the requirements of A.R.S. Title 32 chapter 14. The form must be signed, dated, and shall include:
  - a. Applicant's full name and any former names used by applicant; and
  - b. Applicant's certificate number, and original issue date;
2. ~~A. letter from the chief medical officer stating that the applicant is in good standing in the training program.~~ The fees specified in R4-18-107.

## **ARTICLE 9. CERTIFICATE TO DISPENSE**

### **R4-18-904. Dispensing; Intravenous Nutrients**

- A. To prevent toxicity due to the excessive intake of a natural substance, drug, or device, before dispensing the natural substance, drug, or device to an individual, a certified physician shall:
  1. Conduct a physical examination of the individual,
  2. Conduct laboratory tests as necessary that determine the potential for toxicity of the individual, and
  3. Document the results of the physical examination and laboratory tests in the individual's medical record.
- B. For the purposes of A.R.S. § 32-1504(A)(8), a substance is considered a nutrient suitable for intravenous administration if it complies with A.R.S. § 32-1501 (15)(iii).