

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 1 GENERAL PROVISIONS

16.2.1.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[7-1-96; 16.2.1.1 NMAC - Rn, 16 NMAC 2.1.1, 8-13-01]

16.2.1.2 SCOPE: All licensed doctors of oriental medicine, applicants, temporary licensees, applicants for temporary licensure, doctors of oriental medicine certified for expanded practice and applicants for certification, educational courses, externs, auricular detoxification specialists, educational programs and applicants for approval of educational programs.
[7-1-96; 16.2.1.2 NMAC - Rn & A, 16 NMAC 2.1.2, 8-13-01; A, 2-15-05; A, 11-28-09]

16.2.1.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-1, 2, 3, 7, 8, 8.1, 14.1 and 9, NMSA 1978.
[7-1-96; 16.2.1.3 NMAC - Rn & A, 16 NMAC 2.1.3, 8-13-01]

16.2.1.4 DURATION: Permanent.
[7-1-96; 16.2.1.4 NMAC - Rn, 16 NMAC 2.1.4, 8-13-01]

16.2.1.5 EFFECTIVE DATE: July 1, 1996 unless a later date is cited at the end of a section or paragraph.
[7-1-96, A, 8-31-98; 16.2.1.5 NMAC - Rn, 16 NMAC 2.1.5, 8-13-01]

16.2.1.6 OBJECTIVE: This part provides definitions for terms used in the rules in addition to those definitions in the Act, lists the board's duties, clarifies what are not public records, provides for inspection of the board's public records, and provides for telephone conferences.
[7-1-96; 16.2.1.6 NMAC - Rn & A, 16 NMAC 2.1.6, 8-13-01]

16.2.1.7 DEFINITIONS:

A. The definitions in Subsection B of 16.2.1.7 NMAC are in addition to those in the act.

B. The following definitions apply to the rules and the act.

(1) "Act" is the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-1 through 61-14A-22 NMSA 1978.

(2) "Animal acupuncture" is acupuncture performed on any animal other than man. Animal acupuncture is authorized under the supervision of a doctor of veterinary medicine licensed in New Mexico and only under the guidelines of the rules of the New Mexico Veterinary Practice Act (61-14-1. to 61-14-20.) and the rules of the New Mexico board of veterinary medicine. (16.25.9.15 NMAC)

(3) "Applicant" is a person who has submitted to the board an application for licensure as a doctor of oriental medicine.

(4) "Applicant for temporary licensure" is a person who has submitted to the board an application for temporary licensure as a doctor of oriental medicine.

(5) "Auricular detoxification specialist supervisor" is a doctor of oriental medicine registered with the board under the provisions of 16.2.16.18 NMAC.

(6) "Auricular detoxification specialist training program" is a training program approved by the board under the provisions of 16.2.16.26 NMAC to train certified auricular detoxification specialists and auricular detoxification supervisors.

(7) "Auricular detoxification specialist training program trainer" is a member of the staff of an auricular detoxification specialist training program who, though not necessarily licensed or certified by the state, shall be deemed to be a certified auricular detoxification specialist only for the purposes of and only for the duration of the auricular detoxification specialist training program.

(8) "Authorized substances" are the specific substances defined in the four certification in 16.2.20 NMAC that are authorized according to 61-14A-8.1 of the act for prescription, administration, compounding and dispensing by a doctor of oriental medicine certified for a specific category of expanded practice as defined in 16.2.19 NMAC.

(9) "Bioidentical hormones" means compounds, or salt forms of those compounds, that have exactly the same chemical and molecular structure as hormones that are produced in the human body.

- (10) "Biomedical diagnosis" is a diagnosis of a person's medical status based on the commonly agreed upon guidelines of conventional biomedicine as classified in the most current edition or revision of the international classification of diseases, ninth revision, clinical modification (ICD-9-CM).
- (11) "Biomedicine" is the application of the principles of the natural sciences to clinical medicine.
- (12) "Certified auricular detoxification specialist" is a person certified by the board under the provisions of 16.2.16.10 NMAC to perform auricular detoxification techniques, including acupuncture, only on the ears, only in the context of an established treatment program and only under the supervision of an auricular detoxification supervisor registered with the board. The title may be abbreviated as CADS.
- (13) "Chief officer" is the board's chairperson or his or her designee serving to administer the pre-hearing procedural matters of disciplinary proceedings.
- (14) "Clinical skills examination" is a board approved, validated, objective practical examination that demonstrates the applicants entry level knowledge of and competency and skill in the application of the diagnostic and treatment techniques of acupuncture and oriental medicine and of biomedicine.
- (15) "Clinical experience" is the practice of acupuncture and oriental medicine as defined in the act, after initial licensure, certification, registration or legal recognition in any jurisdiction to practice acupuncture and oriental medicine. A year of clinical experience shall consist of not less than 500 patient hours of licensed acupuncture and oriental medical practice within a calendar year, seeing at least 25 different patients within that year. One patient hour is defined as one clock hour spent in the practice of oriental medicine with patients.
- (16) "Complainant" is the complaining party.
- (17) "Complaint committee" is a board committee composed of the complaint committee chairperson and the complaint manager.
- (18) "Complaint committee chairperson" is a member of the board appointed by the board's chairperson.
- (19) "Complaint manager" is the board's administrator or any member of the board appointed by the board's chairperson.
- (20) "Department" is the state of New Mexico regulation and licensing department.
- (21) "Doctor of oriental medicine" is a physician licensed to practice acupuncture and oriental medicine pursuant to the act and as such has responsibility for his or her patient as a primary care physician or independent specialty care physician.
- (22) "Educational Course" is a comprehensive foundation of studies, approved by the board leading to demonstration of entry level competence in the specified knowledge and skills required for the four respective certifications in expanded practice. An educational course is not an educational program as this term is used in the act and the rules and as defined in 16.2.1 NMAC.
- (23) "Educational program" is a board approved complete formal program that has the goal of educating a person to be qualified for licensure as a doctor of oriental medicine in New Mexico, is at least four (4) academic years and meets the requirements of Section 61-14A-14 of the act and 16.2.7 NMAC.
- (24) "Expanded practice" is authorized by Section 61-14-8.1 of the act and is granted to a doctor of oriental medicine who is certified by the board after fulfilling the requirements, in addition to those necessary for licensure, defined in 16.2.19 NMAC. Expanded practice is in addition to the prescriptive authority granted all licensed doctors of oriental medicine as defined in Section 61-14A-3.G.(2) of the act.
- (25) "Extern" is a current applicant undergoing supervised clinical training by an externship supervisor, and who has satisfied the application requirements for extern certification and who has received an extern certification issued by the board pursuant to 16.2.14 NMAC.
- (26) "Externship" is the limited practice of oriental medicine in New Mexico by an extern supervised by an externship supervisor pursuant to 16.2.14 NMAC.
- (27) "Externship supervisor" is a doctor of oriental medicine who has at least five years clinical experience, maintains a clinical facility and maintains appropriate professional and facility insurance, and who has satisfied the board's application requirements for an externship supervisor and has received an externship supervisor registration issued by the board pursuant to 16.2.14 NMAC.
- (28) "Good cause" is the inability to comply because of serious accident, injury or illness, or the inability to comply because of the existence of an unforeseen, extraordinary circumstance beyond the control of the person asserting good cause that would result in undue hardship. The person asserting good cause shall have the burden to demonstrate that good cause exists.
- (29) "Inactive licensee" means a licensee in good standing whose license is placed on inactive status by the board and is therefore considered an inactive license in compliance with 16.2.15 NMAC.
- (30) "Licensee" is a doctor of oriental medicine licensed pursuant to the act.

(31) "Licensing candidate" is an applicant whose initial application for licensure as a doctor of oriental medicine has been approved by the board.

(32) "Licensure by endorsement" is a licensing procedure for the experienced practitioner who completed his initial education in acupuncture and oriental medicine prior to the establishment of current educational standards and who has demonstrated his or her competency through a combination of education, examination, authorized legal practice and clinical experience as defined in 16.2.17 NMAC. Completion of the licensure by endorsement process results in full licensure as a doctor of oriental medicine.

(33) "Limited temporary license" is a license issued under the provisions of 16.2.5.12 NMAC for the exclusive purpose of teaching a single complete course in acupuncture and oriental medicine and assisting in the implementation of new techniques in acupuncture and oriental medicine including the study of such techniques by licensed, registered, certified or legally recognized healthcare practitioners from jurisdictions other than New Mexico. A limited temporary license shall be required for any person who demonstrates, practices or performs diagnostic and treatment techniques on another person as part of teaching or assisting in the implementation of new techniques, if they are not a licensee or temporary licensee. Limited temporary licenses shall not be issued to teachers for the purpose of teaching full semester courses that are part of an approved educational program.

(34) "Live cell products" are living cells from glandular tissues and other tissues.

(35) "Natural substances" are substances that exist in or are produced by nature and have not been substantially transformed in character or use.

(36) "NCA" is a notice of contemplated action.

(37) "Office" is the physical facility used for the practice of acupuncture and oriental medicine and auricular detoxification.

(38) "Oxidative medicine" is the understanding and evaluation of the oxidation and reduction biochemical functions of the body and the prescription or administration of substances, and the use of devices and therapies to improve the body's oxidation and reduction function and health.

(39) "Protomorphogens" are extracts of glandular tissues.

(40) "Respondent" is the subject of the complaint.

(41) "Rules" are the rules, promulgated pursuant to the act, governing the implementation and administration of the act as set forth in 16.2 NMAC.

(42) "Supervised clinical observation" is the observation of acupuncture and oriental medical practice, in actual treatment situations under appropriate supervision.

(43) "Supervised clinical practice" is the application of acupuncture and oriental medical practice, in actual treatment situations under appropriate supervision.

(44) "Supervision" is the coordination, direction and continued evaluation at first hand of the student in training or engaged in obtaining clinical practice and shall be provided by a qualified instructor or tutor as set forth in 16.2.7 NMAC. No more than four (4) students shall be under supervision for supervised clinical practice and no more than four students shall be under supervision for supervised clinical observation by a qualified instructor at any time.

(45) "Temporary licensee" is a doctor of oriental medicine who holds a temporary license pursuant to the act, Section 61-14-12 NMSA 1978 and 16.2.5 NMAC.

(46) "Treatment program" is an integrated program that may include medical and counseling services for disease prevention, harm reduction or the treatment or prevention of alcoholism, substance abuse or chemical dependency that is located at a fixed location or in a mobile unit and approved by the board under the provisions of 16.2.16.28 NMAC.

[11-3-81...7-1-96; N, 8-31-98; A, 2-17-00; 16.2.1.7 NMAC - Rn & A, 16 NMAC 2.1.7, 8-13-01; A, 4-4-02; A, 3-2-03; A, 02-15-05; A, 9-25-06; A, 11-28-09]

16.2.1.8 BOARD DUTIES: In addition to its duties described in the act, the board shall:

- A. Keep a file of all approved educational programs.
- B. Issue certificates of approval of educational programs.
- C. Delegate its ministerial duties if it so chooses.
- D. Notify the governor when any board member has missed three consecutive meetings.
- E. Elect a chairperson and a vice-chairperson at the first board meeting after January first each year.
- F. The board shall perform such other duties and shall exercise such other powers as may be conferred upon it by statute, or as may be reasonably implied from such statutory powers and duties and as may be reasonably necessary in the performance of its responsibilities under the act.

[7-15-82...7-1-96; 16.2.1.8 NMAC - Rn & A, 16 NMAC 2.1.8, 8-13-01]

16.2.1.9 PUBLIC RECORDS: All records kept by the board shall be available for public inspection pursuant to the New Mexico Inspection of Public Records Act, NMSA 1978, Section 14-2-1, et seq., except as provided herein.

A. During the course of the processing and investigation ~~[or processing]~~ of a complaint, and before the vote of the board as to whether to dismiss the complaint or to issue a notice of contemplated action as provided in the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and in order to preserve the integrity of the investigation of the complaint, records and documents that reveal confidential sources, methods, information or licensees accused, but not charged yet with a violation of the act, shall be confidential and shall not be subject to public inspection. Such records shall include evidence in any form received or compiled in connection with any such investigation of the complaint or of the licensee by or on behalf of the board by any investigating agent or agency.

B. Upon the completion of the processing and investigation ~~[or processing]~~ of the complaint, and upon the decision of the board to dismiss the complaint or to issue a notice of contemplated action, the confidentiality privilege conferred by ~~[Subsection A of]~~ 16.2.1.9 A NMAC shall dissolve, and the records, documents or other evidence pertaining to the complaint and to the investigation of the complaint shall be available for public inspection.

C. All tests and test questions by which applicants are tested shall not be available to public inspection, as there is a countervailing public policy requiring that such records remain confidential in order to ensure the integrity of a licensing exam intended to protect the public health, safety and welfare from incompetent practitioners.

D. The board or its administrator may charge a fee not to exceed one dollar per page for documents 11 inches by 17 inches or smaller in size for copying public records.
[3-19-91...7-1-96; 16.2.1.9 NMAC - Rn & A, 16 NMAC 2.1.9, 8-13-01; A, 3-2-03; A, 11-28-09; A, XX-XX-XX]

16.2.1.10 TELEPHONE CONFERENCES: Pursuant to the provisions of the Open Meetings Act, Section 10-15-1.C, NMSA 1978, as amended, board members may participate in a meeting of the board by means of a conference telephone or similar communications equipment when it is otherwise difficult or impossible for the member to attend the meeting in person, provided that each board member participating by conference telephone can be identified when speaking, all participants are able to hear each other at the same time and members of the public attending the meeting must be able to hear any member of the board who speaks during the meeting. Participation of a board member by such means shall constitute presence in person at the meeting.
[7-1-96; 16.2.1.10 NMAC - Rn, 16 NMAC 2.1.10, 8-13-01]

16.2.1.11 DISASTER OR EMERGENCY PROVISION: Doctors of oriental medicine, educational programs and auricular detoxification specialists currently licensed and in good standing or otherwise meeting the requirements for New Mexico licensure in a state which a federal disaster has been declared may apply for licensure in New Mexico under 16.2.1.11 NMAC during the four months following the declared disaster. The application for emergency provisional licensure shall be made to the board and shall include:

A. an application under this provision shall be made to the board that is complete and in English on a form provided by the board that shall include the applicant's name, address, date of birth and social security number accompanied by proof of identity, which may include a copy of drivers license, passport or other photo identification issued by a governmental entity; and the applicants signature on the affidavit made part of the application form;

B. an affidavit attesting to the consequences suffered by the applicant as a result of the federal disaster;

C. evidence of completion of requirements specified in 16.2.3, 16.2.4, 16.2.7, 16.2.10, and 16.2.16 NMAC; if the applicant is unable to obtain documentation from the federal declared disaster area or as a result of the declared federal disaster the board may accept other documentation in lieu of the forms required under 16.2.3, 16.2.4, 16.2.7, 16.2.10, and 16.2.16 NMAC; the board reserves the right to request additional documentation, including but not limited to, recommendation forms and work experience verification forms prior to approving licensure;

D. exceptions may be made for good cause;

E. an affidavit certifying that all the documents submitted with the application are true and accurate or are faithful copies of the original;

F. nothing in this section shall constitute a waiver of the requirements for licensure contained in 16.2.3, 16.2.4, 16.2.7, 16.2.10, and 16.2.16 NMAC; and

H. the applicant is responsible for reading, understanding and complying with the state of New Mexico laws and rules regarding this application as well as the practice of acupuncture and oriental medicine. [16.2.1.11 NMAC - N, 9-25-06; A, 11-28-09]

History of 16.2.1 NMAC:

Pre-NMAC History:

AB 81-1, Regulations Governing Acupuncture Practitioners, 10-5-81
AB 82-1, Regulations Governing Acupuncture Practitioners, 6-16-82
AB 84-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, 3-13-84
BCD 87-1, Emergency Regulations Governing Acupuncture Practitioners, Tutors and Institutes, 10-30-87
ACU 88-1 Regulations Governing Acupuncture Practitioners, Tutors and Institutes, 3-13-89
ACU 91-1, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Definitions, 2-18-91
Rule 1, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Authority and Purpose, 8-28-92
Rule 2, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Definitions, 8-28-92
ACU Rule 91-3, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Administrative Requirements, 2-18-91
Rule 3, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Administrative Requirements, 1-26-93
ACU Rule 91-13, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Board Duties, 2-18-91
Rule 13, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Board Duties, 8-28-92
ACU Rule 91-15, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Pertaining to Open Meeting, Public Records, and Confidentiality, 2-18-91
Rule 15, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Pertaining to Open Meetings, Public Records and Confidentiality, 8-28-92

History of Repealed Material: [Reserved]

Other History:

Material in this part was derived from that previously filed with the commission of public records - state records center and archives as: 16 NMAC 2.1, Acupuncture and Oriental Medicine - General Provisions, filed 06-14-96 -- renumbered, reformatted and amended to 16.2.1 NMAC, effective 08-13-2001.

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 3 APPLICATION FOR LICENSURE

16.2.3.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine
[7-1-96; 16.2.3.1 NMAC - Rn, 16 NMAC 2.3.1, 5-20-00]

16.2.3.2 SCOPE: All applicants for licensure as doctors of oriental medicine.
[7-1-96; 16.2.3.2 NMAC - Rn, 16 NMAC 2.3.2, 5-20-00]

16.2.3.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-4, 6, 8, 9 and 10, NMSA 1978.
[7-1-96; 8-31-98; 16.2.3.3 NMAC - Rn, 16 NMAC 2.3.3, 5-20-00]

16.2.3.4 DURATION: Permanent.
[7-1-96; 16.2.3.4 NMAC - Rn, 16 NMAC 2.3.4, 5-20-00]

16.2.3.5 EFFECTIVE DATE: July 1, 1996, unless a later date is cited at the end of a section.
[7-1-96; 4-1-97; 16.2.3.5 NMAC - Rn, 16 NMAC 2.3.5, 5-20-00]

16.2.3.6 OBJECTIVE: This part lists the requirements that an applicant must fulfill in order to apply for licensure as a doctor of oriental medicine.
[7-1-96; 16.2.3.6 NMAC - Rn & A, 16 NMAC 2.3.6, 5-20-00; A, 7-27-01]

16.2.3.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC (Section 7 of Part 1 of the rules).
[7-1-96; 16.2.3.7 NMAC - Rn, 16 NMAC 2.3.7, 5-20-00; A, 02-15-05]

16.2.3.8 GENERAL REQUIREMENTS:

A. Any applicant who has been subject to any action or proceeding comprehended by Subsection A of 16.2.3.8 NMAC (Part 3 of the Rules) may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the provisions of NMSA 1978, Section 61-14A-17; and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA 1978, Section 28-2-1, et seq.

B. Any applicant who provides the board with false information or makes a false statement to the board may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq.
[7-1-96, 8-31-98; 16.2.3.8 NMAC - Rn, 16 NMAC 2.3.8, 5-20-00; A, 7-27-01; A, 3-2-03]

16.2.3.9 EDUCATIONAL PROGRAM REQUIREMENTS: Every applicant shall provide satisfactory proof that he completed a board approved educational program as defined in 61-14A-14 of the act and 16.2.7 NMAC. If the educational program is no longer in existence, or if the applicant's records are not available for good cause, the applicant shall submit an affidavit so stating and shall identify the educational program, and shall provide the address, dates of enrollment, and curriculum completed, along with such other information and documents as the board shall deem necessary. The board, in its sole and sound discretion, may accept or reject as adequate and sufficient such evidence presented in lieu of the records otherwise required.
[11-3-81...7-1-96; 8-31-98; 5-15-99; 16.2.3.9 NMAC - Rn, 16 NMAC 2.3.9, 5-20-00; A, 7-27-01; A, 02-15-05; A, 11-28-09]

16.2.3.10 INITIAL LICENSURE APPLICATION: Upon approval of an application for licensure that fulfills the requirements listed below, the board shall issue a license that will be valid until July 31 following the initial licensure[~~;~~], except licenses initially issued after May 1 will not expire until July 31 of the next renewal period as defined in 16.2.8.9 NMAC. The application requirements for a license shall be receipt of the following by the board:

A. the fee for application for licensure specified in 16.2.10 NMAC;

1 B. an application for licensure that is complete and in English on a form provided by the board that
2 shall include the applicant's name, address, date of birth and social security number, if available;

3 C. two passport-type photographs of the applicant taken not more than six months prior to the
4 submission of the application;

5 D. an affidavit as provided on the "initial licensure application" as to whether the applicant:
6 (1) has been subject to any disciplinary action in any jurisdiction related to the practice of
7 acupuncture and oriental medicine, or related to any other profession including other health care professions for
8 which the applicant is licensed, certified, registered or legally recognized to practice including resignation from
9 practice, withdrawal or surrender of applicants license, certificate or registration during the pendency of disciplinary
10 proceedings or investigation for potential disciplinary proceedings;

11 (2) has been a party to litigation in any jurisdiction related to the applicants practice of acupuncture
12 and oriental medicine, or related to any other profession including other health care professions for which the
13 applicant is licensed, certified, registered or legally recognized to practice;

14 (3) has been convicted of a felony in any jurisdiction, including any finding of guilt by a court or
15 jury, or any plea of guilty, or any plea of nolo contendere or no contest, or plea or disposition of conditional
16 discharge, and including any such proceeding in which a sentence was imposed, suspended or deferred;

17 (4) is in arrears on a court-ordered child support payment; or
18 (5) has violated any provision of the act or the rules;

19 E. an official license history, which is a certificate from each jurisdiction stating the disciplinary
20 record of the applicant, from each jurisdiction where the applicant has been licensed, certified, registered or legally
21 recognized to practice any profession, including health care professions, in any jurisdiction, pursuant to any
22 authority other than the New Mexico Acupuncture and Oriental Medicine Practice Act;

23 F. an affidavit as provided on the "initial licensure application" stating that the applicant understands
24 that:
25 (1) an applicant who has been subject to any action or proceeding comprehended by Subsection D of
26 16.2.3.10 NMAC may be subject to disciplinary action at any time, including denial, suspension or revocation of
27 licensure, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17; and subject to the Uniform
28 Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA
29 1978, Section 28-2-1, et seq.; and
30 (2) an applicant who provides the board with false information or makes a false statement to the
31 board may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the
32 provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section 61-1-
33 1, et seq.;

34 G. an affidavit as provided on the "initial licensure application" stating that the applicant understands
35 that:
36 (1) the applicant is responsible for reading, understanding and complying with the state of New
37 Mexico laws and rules regarding this application as well as the practice of acupuncture and oriental medicine;
38 (2) the license must be renewed annually by July 31; and
39 (3) the applicant must notify the board within 10 days if the applicant's address changes;

40 H. a copy of the applicant's certificate or diploma from an educational program evidencing
41 completion of the required program; this copy shall include on it an affidavit certifying that it is a true copy of the
42 original;

43 I. an official copy of the applicant's transcript that shall be sent directly to the board in a sealed
44 envelope by the educational program from which the applicant received the certificate or diploma, and that shall
45 verify the applicant's satisfactory completion of the required academic and clinical education and that shall
46 designate the completed subjects and the hours of study completed in each subject; this copy of the transcript shall
47 remain in the closed envelope secured with the official seal of the educational program and shall be sent by the
48 applicant to the board along with the applicant's application for licensure; and

49 J. an accurate translation in English of all documents submitted in a foreign language; each
50 translated document shall bear the affidavit of the translator certifying that he or she is competent in both the
51 language of the document and the English language and that the translation is a true and faithful translation of the
52 foreign language original; each translated document shall also bear the affidavit of the applicant certifying that the
53 translation is a true and faithful translation of the original; each affidavit shall be signed before a notary public; the
54 translation of any document relevant to an application shall be at the expense of the applicant.

55 [11-3-81...7-1-96; 8-31-98; 5-15-99, 12-1-99; 16.2.3.13 NMAC - Rn & A, 16 NMAC 2.3.13, 5-20-00; 16.2.3.10
56 NMAC - Rn, 16.2.3.13 NMAC, 7-27-01; A, 7-27-01; A, 3-2-03; A, 02-15-05; A, 11-28-09; A, XX-XX-XX]

16.2.3.11 EXAMINATION REQUIREMENTS: The examination requirements specified in 16.2.4 NMAC shall be received at the board office within 12 months of the receipt of the initial application at the board office~~[-]~~ , with the exception of the national certification commission for acupuncture and oriental medicine (NCCAOM) score requirements which need to be submitted to the board office within 24 months of the initial application.

[11-3-81...7-1-96; 8-31-98; 5-15-99, 12-1-99; 16.2.3.13 NMAC - Rn & A, 16 NMAC 2.3.13, 5-20-00; 16.2.3.11 NMAC - Rn, 16.2.3.13 NMAC, 7-27-01; A, 7-27-01; A, 02-15-05; A, 11-28-09]

16.2.3.12 DOCUMENTS IN A FOREIGN LANGUAGE: All documents submitted in a foreign language must be accompanied by an accurate translation in English. Each translated document shall bear the affidavit of the translator certifying that he or she is competent in both the language of the document and the English language and that the translation is a true and faithful translation of the foreign language original. Each translated document shall also bear the affidavit of the applicant certifying that the translation is a true and faithful translation of the original. Each affidavit shall be signed before a notary public. The translation of any document relevant to an applicant's application shall be at the expense of the applicant.

[11-3-81...7-1-96; 16.2.3.14 NMAC - Rn, 16 NMAC 2.3.14, 5-20-00; 16.2.3.12 NMAC - Rn, 16.2.3.14 NMAC, 7-27-01; A, 02-15-05]

16.2.3.13 SUFFICIENCY OF DOCUMENT: The board shall determine the sufficiency of the documentation that supports the application for licensure. The board may, at its discretion, request further proof of qualifications or require a personal interview with any applicant to establish his or her qualifications. If requested by the board, all further proof of qualifications shall be received at the board office at least 35 days before the clinical skills examination date. Any required personal interview will be scheduled as determined by the board.

[11-3-81...7-1-96; 2-17-00; 16.2.3.15 NMAC - Rn & A, 16 NMAC 2.3.15, 5-20-00; 16.2.3.13 NMAC - Rn, 16.2.3.15 NMAC, 7-27-01; A, 7-27-01; A, 3-2-03; A, 11-28-09]

16.2.3.14 DEADLINE FOR COMPLETING ALL REQUIREMENTS FOR LICENSURE: ~~[A#]~~ ~~[#]~~ Documentation required for licensure shall be received at the board office no later than 12 months after the initial application is received at the board office~~[-]~~ , with the exception of the national certification commission for acupuncture and oriental medicine (NCCAOM) score requirements which need to be submitted to the board office within 24 months of the initial application.

[11-3-81...7-1-96; 4-1-97, 5-15-99; 16.2.3.16 NMAC - Rn & A, 16 NMAC 2.3.16, 5-20-00; 16.2.3.14 NMAC - Rn, 16.2.3.16 NMAC, 7-27-01; A, 7-27-01; A, 11-28-09]

16.2.3.15 NOTIFICATION OF LICENSURE: The applicant shall be notified of approval or denial of his completed application requirements including examination requirements by mail postmarked no more than 21 days from the board's receipt of all required documentation. The board shall issue a license to all applicants who have met the requirements of 16.2.3 NMAC and 16.2.4 NMAC.

[11-3-81...7-1-96; 4-1-97, 5-15-99; 16.2.3.17 NMAC - Rn & A, 16 NMAC 2.3.17, 5-20-00; 16.2.3.15 NMAC - Rn, 16.2.3.17 NMAC, 7-27-01; A, 7-27-01; A, 11-28-09]

16.2.3.16 EXPIRATION AND ABANDONMENT OF APPLICATION: If all application requirements have not been met within 24 months of the initial application, the application will expire and will be deemed abandoned. Exceptions may be made, at the board's discretion, for good cause. If the application is abandoned and the applicant wants to reapply for licensure, the applicant shall be required to submit the completed current application form, pay the current application fee and satisfy the requirements for licensure then in effect at the time of the new application. The board shall notify the applicant of pending abandonment of the application for licensure by mail postmarked at least 60 days before the date of abandonment which is the expiration of the 24 month deadline for completing all requirements for licensure. The board shall notify the applicant of abandonment of the application by mail postmarked no more than 21 days after the date of abandonment.

[11-3-81...7-1-96; 2-17-00; 16.2.3.18 NMAC - Rn & A, 16 NMAC 2.3.18, 5-20-00; 16.2.3.16 NMAC - Rn, 16.2.3.18 NMAC, 7-27-01; A, 7-27-01; A, 02-15-05; A, 11-28-09]

History of 16.2.3 NMAC:

Pre-NMAC History: The material in this part was derived from that previously filed with the commission of public records - state records center and archives as:
AB 81-1, Regulations Governing Acupuncture Practitioners, filed 10-5-81;
AB 82-1, Regulations Governing Acupuncture Practitioners, filed 6-16-82;
AB 84-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-84;
BCD 87-1, Emergency Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 10-30-87;
ACU 88-1 Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-89;
ACU Rule 91-5, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes Applications, filed 2-18-91;
Rule 5, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes, Application for Licensing, filed 1-26-93.

History of Repealed Material: 16.2.3.10 NMAC, 16.2.3.11 NMAC, and 16.2.3.12 NMAC (all filed 4-20-2000) repealed effective 7-27-01.

Other History:

Rule 5, Regulations Governing Acupuncture Practitioners, Tutors, and Institutes, Application for Licensing (filed 1-26-93) renumbered, reformatted and replaced by 16 NMAC 2.3, Application for Licensure, effective 07-01-96.
16 NMAC 2.3, Application for Licensure (filed 6-14-96) renumbered, reformatted, amended and replaced as 16.2.3 NMAC effective 5-20-00.

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 4 EXAMINATIONS

16.2.4.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine
[7-1-96; 16.2.4.1 NMAC -Rn, 16 NMAC 2.4.1, 5-20-00]

16.2.4.2 SCOPE: All applicants for licensure as doctors of oriental medicine.
[7-1-96; 16.2.4.2 NMAC - Rn, 16 NMAC 2.4.2, 5-20-00]

16.2.4.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-8, 9, 10(F) and 11, NMSA 1978.
[7-1-96; 16.2.4.3 NMAC - Rn, 16 NMAC 2.4.3, 5-20-00]

16.2.4.4 DURATION: Permanent.
[7-1-96; 16.2.4.4 NMAC - Rn, 16 NMAC 2.4.4, 5-20-00]

16.2.4.5 EFFECTIVE DATE: July 1, 1996, unless a later date is cited at the end of a section.
[7-1-96, 4-1-97; 16.2.4.5 NMAC - Rn & A, 16 NMAC 2.4.5, 5-20-00]

16.2.4.6 OBJECTIVE: This part clarifies the contents, language, number and type of the examinations for licensure, the requirements for issuance of a license, the frequency of examination administration and re-examination requirements in the event of a failing score.
[7-1-96; 16.2.4.6 NMAC - Rn, 16 NMAC 2.4.6, 5-20-00; A, 7-26-01]

16.2.4.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC (Section 7 of Part 1 of the rules).
[7-1-96; 16.2.4.7 NMAC - Rn, 16 NMAC 2.4.7, 5-20-00; A, 02-15-05]

16.2.4.8 APPROVED EXAMINATIONS: The board approved examinations shall consist of a written examination portion and a practical examination portion.

A. The written examinations approved by the board shall be:

- (1) the national certification commission for acupuncture and oriental medicine foundations of oriental medicine module;
- (2) the national certification commission for acupuncture and oriental medicine acupuncture module;
- (3) the national certification commission for acupuncture and oriental medicine Chinese herbology module;
- (4) the national certification commission for acupuncture and oriental medicine biomedicine module;
- (5) the national certification commission for acupuncture and oriental medicine approved clean needle technique course; and
- (6) the board approved and board administered jurisprudence examination covering the act and the rules.

B. The practical examinations approved by the board shall be:

- (1) the national certification commission for acupuncture and oriental medicine point location module; and
- (2) the clinical skills examination; the clinical skills examination includes examination in acupuncture, herbal medicine and biomedicine competencies.

C. The board may adopt such other examinations as may be necessary for psychometric evaluation of its approved examinations.
[11-3-81...7-1-96; 4-1-97, 8-31-98, 5-15-99, 7-3-99; 16.2.4.8 NMAC - Rn & A, 16 NMAC 2.4.8, 5-20-00; A, 7-26-01; A, 02-15-05; A, 11-28-09]

16.2.4.9 EXAMINATION LANGUAGE: All examinations required by the board shall be given in English.
[11-3-81...7-1-96; 16.2.4.9 NMAC - Rn, 16 NMAC 2.4.9, 5-20-00; A, 7-26-01]

16.2.4.10 EXAMINATION REQUIREMENTS FOR LICENSURE: The following shall be the examination requirements for licensure. All fees for nationally recognized examinations shall be paid by the applicant and are not included in fees charged by the board.

A. Achievement of a passing score as determined by the national certification commission for acupuncture and oriental medicine (NCCAOM) on each of the following:

- (1) the NCCAOM foundations of oriental medicine module;
- (2) the NCCAOM acupuncture module;
- (3) the NCCAOM Chinese herbology module;
- (4) the NCCAOM biomedicine module; and
- (5) the NCCAOM point location module.

B. Achievement of a passing score of at least 75 percent on the clinical skills examination. To determine a passing score when the applicant is examined by more than one examiner, if the applicant is examined by two examiners, the applicant must receive a score of at least 75 percent after both scores are averaged and if the applicant is examined by three examiners, the applicant must receive a score of at least 75 percent from a majority of the examiners.

C. Successful completion of the national certification commission for acupuncture and oriental medicine approved clean needle technique course.

D. Achievement of a passing score of not less than 90 percent on the board approved and board administered jurisprudence examination covering the act and the rules.

E. Applicants who completed the national certification commission for acupuncture and oriental medicine (NCCAOM) examinations in acupuncture and Chinese herbology prior to June 2004 are not required to pass the NCCAOM foundations of oriental medicine module.

[11-3-81...7-1-96; 4-1-97, 8-31-98, 5-15-99; 16.2.4.10 NMAC - Rn, 16 NMAC 2.4.10, 5-20-00; A, 7-26-01; A, 02-15-05; A, 11-28-09]

16.2.4.11 CLINICAL SKILLS EXAMINATION FREQUENCY AND DEADLINES: The board shall hold a clinical skills examination at least once each year provided that applications for licensure are pending. The initial application specified in 16.2.3.11 NMAC shall be received at the board office at least 60 calendar days before the next scheduled clinical skills examination date. The board shall send a written response to the applicant informing the applicant of the application's completeness or needed documentation postmarked at least 45 calendar days before the next scheduled clinical skills examination date. All documentation required to complete the initial application for licensure shall be received at the board office at least 35 calendar days before the next scheduled clinical skills examination date. If the application requirements are received at the board office after a deadline, the application will be held and not processed until the deadline schedule for the next subsequent clinical skills examination. The applicant shall be notified of approval or denial of his or her completed initial application for licensure specified in 16.2.3.11, by mail postmarked at least 25 calendar days prior to the next scheduled clinical skills examination date.

[11-3-81...7-1-96; 16.2.4.11 NMAC - Rn, 16 NMAC 2.4.11, 5-20-00; A, 7-26-01; A, 03-02-03; A, 11-28-09]

16.2.4.12 CLINICAL SKILLS EXAMINATION CONFIRMATION: The board approved confirmation card, provided to the applicant, shall be mailed to the applicant upon receipt of the clinical skills examination fee specified in 16.2.10 NMAC. Confirmation of clinical exam passage will be valid for 24 months. After 24 months has passed, the applicant will have to retake the clinical exam and reapply as a new applicant.

[16.2.4.12 NMAC - N, 7-26-01; A, 03-02-03; A, 11-28-09]

16.2.4.13 PAYMENT OF CLINICAL SKILLS EXAMINATION FEE: The non refundable clinical skills examination fee specified in 16.2.10 NMAC [~~Part 10 of the rules~~] shall be paid by [~~certified~~] check or money order in U.S. funds and received in the board's office at least [~~15~~30] calendar days prior to the next scheduled clinical skills examination.

[11-3-81...7-1-96; 4-1-97; N, 8-31-98, 5-15-99, 2-17-00; 16.2.4.12 NMAC - Rn & A, 16 NMAC 2.4.12, 5-20-00; 16.2.4.13 NMAC - Rn, 16.2.4.12 NMAC, 7-26-01; A, 7-26-01; A, 03-02-03; A, 11-28-09; A, XX-XX-XX]

16.2.4.14 CLINICAL SKILLS EXAMINATION COMMITMENT: Upon receipt of the clinical skills examination fee for the next scheduled clinical skills examination, the applicant shall sit for the exam or forfeit the fee. The non-refundable clinical skills examination fee may be applied to a subsequent exam only as provided in Section 15 of 16.2.4 NMAC.

[11-3-81...7-1-96; 4-1-97; N, 8-31-98, 5-15-99, 2-17-00; 16.2.4.13 NMAC - Rn, 16 NMAC 2.4.13, 5-20-00; 16.2.4.14 NMAC - Rn, 16.2.4.13 NMAC, 7-26-01; A, 7-26-01; A, 03-02-03; A, 11-28-09]

16.2.4.15 FORFEITURE OF CLINICAL SKILLS EXAMINATION FEE: Once the clinical skills examination fee is received in the board office, the applicant shall take the next scheduled clinical skills examination or forfeit the clinical skills examination fee. Exceptions may be made, at the board's discretion, for good cause. If exceptions are made for good cause, the applicant shall be allowed to take the next subsequent scheduled clinical skills examination without paying an additional examination fee if the examination fee has been paid.
[3-23-93...7-1-96; 4-1-97; N, 8-31-98, 5-15-99, 2-17-00; 16.2.4.14 NMAC - Rn & A, 16 NMAC 2.4.14, 5-20-00; 16.2.4.15 NMAC - Rn, 16.2.4.14 NMAC, 7-26-01; A, 7-26-01; A, 03-02-03]

16.2.4.16 FAILING SCORE: In the event that an applicant fails to achieve a passing score on the clinical skills examination, he may apply as provided in 16.2.4.17 NMAC, and must pay the required fees.
[11-3-81...7-1-96; 4-1-97; Rn, 16 NMAC 2.4.12, 8-31-98, 5-15-99; 2-17-00; 16.2.4.15 NMAC - Rn, 16 NMAC 2.4.15, 5-20-00; 16.2.4.16 NMAC - Rn, 16.2.4.15 NMAC, 7-26-01; A, 7-26-01; A, 11-28-09]

16.2.4.17 RE-EXAMINATION: Applicants who have failed the clinical skills examination may apply to take the next subsequent clinical skills examination. The applicant shall notify the board of his commitment to take the next subsequent clinical skills examination with a written and signed letter received at the board office at least 60 days before the next clinical skills examination date. The applicant shall then be notified by the board of his acceptance to take the next clinical skills examination by mail postmarked at least 45 days prior to the next scheduled clinical skills examination date. The applicant shall pay the clinical skills examination fee in accordance with the provisions of 16.2.4.13 NMAC. If the applicant does not pass the next scheduled clinical skills examination, the applicant shall file a new application on the current form provided by the board, pay all the required fees, and satisfy all current requirements in effect at the time the application is made. If the applicant passes the exam, but does not complete license application within 24 months, the applicant will have to reapply as an initial applicant.
[7-1-96; 4-1-97; Rn, 16 NMAC 2.4.13, 8-31-98, 5-15-99, 2-17-00; 16.2.4.16 NMAC - Rn, 16 NMAC 2.4.16, 5-20-00; A, 10-22-00; 16.2.4.17 NMAC - Rn, 16.2.4.16 NMAC, 7-26-01; A, 7-26-01; A, 11-28-09]

16.2.4.18 EXAMINERS: The board shall select a group of doctors of oriental medicine to act as examiners for the clinical skills examination. These examiners shall have had five years of clinical experience at the time they are selected. The board or its designated agent shall train these examiners to judge applicants taking the board approved clinical skills examination in the application of the diagnostic and treatment techniques of acupuncture and oriental medicine.
[Rn, 16 NMAC 2.4.16, 8-31-98; A, 8-31-98; 16.2.4.19 NMAC - Rn, & A, 16 NMAC 2.4.19, 5-20-00; 16.2.4.18 NMAC - Rn, 16.2.4.19 NMAC, 7-26-01; A, 7-26-01; A, 11-28-09]

16.2.4.19 REVIEW OF CLINICAL SKILLS EXAMINATION SCORE: Applicants may request review of their clinical skills examination results by the board or its examination committee for significant procedural or computational error if such review request is received in writing at the board office within 30 calendar days of notification to the applicant of the clinical skills examination results.
[Rn, 16 NMAC 2.4.17, 8-31-98, 5-15-99; 16.2.4.20 NMAC - Rn & A, 16 NMAC 2.4.20, 5-20-00; 16.2.4.19 NMAC - Rn, 16.2.4.20 NMAC, 7-26-01; A, 7-26-01; A, 02-15-05; A, 11-28-09]

History of 16.2.4 NMAC:

Pre-NMAC History: The material in this part was derived from that previously filed with the commission of public records - state records center and archives as:
AB 81-1, Regulations Governing Acupuncture Practitioners, filed 10-5-81;
AB 82-1, Regulations Governing Acupuncture Practitioners, filed 6-16-82;
AB 84-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-84;
BCD 87-1, Emergency Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 10-30-87;
ACU 88-1 Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-89;
ACU Rule 91-6, Regulations Governing Acupuncture Practitioners, Tutors and Institutes Licensure by Examination, filed 2-18-91;

1 ACU 91-6, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, Licensure by Examination,
2 filed 12-18-91;
3 Rule 6, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, Licensing by Examination, filed 8-
4 28-92;
5 Rule 6, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, Licensing by Examination, filed 1-
6 26-93.

7
8 **History of Repealed Material:** 16.2.4.17 NMAC and 16.2.4.18 NMAC (both filed 04-20-00) repealed 7-26-01.
9

10 **Other History:**

11 Rule 6, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, Licensing by Examination (filed 1-
12 26-93) renumbered, reformatted and replaced by 16 NMAC 2.4, Examinations, effective 07-01-96.
13 16 NMAC 2.4, Examinations (filed 6-14-96) renumbered, reformatted, amended and replaced as 16.2.4 NMAC,
14 Examinations, effective 5-20-00.
15

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 8 LICENSE RENEWAL

16.2.8.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[16.2.8.1 NMAC - Rp, 16.2.8.1 NMAC, 02-15-05]

16.2.8.2 SCOPE: All licensed doctors of oriental medicine and all licensed doctors of oriental medicine certified for expanded practice.
[16.2.8.2 NMAC - Rp, 16.2.8.2 NMAC, 02-15-05; A, 11-28-09]

16.2.8.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-8, 8.1, 9 and 15, NMSA 1978.
[16.2.8.3 NMAC - Rp, 16.2.8.3 NMAC, 02-15-05 ; A, 11-28-09]

16.2.8.4 DURATION: Permanent.
[16.2.8.4 NMAC - Rp, 16.2.8.4 NMAC, 02-15-05]

16.2.8.5 EFFECTIVE DATE: February 15, 2005, unless a later date is cited at the end of a section.
[16.2.8.5 NMAC - Rp, 16.2.8.5 NMAC, 02-15-05]

16.2.8.6 OBJECTIVE: This part defines the requirements for renewal of licenses.
[16.2.8.6 NMAC - Rp, 16.2.8.6 NMAC, 02-15-05]

16.2.8.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC.
[16.2.8.7 NMAC - Rp, 16.2.8.7 NMAC, 02-15-05; A, 11-28-09]

16.2.8.8 LICENSE RENEWAL GENERAL REQUIREMENTS:

A. Except as provided otherwise in the act, or in these rules, or pursuant to other state law, including but not limited to the board's right to deny an application for renewal pursuant to Section 61-14A-17 NMSA 1978, and the Parental Responsibility Act, NMSA 1978, Section 40-5A-1, et seq., each licensed doctor of oriental medicine shall be granted renewal of his license for one year upon receipt and approval by the board or its designee of completion of the following requirements.

B. Any applicant for license renewal who is licensed, certified, registered or legally recognized to practice any profession, including health care professions, in any jurisdiction, pursuant to any authority other than the New Mexico Acupuncture and Oriental Medicine Practice Act, shall provide an affidavit regarding the disciplinary record of the applicant since last renewing his or her license with the board.

C. Any applicant for license renewal who has been subject to any action or proceeding comprehended by Subsection C of 16.2.8.10 NMAC, may be subject to disciplinary action at any time, including denial, suspension or revocation of licensure, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA 1978, Section 28-2-1, et seq.

D. Any applicant for license renewal who provides the board with false information or makes a false statement to the board may be subject to disciplinary action at any time, including denial, suspension or revocation of licensure, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq.

[16.2.8.8 NMAC - Rp, 16.2.8.8 NMAC, 02-15-05; A, 11-28-09]

16.2.8.9 LICENSING PERIOD: The licensing period shall run from August 1^[st] to the following July 31^[st]. A newly licensed doctor of oriental medicine shall be issued a license that shall be required to be renewed on July 31^[st], except licenses initially issued after May 1 will not expire until July 31 of the next renewal period.
[16.2.8.9 NMAC - Rp, 16.2.8.9 NMAC, 02-15-05; A, XX-XX-XX]

16.2.8.10 ANNUAL LICENSE RENEWAL APPLICATION: Upon approval of an application for license renewal that fulfills the requirements listed below, the board shall renew the license. The application requirements for license renewal shall be receipt of the following documentation by the board:

1 A. the license renewal fee specified in 16.2.10 NMAC paid by check or money order in U.S. funds,
2 or by credit card in U.S. funds if using the board's online renewal process;

3 B. an license renewal application that is complete and in English on a form provided by the board
4 that shall include the applicant's name, address, date of birth and social security number;

5 C. an affidavit as provided on the "annual license renewal form" as to whether the applicant since
6 receiving or last renewing (whichever is more recent) his license with the board:

7 (1) has been subject to any disciplinary action in any jurisdiction related to the practice of
8 acupuncture and oriental medicine, or related to any other profession including other health care professions for
9 which the applicant is licensed, certified, registered or legally recognized to practice including resignation from
10 practice, withdrawal or surrender of applicants license, certificate or registration during the pendency of disciplinary
11 proceedings or investigation for potential disciplinary proceedings;

12 (2) has been a party to litigation in any jurisdiction related to the applicants practice of acupuncture
13 and oriental medicine, or related to any other profession including other health care professions for which the
14 applicant is licensed, certified, registered or legally recognized to practice;

15 (3) has been convicted of a felony in any jurisdiction, including any finding of guilt by a court or
16 jury, or any plea of guilty, or any plea of nolo contendere or no contest, or plea or disposition of conditional
17 discharge, and including any such proceeding in which a sentence was imposed, suspended or deferred; or as
18 provided on the "annual license renewal form";

19 (4) is in arrears on a court-ordered child support payment; or

20 (5) has violated any provision of the act or the rules; and

21 D. an affidavit as provided on the "annual license renewal form" regarding the applicant's license
22 history since last renewing his license with the board stating the disciplinary record of the applicant, from each
23 jurisdiction where the applicant has been licensed, certified, registered or legally recognized to practice acupuncture
24 or oriental medicine or any other profession, including other health care professions, in any jurisdiction, pursuant to
25 any authority other than the New Mexico Acupuncture and Oriental Medicine Practice Act;

26 E. an affidavit as provided on the "annual license renewal form" stating that the applicant
27 understands that:

28 (1) an applicant who has been subject to any action or proceeding comprehended by Subsection C of
29 16.2.8.10 NMAC may be subject to disciplinary action at any time, including denial, suspension or revocation of
30 licensure, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17; and subject to the Uniform
31 Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA
32 1978, Section 28-2-1, et seq; and

33 (2) an applicant who provides the board with false information or makes a false statement to the
34 board may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the
35 provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section 61-1-
36 1, et seq.;

37 F. an affidavit as provided on the "annual license renewal form" stating that the applicant
38 understands that:

39 (1) the applicant is responsible for reading, understanding and complying with the state of New
40 Mexico laws and rules regarding this application as well as the practice of acupuncture and oriental medicine;

41 (2) the license must be renewed annually by July 31; and

42 (3) the applicant must notify the board within 10 days if the applicant's address changes; and

43 G. if the applicant renews using the board's online application process, the applicant shall check all
44 appropriate affidavit check boxes in the online application and the applicant's agreement to pay by credit card shall
45 be equivalent to the applicant's witnessed signature and notary's stamp and signature normally required by the
46 above affidavits;

47 H. an accurate translation in English of all documents submitted in a foreign language; each
48 translated document shall bear the affidavit of the translator certifying that he is competent in both the language of
49 the document and the English language and that the translation is a true and faithful translation of the foreign
50 language original; each translated document shall also bear the affidavit of the applicant certifying that the
51 translation is a true and faithful translation of the original; each affidavit shall be signed before a notary public; the
52 translation of any document relevant to an application shall be at the expense of the applicant; and

53 I. satisfactory proof as determined by the board of completion of any continuing education
54 requirements established by the board in 16.2.9.8 NMAC; doctors of oriental medicine certified for the expanded
55 practice shall submit satisfactory proof, as determined by the board, of completion of any expanded practice
56 continuing education requirements established by the board in 16.2.9.9 NMAC

[16.2.8.10 NMAC - Rp, 16.2.8.10 NMAC, 02-15-05; A, 11-28-09]

16.2.8.11 LATE LICENSE RENEWAL:

A. For a licensee whose late application to renew his or her license is received at the board office during the 60 day grace period provided by Section 61-14A-15 NMSA 1978, the license shall be renewed if the applicant for late license renewal completes the requirements of 16.2.8.10 NMAC and pays the fee for late license renewal specified in 16.2.10 NMAC.

~~[B. With regard to continuing education, if the required correct score on the open book jurisprudence examination required by Subsection D of 16.2.9.8 NMAC is not attained, the applicant will be required to resubmit the open book jurisprudence exam and the license shall not be renewed until the required score is achieved. If the jurisprudence examination with the required correct score is received at the board office during the 60 day grace period, the renewal shall be considered a late license renewal and the applicant must pay the fee for late license renewal prior to license renewal.]~~

~~[C.]~~B. If proof of NCCAOM recertification or equivalent continuing education as defined in 16.2.9.8 NMAC is received at the board office during the 60 day grace period, the renewal shall be considered a late license renewal and the applicant must pay the fee for late license renewal prior to license renewal.

~~[D.]~~C. For doctors of oriental medicine certified for expanded practice, if proof of expanded practice continuing education as defined in 16.2.9.9 NMAC is received at the board office during the 60 day grace period, the renewal shall be considered a late license renewal and the applicant must pay the fee for late license renewal prior to license renewal.

[16.2.8.11 NMAC - Rp, 16.2.8.11 NMAC, 02-15-05; A, 11-28-09; A, XX-XX-XX]

16.2.8.12 EXPIRED LICENSE: If a licensee has not renewed his license, including all continuing education requirements specified in 16.2.9.8 NMAC within the 60 day grace period provided by Section 61-14A-15 NMSA 1978, the license is expired and that licensee shall not practice oriental medicine until their expired license is renewed. For an expired license, if a properly completed application for license renewal is received at the board office within one year of the last regular renewal date, the license shall be renewed if all the requirements of late license renewal during the 60 day grace period provided by Section 61-14A-15 NMSA 1978 are completed, in addition to the requirements of 16.2.8.11 NMAC, and the licensee also pays the fee for expired license renewal specified in 16.2.10 NMAC. For each licensee whose license has expired, the board shall notify the licensee by return receipt mail sent to the address on record that the license has expired and shall notify the licensee that he must not practice oriental medicine until the license is renewed. This notification shall also contain an explanation of the procedures and fees for renewing the license and the consequences of not renewing the license. The board is responsible for sending the notification by return receipt mail in a timely manner to the address on record for the licensee and for maintaining a record of all such notifications sent including the return receipt documents. The board is not responsible for verifying that the return receipt was returned by the post office to the board, for further follow up to verify that the notification was received or to locate and notify a licensee who has changed address without properly notifying the board of the new address. The licensee is responsible for notifying the board of the correct current address and of any address changes. Any former licensee, after being properly notified as described above, who fails to renew his or her expired license by the next July 31 annual license renewal date after the notification shall be required to apply as a new applicant.

[16.2.8.12 NMAC - Rp, 16.2.8.12 NMAC, 02-15-05; A, 9-25-06; A, 11-28-09]

16.2.8.13 EXPANDED PRACTICE CERTIFICATION RENEWAL:

A. If a doctor of oriental medicine certified for expanded prescriptive authority does not complete all expanded prescriptive authority continuing education requirements specified in 16.2.9.9 NMAC within the 60 day grace period, the expanded prescriptive authority certification(s) is expired and that licensee shall not be certified for expanded prescriptive authority until the continuing education is completed. Provided that all other renewal requirements have been received by the board, such a licensee shall continue to be licensed as a doctor of oriental medicine and is authorized for that scope of practice but shall not be authorized for the relevant expanded prescriptive authority scope of practice. For an expired expanded prescriptive authority certification, if a properly completed application for certification renewal, including proof of completion of the required expanded prescriptive authority continuing education, is received at the board office within one year of the last regular renewal date, the expanded prescriptive authority certification or certifications shall be renewed if all the requirements of late certification renewal during the 60 day grace period provided by Section 61-14A-15 NMSA 1978 are completed, in addition to the requirements of 16.2.8.11 NMAC, and the licensee also pays the fee for expired certification renewal

1 specified in 16.2.10 NMAC. For each licensee whose expanded prescriptive authority certification has expired, the
2 board shall notify the licensee by return receipt mail sent to the address on record that the expanded prescriptive
3 authority certification or certifications has expired and shall notify the licensee that he or she must not practice those
4 areas authorized by the expanded prescriptive authority certification until the prescriptive authority certification is
5 renewed. This notification shall also contain an explanation of the procedures and fees for renewing the expanded
6 prescriptive authority certification and the consequences of not renewing the expanded prescriptive authority. The
7 board is responsible for sending the notification by return receipt mail in a timely manner to the address on record
8 for the licensee and for maintaining a record of all such notifications sent, including the return receipt documents.
9 The board is not responsible for verifying that the return receipt was returned by the post office to the board, for
10 further follow up to verify that the notification was received or to locate and notify a licensee who has changed
11 address without properly notifying the board of the new address. The licensee is responsible for notifying the board
12 of the correct current address and of any address changes. Any licensee, after being properly notified as described
13 above, who fails to renew, including completion of any required continuing education, his or her expired expanded
14 prescriptive authority certification by the next July 31 annual license renewal date after the notification shall be
15 required to apply as a new applicant for expanded prescriptive authority certification except that there shall be a
16 limited expanded prescriptive authority certification reinstatement period as defined in 16.2.8.13 NMAC.

17 B. The board may, on an individual basis, renew a license that has expired for more than one year if
18 the former licensee can demonstrate good cause as defined in 16.2.1.7 NMAC.

19 C. The board shall report to the New Mexico board of pharmacy any expired license that was
20 previously held by a doctor of oriental medicine who was is certified for the expanded prescriptive authority
21 prescriptive authority and shall report to the New Mexico board of pharmacy any renewed or reinstated license of a
22 doctor of oriental medicine who is certified for the expanded prescriptive authority prescriptive authority.
23 [16.2.8.13 NMAC - N, 9-25-06; Repealed, 11-28-09; 16.2.8.13 NMAC - Rn, 16.2.8.12 Subsections B, C & D & A,
24 11-28-09]

25 26 **History of 16.2.8 NMAC:**

27 Pre-NMAC History: The material in this part was derived from that previously filed with the commission of public
28 records - state records center and archives as:

29 AB 81-1, Regulations Governing Acupuncture Practitioners, filed 10-5-81;

30 AB 82-1, Regulations Governing Acupuncture Practitioners, filed 6-16-82;

31 AB 84-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-84;

32 BCD 87-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 10-30-87;

33 ACU 88-1 Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-89;

34 ACU Rule 91-8 Regulations Governing Acupuncture Practitioners, Tutors and Institutes - Licensing, filed 2-18-91;

35 Rule 8, Regulations Governing Acupuncture Practitioners, Tutors and Institutes - Licensing, filed 8-28-92.

36
37 **History of Repealed Material:** 16 NMAC 2.8.11 deleted effective 7-15-01.

38 16.21.8 NMAC, License Renewal (filed 06-15-01) repealed 02-15-05.

39 40 **Other History:**

41 Rule 8, Regulations Governing Acupuncture Practitioners, Tutors and Institutes - Licensing (filed 8-28-92) was
42 renumbered, reformatted and replaced by 16 NMAC 2.8, License Renewal, effective 07-01-96.

43 16 NMAC 2.8, License Renewal (filed 06-14-96) was renumbered, reformatted, amended and replaced by 16.2.8
44 NMAC, License Renewal, effective 07-15-01.

45 16.2.8 NMAC, License Renewal (filed 06-15-01) was replaced by 16.2.8 NMAC, License Renewal, effective 02-15-
46 05.

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 9 CONTINUING EDUCATION

16.2.9.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[16.2.9.1 NMAC - Rp 16 NMAC 2.9.1, 12-1-01]

16.2.9.2 SCOPE: All licensed doctors of oriental medicine and all licensed doctors of oriental medicine certified for expanded practice as defined in 16.2.19 NMAC.
[16.2.9.2 NMAC - Rp 16 NMAC 2.9.2, 12-1-01; A, 11-28-09]

16.2.9.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-8, 8.1, 9, and 15, NMSA 1978.
[16.2.9.3 NMAC - Rp 16 NMAC 2.9.3, 12-1-01; A, 11-28-09]

16.2.9.4 DURATION: Permanent.
[16.2.9.4 NMAC - Rp 16 NMAC 2.9.4, 12-1-01]

16.2.9.5 EFFECTIVE DATE: December 1, 2001, unless a later date is cited at the end of a section.
[16.2.9.5 NMAC - Rp 16 NMAC 2.9.5, 12-1-01]

16.2.9.6 OBJECTIVE: This part defines continuing education requirements for doctors of oriental medicine and all licensed doctors of oriental medicine certified for expanded practice as defined in 16.2.19 NMAC.
[16.2.9.6 NMAC - Rp 16 NMAC 2.9.6, 12-1-01; A, 3-7-03; A, 11-28-09]

16.2.9.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC [~~Section 7 of Part 1 of the rules~~].
[16.2.9.7 NMAC - Rp 16 NMAC 2.9.7, 12-1-01; A, 02-15-05]

16.2.9.8 CONTINUING EDUCATION:

A. A doctor of oriental medicine shall complete continuing education in oriental medicine equivalent to that required by the national certification commission for acupuncture and oriental medicine (NCCAOM). A doctor of oriental medicine shall submit to the board at the time of license renewal either of the following:

(1) proof of continuing NCCAOM recertification in oriental medicine, acupuncture or Chinese herbology; or

(2) proof of completion of 15 hours annually, or every four years, of 60 hours of NCCAOM approved continuing education courses.

B. A doctor of oriental medicine who is a board approved examiner, examiner supervisor, or examiner trainer, for the clinical skills examination shall be granted continuing education credit for a licensed D.O.M. in oriental medicine, for time spent functioning as an examiner or training to be an examiner. This also applies to an observing board member if they have completed the training. Limited to six (6) hours per year.

C. The board shall annually audit a random 10 percent of continuing education documentation to determine the validity of the documentation.

D. A doctor of oriental medicine who provides the board with false information or makes a false statement to the board may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq.

E. A doctor of oriental medicine shall maintain an understanding of the current act and rules [~~and shall complete, with a score of 90 percent correct answers, an open book jurisprudence examination covering the act and the rules that contains at least 10 questions and shall submit this to the board at the time of license renewal~~].

[16.2.9.8 NMAC - Rp 16 NMAC 2.9.8, 12-1-01; A, 10-1-03; A, 02-15-05; A, 9-25-06; A, 11-28-09; A/E, 06-15-10; A/E, 06-15-10; Re-pr, 11-28-10; A, XX-XX-XX]

16.2.9.9 CONTINUING EDUCATION FOR LICENSEES CERTIFIED FOR EXPANDED PRACTICE: Doctors of oriental medicine previously certified in expanded practice shall meet the continuing education requirements of 14 hours every 2 years, beginning August 1, 2009, renewed August 1, 2011 and to be renewed August 1, 2013:

A. in addition to any continuing education required for license renewal specified in 16.2.9.8 NMAC, a doctor of oriental medicine certified for expanded practice in one or more areas as defined in 16.2.19 NMAC shall complete continuing education hours as follows:

- (1) three (3) hours every three (3) years for recertification in basic injection therapy;
- (2) nine (9) hours every three (3) years to be recertified in prolotherapy as specified in 16.2.19.16 or injection therapy;
- (3) nine (9) hours every three (3) years to be recertified in intravenous therapies; and
- (4) nine (9) hours every three (3) years to be recertified in bioidentical hormone therapy;
- (5) except that a DOM recertifying in injection therapy or intravenous therapy need not complete an additional 3 hours in basic injection therapy.

~~[A.]B. A doctor of oriental medicine certified for expanded practice in one or more areas as defined in 16.2.19 NMAC shall complete 14 hours of continuing education every two years in addition to any continuing education required for license renewal specified in 16.2.9.8 NMAC.~~ [The initial reporting period will begin August 1, ~~2009~~2011 and the ~~14~~ hours for recertification shall be completed prior to July 31, ~~2011~~2014 and each ~~two~~three (3) years thereafter. License holders who are newly certified for expanded practice will be required to complete ~~up to 14 hours of~~continuing education hours on a prorated basis during the first year(s) of recertification and then each ~~two~~three (3) years thereafter.

~~[B.]C.~~ The continuing education shall be about substances in the board approved appropriate expanded practice formulary or formularies defined in 16.2.20 NMAC or updated information in improving current techniques or new and advanced techniques that are part of the expanded practice certification as defined in 16.2.19 NMAC.

~~[C.]D.~~ Continuing education courses, including teachers, shall be approved by the board:

(1) course providers requesting approval for Rx continuing education certification shall be required to submit the following materials to the board for approval no less than 45 days prior to the date of the course offering and the materials shall include:

- (a) ~~a \$50~~an application fee as defined in 16.2.10.9 C NMAC;
- (b) course description, including objectives, subject matter, number of hours, date time and location; and
- (c) curriculum vitae of the instructor(s) including previous teaching experience in subjects they are engaged to teach of at least five (5) years;
- (2) individual practitioners requesting approval for a specific course not already approved as defined in 16.2.9.9 C (1). for their own personal continuing education shall submit a copy of the course brochure including a course description, subject matter, contact hours, and curriculum vitae of the instructor 45 days prior to the course offering;
- (3) the continuing education committee shall meet each month on or before the 15th to review course materials; electronic review is acceptable;
- (4) a doctor of oriental medicine certified for expanded practice in basic injection, injection or intravenous therapies must remain current in basic life support, BLS, and CPR with proof of having completed an American heart association approved course; a current copy of this card shall be submitted to the board at the time of each ~~biennial~~ triennial expanded practice certification renewal.

~~[D.]E.~~ Teaching an approved continuing education course shall be equivalent to taking the approved course. Continuing education that is appropriate for regularly licensed doctors of oriental medicine shall not be considered as fulfilling the above requirements for expanded practice continuing education. The board may determine specific mandatory courses that must be completed. Specific mandatory courses shall be noticed at least six (6) months prior to the date of the course. Exceptions to being required to complete a specific mandatory course may be made for good cause.

[16.2.9.9 NMAC - N, 10-1-03; A, 02-15-05; A, 11-28-09]

History of 16.2.9 NMAC:

1 **Pre-NMAC History:** None.

2
3 **History of Repealed Material:**

4 16 NMAC 2.9, Continuing Education (filed 6-14-96) repealed effective 12-1-01.

5
6 **Other History:**

7 16 NMAC 2.9, Continuing Education (filed 6-14-96) was replaced by 16.2.9 NMAC, Continuing
8 Education, effective 12-01-01.

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10

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 10 FEES

16.2.10.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[7-1-96; 16.2.10.1 NMAC - Rn, 16 NMAC 2.10.1, 10-22-00]

16.2.10.2 SCOPE: All licensees, applicants, applicants for expanded practice certification, educational courses, temporary licensees, applicants for temporary licensure, limited temporary license holders, limited temporary license applicants, extern applicants, externship supervisor applicants, certified auricular detoxification specialists, certified auricular detoxification specialist applicants, auricular detoxification specialist training programs, auricular detoxification specialist training program applicants, educational programs and applicants for approval of educational programs.
[7-1-96; 16.2.10.2 NMAC - Rn, 16 NMAC 2.10.2, 10-22-00; A, 1-1-01; A, 8-13-01; A, 02-15-05; A, 11-28-09]

16.2.10.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-8, 8.1, 9, 14.1 and 16, NMSA 1978.
[7-1-96; 16.2.10.3 NMAC - Rn, 16 NMAC 2.10.3, 10-22-00; A, 8-13-01]

16.2.10.4 DURATION: Permanent.
[7-1-96; 16.2.10.4 NMAC - Rn, 16 NMAC 2.10.4, 10-22-00]

16.2.10.5 EFFECTIVE DATE: July 1, 1996 unless a later date is cited at the end of a section.
[7-1-96, A, 8-31-98; 16.2.10.5 NMAC - Rn & A, 16 NMAC 2.10.5, 10-22-00]

16.2.10.6 OBJECTIVE: This part clarifies the requirements for the deposit and use of revenues derived from fees, establishes that the board shall not make refunds and lists all fees charged by the board.
[7-1-96; 16.2.10.6 NMAC - Rn, 16 NMAC 2.10.6, 10-22-00]

16.2.10.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC].
[7-1-96; 16.2.10.7 NMAC - Rn, 16 NMAC 2.10.7, 10-22-00; A, 02-15-05; A, 11-28-09]

16.2.10.8 DEPOSIT AND USE OF FEES: All fees and other funds collected under the act shall be deposited with the state treasurer for credit to the board of acupuncture and oriental medicine fund. The board shall appropriate money from the fund to pay for the costs of administration of the act. Any surplus funds remaining at the end of each fiscal year shall not revert to the general fund.
[8-18-87...7-1-96; A, 5-15-99; A, 2-17-00; 16.2.10.8 NMAC - Rn, 16 NMAC 2.10.8, 10-22-00; A, 8-13-01; A, 02-15-05]

16.2.10.9 FEES CHARGED:

A. All fees shall be paid by check, certified check or money order in US funds unless otherwise specified by rule.

B. No fees paid to the board shall be refunded.

C. The board shall charge the following fees:

- (1) application for licensure: \$525.00;
- (2) application for reciprocal licensure: \$750.00;
- (3) application for licensure by endorsement: \$800.00;
- (4) application for temporary licensure: \$330.00;
- (5) application for limited temporary license: \$100.00;
- (6) clinical skills examination, not including the cost of any nationally recognized examinations: \$500.00;
- (7) annual license renewal: \$225.00;
- (8) late license renewal: an additional \$200.00;
- (9) expired license renewal: an additional \$350.00 plus the renewal and late fees;
- (10) temporary license renewal: \$100.00;

(11) application for a new annual approval or renewal of approval of an educational program, including the same program offered at multiple campuses: \$450.00;

(12) late renewal of approval of an educational program: an additional ~~[\$225.00]~~ \$200;

(13) application for single instance approval of an educational program: \$225.00;

(14) application for initial expanded practice certification: \$100.00 per module;

(15) application for ~~biennial~~ triennial expanded practice certification renewal: an additional \$200;

(16) late expanded practice certification renewal: an additional \$125.00 plus the renewal fee;

(17) expired expanded practice certification renewal: an additional \$100.00 plus the renewal and late fees;

(18) application for externship supervisor registration: \$225.00;

(19) application for extern certification: \$225.00;

(20) continuing education provider course approval application: \$50.00;

(21) auricular detoxification specialist certification application: \$50.00;

(22) auricular detoxification specialist certification renewal: \$30.00;

(23) auricular detoxification specialist certification late renewal: \$20.00;

(24) auricular detoxification specialist supervisor registration application: \$50.00;

(25) auricular detoxification specialist training program approval application: \$100.00;

(26) auricular detoxification specialist training program approval renewal: \$50.00;

(27) treatment program approval application: \$100.00;

(28) administrative fee for application for approval of an expanded practice educational program: \$600.00;

(29) renewal of expanded prescriptive authority course: \$200.00;

(30) administrative fee for inactive license application: \$125.00;

(31) administrative fee for inactive license renewal: \$100.00;

(32) administrative fee for inactive license reinstatement application: \$125.00;

(33) administrative fee for each duplicate license: \$30.00;

(34) administrative fee for a single transcript or diploma from the former international institute of Chinese medicine, per copy: \$50.00;

(35) administrative fees to cover the cost of photocopying, electronic data, lists and labels produced at the board office.

[11-3-81...7-1-96; A, 5-15-99; A, 2-17-00; 16.2.10.9 NMAC - Rn, 16 NMAC 2.10.10, 10-22-00; A, 1-1-01; A, 8-13-01; A, 3-2-03; A, 02-15-05; A, 9-25-06; A, 11-28-09; A, XX-XX-XX]

History of 16.2.10 NMAC:

Pre-NMAC History:

Material in this part was derived from that previously filed with the commission of public records- state records center and archives as:

AB 81-1, Regulations Governing Acupuncture Practitioners, filed 10-05-81;

AB 82-1, Regulations Governing Acupuncture Practitioners, filed 06-16-82;

AB 84-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes; filed 03-13-84;

BCD 87-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes; filed 10-30-87;

ACU 88-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes; filed 03-13-89;

ACU Rule 91-4, Regulations Governing Acupuncture Practitioners, Tutors and Institutes; Fees; filed 02-18-91;

Rule 4, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, Fees, filed 08-28-92;

Rule 4, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, Fees, filed 02-24-93.

History of Repealed Material: [Reserved]

Other History:

Rule 4, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, Fees (filed 02-24-93) was renumbered and reformatted to 16 NMAC 2.10, Fees, effective 07-01-96.

16 NMAC 2.10, Fees, (filed 06-14-96) was renumbered, reformatted, amended and replaced by 16.2.10 NMAC, Fees, effective 10-22-00.

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 12 GROUNDS FOR DENIAL, SUSPENSION OR REVOCATION OF LICENSE

16.2.12.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[7-1-96; 16.2.12.1 NMAC - Rn, 16 NMAC 2.12.1, 8-13-01]

16.2.12.2 SCOPE: All licensees, applicants, temporary licensees, applicants for temporary licensure, limited temporary license holders, limited temporary license applicants, externs, certified auricular detoxification specialists, certified auricular detoxification specialist applicants, auricular detoxification specialist training programs, auricular detoxification specialist training program applicants, educational programs and applicants for approval of educational programs.
[7-1-96, A, 8-31-98; 16.2.12.2 NMAC - Rn & A, 16 NMAC 2.12.2, 8-13-01; A, 02-15-05]

16.2.12.3 STATUTORY AUTHORITY: This Part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-8, 9 and 17, NMSA 1978.
[7-1-96; 16.2.12.3 NMAC - Rn, 16 NMAC 2.12.3, 8-13-01]

16.2.12.4 DURATION: Permanent.
[7-1-96; 16.2.12.4 NMAC - Rn, 16 NMAC 2.12.4, 8-13-01]

16.2.12.5 EFFECTIVE DATE: July 1, 1996, unless a later date is cited at the end of a section or paragraph.
[7-1-96, 4-1-97; 16.2.12.5 NMAC - Rn, 16 NMAC 2.12.5, 8-13-01]

16.2.12.6 OBJECTIVE: This Part clarifies the ~~reasons~~ **dishonorable or unprofessional conduct** for which the board may deny, suspend or revoke a license to practice acupuncture and oriental medicine or otherwise discipline a Licensee, applicant, temporary licensee, applicant for temporary licensure, extern, extern supervisor or educational program in addition to those reasons listed in the Act in Section 61-14A-17 NMSA 1978.
[7-1-96; 16.2.12.6 NMAC - Rn & A, 16 NMAC 2.12.6, 8-13-01; A, XX-XX-XX]

16.2.12.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC.
[7-1-96; 16.2.12.7 NMAC - Rn, 16 NMAC 2.12.7, 8-13-01; A, 02-15-05; A, 11-28-09]

16.2.12.8 AUTHORITY AND PROCEDURE: The board may refuse to issue, or may suspend, or revoke any license, in accordance with the Uniform Licensing Act, 61-1-1 to 61-1-31 NMSA 1978, for reasons authorized in the Act and clarified in 16.2.12 NMAC.
[3-19-91...7-1-96; 16.2.12.8 NMAC - Rn & A, 16 NMAC 2.12.8, 8-13-01; A, 11-28-09]

16.2.12.9 FAILURE TO USE PRE-STERILIZED SINGLE USE NEEDLES: Pursuant to the Act, Section 61-14A-17.A(3) NMSA 1978, a doctor of oriental medicine, a temporary licensee or an extern shall be guilty of incompetence who fails to use pre-sterilized single use needles.
[4-11-89...7-1-96; A, 8-31-98; 16.2.12.9 NMAC - Rn & A, 16 NMAC 2.12.9, 8-13-01]

16.2.12.10 FAILURE TO FOLLOW PROPER INSTRUMENT STERILIZATION PROCEDURE: Pursuant to the Act, Section 61-14A-17.A(3) NMSA 1978, a doctor of oriental medicine, a temporary licensee or an extern shall be guilty of incompetence who fails to use sterile instruments or fails to follow proper instrument sterilization procedures including the use of biological monitors and the keeping of accurate records of sterilization cycles and equipment service maintenance as described in the manufacturer's instruction manual, the current edition of "clean needle technique manual for acupuncturists" published by the national acupuncture foundation, and the instrument sterilization protocols used by New Mexico hospitals and the American hospital association.
[11-3-81...7-1-96; A, 8-31-98; 16.2.12.10 NMAC - Rn & A, 16 NMAC 2.12.10, 8-13-01]

16.2.12.11 FAILURE TO FOLLOW CLEAN NEEDLE TECHNIQUE: Pursuant to the Act, Section 61-14A-17.A(3) NMSA 1978, a doctor of oriental medicine, a temporary licensee or an extern shall be guilty of

incompetence who fails to follow clean needle technique as defined in the current edition of “clean needle technique manual for acupuncturists” published by the national acupuncture foundation.
[11-3-81...7-1-96; A, 8-31-98; 16.2.12.11 NMAC - Rn & A, 16 NMAC 2.12.11, 8-13-01]

16.2.12.12 FALSE REPORTING: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine temporary licensee, applicant, applicant for temporary licensure, extern, educational program or applicants for approval of an educational program shall be guilty of unprofessional conduct who willfully makes or files false reports or records in his or her practice of acupuncture and oriental medicine, or who files false statements for collection of fees for services that were not rendered.
[4-11-89...7-1-96; 16.2.12.12 NMAC - Rn & A, 16 NMAC 2.12.12, 8-13-01]

16.2.12.13 OUT OF STATE DISCIPLINARY ACTION: Pursuant to the Act, Section 61-14A-17.A (3) and (5) NMSA 1978, a doctor of oriental medicine, an applicant, a temporary licensee, an applicant for temporary licensure or an extern shall be guilty of incompetence or unprofessional conduct for any act or omission which has resulted in disciplinary action against him or her by the licensing or disciplinary authority, or court in another state, territory, or country which would constitute incompetence if it had been committed in New Mexico.
[4-11-89...7-1-96; 16.2.12.13 NMAC - Rn & A, 16 NMAC 2.12.13, 8-13-01]

16.2.12.14 PROCURING LICENSE BY FRAUD: Pursuant to the Act, Section 61-14A-17.A (1), NMSA 1978, a doctor of oriental medicine, an applicant, a temporary licensee, an applicant for temporary licensure or an extern shall be guilty of fraud or deceit in procuring or attempting to procure or renew a license or a temporary license to practice in the profession of acupuncture and oriental medicine if he makes false statements, or provides false or misleading information on his or her application.
[4-11-89...7-1-96; 16.2.12.14 NMAC - Rn & A, 16 NMAC 2.12.14, 8-13-01; A, 11-28-09]

16.2.12.15 MISREPRESENTATION: Pursuant to the Act, Section 61-14A-17.A (5) and (14) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct and attempting to attract patronage in an unethical manner who guarantees a cure will result from the performance of professional services.
[11-3-81...7-1-96; 16.2.12.15 NMAC - Rn & A, 16 NMAC 2.12.15, 8-13-01]

16.2.12.16 FALSE ADVERTISING: Pursuant to the Act, Section 61-14A-17.A (13) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, instructor in an educational course or program or applicant for approval of an educational program shall be guilty of advertising by means of knowingly false statements who makes or publishes or causes to be made or published any advertisement, offer, statement or other form of representation, oral or written, that directly or by implication is false, misleading or deceptive.
[11-3-81...7-1-96; 16.2.12.16 NMAC - Rn & A, 16 NMAC 2.12.16, 8-13-01; A, 11-28-09]

16.2.12.17 FALSE ADVERTISING BY APPLICANTS: Pursuant to the Act, Sections 61-14A-17.A (7) and (13) NMSA 1978, an applicant or an applicant for temporary licensure shall be guilty of violating the provisions of the act, specifically Section 61-14A-4, and shall be guilty of advertising by means of knowingly false statements who advertises his or her practice of acupuncture and oriental medicine if he does such advertising prior to being licensed by the board.
[4-1-97; 16.2.12.7 NMAC - Rn, 16 NMAC 2.12.7, 8-13-01; A, 11-28-09]

16.2.12.18 EDUCATIONAL FRAUD: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct who practices fraud, deceit, gross negligence, or misconduct in the clinical practice or in relation to the operation of an educational program in acupuncture and oriental medicine.
[4-11-89...7-1-96; 16 NMAC 2.12.17, 4-1-97; 16.2.12.18 NMAC - Rn & A, 16 NMAC 2.12.18, 8-13-01]

16.2.12.19 FAILURE TO KEEP RECORDS: Pursuant to Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct who fails to keep written records reflecting the course of treatment of the patient.
[4-11-89...7-1-96; 16 NMAC 2.12.18, 4-1-97; 16.2.12.19 NMAC - Rn & A, 16 NMAC 2.12.19, 8-13-01]

16.2.12.20 FAILURE TO PROVIDE RECORDS TO PATIENT: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct who fails to make available to a patient or client, upon request, copies of patient records in their possession, or under their control that have been prepared for and paid for by the patient or client. The patient records must be provided to the patient or client within 30 days of the request.

[4-11-89...7-1-96; 16 NMAC 2.12.19, 4-1-97; A, 8-31-98; 16.2.12.20 NMAC - Rn & A, 16 NMAC 2.12.20, 8-13-01; A, 02-15-05]

16.2.12.21 BREACH OF CONFIDENTIALITY: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct who reveals personally identifiable facts, data or information obtained in a professional capacity, without the prior consent of the patient or client, except as authorized or required by law.

[4-11-89...7-1-96; 16 NMAC 2.12.20, 4-1-97; 16.2.12.21 NMAC - Rn & A, 16 NMAC 2.12.21, 8-13-01]

16.2.12.22 DELEGATION OF RESPONSIBILITIES TO UNQUALIFIED PERSONS: Pursuant to the Act, Section 61-14A-17.A (3), NMSA 1978, a doctor of oriental medicine, a temporary licensee or an extern shall be guilty of incompetence who:

A. delegates professional responsibilities to a person when the doctor of oriental medicine, temporary licensee or extern delegating such responsibilities knows or has reason to know that the person is not qualified by education, by experience or by licensure or certification to perform the responsibilities; or

B. fails to exercise appropriate supervision over temporary licensees or students who are authorized to practice only under the supervision of the doctor of oriental medicine or temporary licensee.

[4-11-89...7-1-96; 16 NMAC 2.12.21, 4-1-97; 16.2.12.22 NMAC - Rn & A, 16 NMAC 2.12.22, 8-13-01]

16.2.12.23 ABANDONMENT OF PATIENTS: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct who abandons or neglects a patient or client under and in need of immediate professional care, without making reasonable arrangements for the continuation of such care, or abandons professional employment in a group practice, hospital, clinic or other health care facility, without reasonable notice and under circumstances which seriously impair the delivery of professional care to patients or clients.

[4-11-89...7-1-96; 16 NMAC 2.12.22, 4-1-97; 16.2.12.23 NMAC - Rn & A, 16 NMAC 2.12.23, 8-13-01]

16.2.12.24 SOLICITATION: Pursuant to the Act, Section 61-14A-17.A (14) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of attempting to attract patronage in an unethical manner who solicits patients, either personally or through an agent, through the use of fraud, intimidation, undue influence, or a form of overreaching or vexatious conduct. A solicitation is any communication which directly or implicitly requests an immediate oral or written response from the recipient.

[4-11-89...7-1-96; 16 NMAC 2.12.23, 4-1-97; 16.2.12.24 NMAC - Rn & A, 16 NMAC 2.12.24, 8-13-01]

16.2.12.25 FEE SPLITTING: Pursuant to the Act, Section 61-14A-17.A (14) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of attempting to attract patronage in an unethical manner who engages in fee splitting. "Fee splitting" means paying or offering to pay a business or professional person or receiving or offering to receive from a business or professional person a commission, rebate, or compensation for bringing or referring a patient or dividing or offering to divide fees received for service for bringing or referring a patient. A division of fees between or among practitioners in the same practice or fee arrangements to cover patients during temporary absences is not fee splitting and is not prohibited by this provision.

[4-11-89...7-1-96; 16 NMAC 2.12.24, 4-1-97, A, 5-15-99; 16.2.12.25 NMAC - Rn & A, 16 NMAC 2.12.25, 8-13-01]

16.2.12.26 FINANCIAL EXPLOITATION: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct who exercises undue influence on the patient or client in such manner as to exploit the patient or client for the financial gain of the doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program or of a third party. [4-11-89...7-1-96; 16 NMAC 2.12.25, 4-1-97, 4-1-97; 16.2.12.26 NMAC - Rn & A, 16 NMAC 2.12.26, 8-13-01]

16.2.12.27 SEXUAL ABUSE, EXPLOITATION AND MISCONDUCT: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, an applicant, a temporary licensee, an applicant for temporary licensure or an extern shall be guilty of unprofessional conduct who commits an act of sexual abuse, exploitation or misconduct, by exercising influence within a doctor/patient or teacher/student relationship for purposes of engaging a patient or student in sexual activity or who engages in sexual contact or the suggestion of sexual contact with a patient or student during the doctor/patient or teacher/student relationship within an educational program, unless a sexual relationship with the patient or student preceded the professional relationship as doctor/patient or teacher/student. If the licensee, temporary licensee or extern and the patient mutually desire a personal/sexual relationship, the licensee, temporary licensee or extern shall immediately terminate the professional relationship with a written and signed termination of care agreement, make an appropriate referral to another health care practitioner, and wait before engaging in such a relationship for a time when it is reasonably certain based on the factors enumerated below that the professional relationship has no influence on the personal/sexual relationship. The licensee, temporary licensee or extern who engages in such a personal/sexual relationship, following the cessation or termination of treatment, bears the burden of providing proof that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since care was terminated, (2) the nature and duration of the care, (3) the circumstances of termination, (4) the patient's personal history, (5) the patient's mental status, (6) the likelihood of adverse impact on the patient and others, and (7) any statements or actions made by the licensee, temporary licensee or extern during the course of care suggesting or inviting the possibility of a post termination relationship with the patient. Each of the following acts constitutes sexual abuse, exploitation or misconduct:

- A. physical or verbal sexual contact or intercourse during the course of the professional relationship, whether in or out of the practitioner's place of business;
- B. failure to maintain appropriate professional boundaries even if the patient is perceived as seductive;
- C. failure to provide the patient with an opportunity to undress and dress in private;
- D. failure to provide the patient with the opportunity to wear underwear or a smock during treatment;
- E. failure to obtain informed verbal consent before undraping or treating the patient's breasts, buttocks or genitals;
- F. use of inappropriate parts of the practitioner's body to brace the patient;
- G. palpation beyond that which is necessary to accomplish a competent examination or treatment;
- H. sexual repartee, innuendo, jokes or flirtation;
- I. sexual comments about the patient's person or clothing;
- J. inquiry into the patient's sexual history or behavior beyond that which is necessary for a competent examination, diagnosis or treatment; the practitioner shall not be unnecessarily intrusive; the practitioner shall not verbalize any unprofessional comments concerning the patient's sexual history or behavior; and
- K. attempting to diagnose or treat a sexual issue beyond the practitioner's scope of training or practice.

[4-11-89...7-1-96; 16 NMAC 2.12.26, 4-1-97, 4-1-97; 8-31-98; A, 2-17-00; 16.2.12.27 NMAC - Rn & A, 16 NMAC 2.12.27, 8-13-01]

16.2.12.28 CONVICTION OF CRIME: Pursuant to the Act, Section 61-14A-17.A (3) NMSA 1978, a doctor of oriental medicine, applicant, temporary licensee, applicant for temporary licensure or extern shall be guilty of incompetence if convicted of any misdemeanor or felony relating to the practice of acupuncture and oriental medicine. For the purpose of this Section, conviction includes any finding of guilt by a court or jury, any plea or judgment of conditional discharge, or any plea of guilty, or any plea of nolo contendere or no contest, or plea or disposition of conditional discharge, and including any such proceeding in which a sentence was imposed, suspended or deferred.

[4-11-89...7-1-96; 16 NMAC 2.12.27, 4-1-97; 16.2.12.28 NMAC - Rn & A, 16 NMAC 2.12.28, 8-13-01]

16.2.12.29 PERMITTING INSERTION OR REMOVAL OF ACUPUNCTURE NEEDLES: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, applicant, temporary licensee, applicant for temporary licensure or extern shall be guilty of unprofessional conduct who permits, directs or supervises the insertion or removal of acupuncture needles by an unlicensed agent or employee. This provision shall not apply to a patient carrying out the instructions of his or her doctor of oriental medicine, temporary licensee or extern when it is part of the patient's treatment providing that the instructions are simple and clear and there is no danger to the patient. This provision shall not apply to a student enrolled in an educational program practicing under the direct supervision of a teacher as part of the educational program in which he or she is enrolled.
[4-1-97; 16.2.12.29 NMAC - Rn & A, 16 NMAC 2.12.29, 8-13-01]

16.2.12.30 PERMITTING THE PRESCRIPTION OF SUBSTANCES AND PROCEDURES: Pursuant to the Act, Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, applicant, temporary licensee, applicant for temporary licensure or extern shall be guilty of unprofessional conduct who permits, directs or supervises the prescription of substances or procedures within the scope of practice of a doctor of oriental medicine by an unlicensed agent or employee. This provision shall not apply to a patient carrying out the instructions of his or her doctor of oriental medicine, temporary licensee, or extern when it is part of the patient's treatment providing that the instructions are simple and clear and there is no danger to the patient. This provision shall not apply to a student enrolled in an educational program practicing under the direct supervision of a teacher as part of the educational program in which he is enrolled.
[4-1-97, 16.2.12.30 NMAC - Rn & A, 16 NMAC 2.12.30, A, 8-13-01; A, 11-28-09]

16.2.12.31 FAILURE TO OBTAIN INFORMED CONSENT: Pursuant to Section 61-14A-17.A (5) NMSA 1978, a doctor of oriental medicine, temporary licensee, extern, educational program or applicant for approval of an educational program shall be guilty of unprofessional conduct who fails to obtain, from the patient, a written informed consent for diagnosis and treatment that gives the patient at least a description of the types of diagnostic and treatment services used and any associated potential risks and sensations. The written informed consent shall also contain an explanation that the following will be discussed orally with the patient: (1) an estimate of the number of times the patient may need to return for treatment; (2) the frequency of treatment; and (3) the possible outcome of the diagnostic procedure or treatment service. The written informed consent shall also contain a statement that the patient shall have the choice to accept or reject the proposed diagnostic procedure or treatment, or any part of it, before or during the diagnosis or treatment.
[5-1-97, A, 8-31-98, A, 5-15-99; 16.2.12.31 NMAC - Rn & A, 16 NMAC 2.12.31, 8-13-01]

16.2.12.32 INCOMPETENCE AND UNPROFESSIONAL CONDUCT: The specifications of incompetence and unprofessional conduct defined in the act and 16.2.12 NMAC shall not be exclusive of the types of acts and omissions which may be found by the board to constitute incompetence or unprofessional conduct.
[4-11-89...7-1-96; 16 NMAC 2.12.28, 4-1-97; 16.2.12.32 NMAC - Rn, 16 NMAC 2.12.32, 8-13-01; A, 02-15-05; A, 11-28-09]

16.2.12.33 ACUPUNCTURE ON ANIMALS: A person who is not licensed under the Veterinary Practice Act, including a licensed doctor of oriental medicine, is prohibited from practicing veterinary medicine, including acupuncture on an animal, as defined by the Veterinary Practice Act, except under direct supervision of a licensed veterinarian pursuant to Rule 16.25.9.15 NMAC, or superseding rule. A licensed doctor of oriental medicine is guilty of unprofessional conduct who: (1) practices acupuncture on an animal or renders related services on an animal in violation of the Veterinary Practice Act, or (2) advertises or solicits clients for the practice of acupuncture on an animal except as permitted by rule promulgated by the board of veterinary medicine, or (3) accepts a fee directly from a client for services rendered on an animal.
[16.2.12.33 NMAC - N, 8-13-01]

16.2.12.34 DISCIPLINARY ACTION AND FINES: A licensee, temporary licensee, applicant, applicant for temporary licensure, extern, extern supervisor or educational program is subject to disciplinary proceedings, including fines, in accordance with the uniform Licensing Act, NMSA 1978, Sections 61-1-1 through 61-1-35, as amended, for violations of the act or for violations of 16.2.12 NMAC (Part 12 of the Rules). Fines may be assessed for each violation. Fines may be assessed in addition to other disciplinary action taken by the board for repeated or serious violations or for providing false or misleading information to the board.

1 A. Violations of specific rules applicable to educational programs may result in denial, suspension or
2 revocation of the educational program approval or in assessment of fines as described below:

3 (1) failure to provide the board complete, accurate transcripts pursuant to Paragraphs (1) & (2) of
4 Subsection C of 16.2.3.13 NMAC of Part 3 of the Rules) - \$1000.00;

5 (2) failure to furnish the board, its investigators, or agents with information requested by the board or
6 failure to allow visits or inspections of the institute or facility pursuant to 16.2.7.8 NMAC (Section 8 of Part 7 of the
7 Rules or Subsection M of 16.2.7.9 NMAC (Subsection M of Section 9 of Part 7 of the Rules) - \$1000.00;

8 (3) failure to provide the board with the names and educational qualifications of all teaching
9 supervisors, resident teachers and visiting teachers as required by Subsection G of 16.2.7.9 NMAC (Subsection G of
10 Section 9 of Part 7 of the Rules) - \$500.00;

11 (4) failure to provide at least 900 hours of Supervised Clinical Practice and observation with at least
12 400 of those hours as actual treatment hours with the student as the primary student practitioner pursuant to
13 Subsection C of 16.2.7.9 NMAC (Subsection C of Section 9 of of Part 7 of the Rules) - \$ 500.00;

14 (5) failure to notify board of ownership or program changes pursuant to 16.2.7.13 NMAC (Section 13
15 of Part 7 of the Rules) - \$200.00;

16 (6) failure to maintain and enforce appropriate guidelines and procedures for termination and transfer
17 of clinic patients pursuant to 16.2.12.23 NMAC (Section 23 of Part 12 of the Rules) - \$ 500.00; and

18 (7) failure to comply with any other provisions required of an educational program, a fine not to
19 exceed one thousand dollars (\$1,000.00) for each violation.

20 B. A licensee, temporary licensee, applicant, applicant for temporary licensure, extern or an extern
21 Supervisor is subject to disciplinary proceedings in accordance with the Uniform Licensing Act, NMSA 1978,
22 Sections 61-1-1 through 61-1-35, as amended, for violations of the act, Section 61-14A-17 NMSA 1978, or the
23 Rules. The board has authority to take action that may result in denial of a license, failure to renew a license,
24 suspension of a license, revocation of a license, restriction or limitation on the scope of practice, requirement to
25 complete remedial education, monitoring of the practice by a supervisor approved by the board, censure or
26 reprimand, compliance with conditions of probation or suspension for a specific period of time, corrective action as
27 specified by the board, or payment of a fine not to exceed one thousand dollars (\$1,000.00) for each violation.

28 C. Violations of specific rules applicable to extern supervisors and externs as defined in 16.2.14
29 NMAC (Part 14 of the Rules) may result in suspension or revocation of the externship supervisor registration or the
30 extern certification or in assessment of a fine not to exceed one thousand dollars (\$1000.00) for each violation.
31 [16.2.12.34 NMAC - N, 8-13-01]

32
33 **16.2.12.35 EXPANDED PRESCRIPTIVE AUTHORITY INCOMPETENCE:** Pursuant to the Act,
34 Section 61-14A-17.A (3) NMSA 1978, a doctor of oriental medicine certified for the expanded prescriptive
35 authority shall be guilty of incompetence if he, when diagnosing and treating a patient, does not possess and apply
36 the knowledge and use the skill and care ordinarily used by similarly certified doctors of oriental medicine.
37 [16.2.12.35 NMAC - N, 02-15-05; A, 11-28-09]

38
39 **16.2.12.36 INCOMPETENCE:** Pursuant to the Act, Section 61-14A-17.A (3) NMSA 1978, a doctor of
40 oriental medicine or a doctor of oriental medicine certified in expanded practice who injudiciously prescribes,
41 administers, or dispenses a drug as defined in the New Mexico Drug, Device and Cosmetic Act shall be guilty of
42 incompetence.
43 [16.2.12.36 NMAC - N, 02-15-05; A, 11-28-09]

44 45 **History of 16.2.12 NMAC:**

46 **Pre-NMAC History:** Material in this part was derived from that previously filed with the commission of public
47 records - state records center and archives as:

48 AB 81-1, Regulations Governing Acupuncture Practitioners, filed 10-5-81;

49 AB 82-1, Regulations Governing Acupuncture Practitioners, filed 6-16-82;

50 AB 84-1, Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-84;

51 BCD 87-1, Emergency Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 10-30-87;

52 ACU 88-1 Regulations Governing Acupuncture Practitioners, Tutors and Institutes, filed 3-13-89;

53 ACU Rule 91-9, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Sanitation, filed 2-18-91;

54 Rule 9, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Sanitation, filed 1-26-93;

55 ACU Rule 91-10, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Advertisement, filed 2-
56 18-91;

1 Rule 10, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Titles, filed 1-27-93;
2 ACU Rule 91-14, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Grounds for Denial,
3 Suspension or Revocation of License, filed 2-18-91;
4 Rule 14, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Grounds for Denial, Suspension
5 or Revocation of License, filed 1-26-93;
6 ACU Rule 91-15, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Pertaining to Open
7 Meetings, Public Records, and Confidentiality, filed 2-18-91;
8 Rule 15, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Pertaining to Open Meetings,
9 Public Records, and Confidentiality, filed 8-28-92;
10 ACU Rule 91-16, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Guidelines for
11 Sterilization or Reusable Acupuncture Needles, filed 5-11-92;
12 Rule 16, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Guidelines for Sterilization or
13 Reusable Acupuncture Needles, filed 1-26-93.

14
15 **History of Repealed Material:** Rule 9, Regulations Governing Acupuncture Practitioners, Tutors and Institutes-
16 Sanitation (filed 1-26-93) and Rule 10, Regulations Governing Acupuncture Practitioners, Tutors and Institutes-
17 Titles (filed 1-27-93) both repealed effective 06-20-2001.

18
19 **Other History:**

20 Rule 14, Regulations Governing Acupuncture Practitioners, Tutors and Institutes- Grounds for Denial, Suspension
21 or Revocation of License (filed 1-26-93) and Rule 16, Regulations Governing Acupuncture Practitioners, Tutors and
22 Institutes- Guidelines for Sterilization or Reusable Acupuncture Needles (filed 1-26-93) both renumbered,
23 reformatted, amended and replaced by 16 NMAC 2.12, Grounds For Denial, Suspension Or Revocation Of License,
24 effective 07-01-96.

25 16 NMAC 2.12, Grounds For Denial, Suspension Or Revocation Of License (filed 06-14-96) renumbered,
26 reformatted and amended to 16.2.12 NMAC, Grounds For Denial, Suspension Or Revocation Of License, effective
27 08-13-01.
28

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 15 INACTIVE LICENSE

16.2.15.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[16.2.15.1 NMAC - Rp, 16.2.15.1 NMAC, 02-15-05]

16.2.15.2 SCOPE: All licensed and inactive licensed doctors of oriental medicine.
[16.2.15.2 NMAC - Rp, 16.2.15.2 NMAC, 02-15-05]

16.2.15.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-8, 9 and 15, NMSA 1978.
[16.2.15.3 NMAC - Rp, 16.2.15.3 NMAC, 02-15-05]

16.2.15.4 DURATION: Permanent.
[16.2.15.4 NMAC - Rp, 16.2.15.4 NMAC, 02-15-05]

16.2.15.5 EFFECTIVE DATE: February 15, 2005, unless a later date is cited at the end of a section.
[16.2.15.5 NMAC - Rp, 16.2.15.5 NMAC, 02-15-05]

16.2.15.6 OBJECTIVE: This part defines the requirements for renewal of licenses and the procedures to place an active license on inactive status or to reinstate the license to active status.
[16.2.15.6 NMAC - Rp, 16.2.15.6 NMAC, 02-15-05]

16.2.15.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC (Section 7 of Part 1 of the rules).
[16.2.15.7 NMAC - Rp, 16.2.15.7 NMAC, 02-15-05]

16.2.15.8 INACTIVE LICENSE GENERAL PROVISIONS: A licensee in good standing is eligible to have his or her license placed on inactive status. A licensee who failed to renew his or her license by July 31st shall renew the license in accordance with the provisions of 16.2.8.10 NMAC, 16.2.8.11 NMAC and 16.2.8.12 NMAC (Sections 10, 11 and 12 of Part 8 of the rules) before the licensee can apply for an inactive license.

A. The board will not accept an inactive license application from a licensee who is under investigation for violations of the act or who has an active complaint pending before the board with the exception of an impaired licensee who is participating in a rehabilitation plan approved by the board. Impaired means the inability to practice acupuncture and oriental medicine with reasonable skill and safety to patients as a result of mental illness or habitual or excessive use or abuse of alcohol or drugs as defined in the Controlled Substances Act, Sections 30-31-1, et seq., NMSA 1978.

B. An inactive licensee shall not practice acupuncture and oriental medicine, as defined in the act, in New Mexico. An inactive licensee shall not represent himself or herself as a doctor of oriental medicine in public statements that include, but are not limited to, paid or unpaid advertising, brochures, printed or copied materials, electronic or digital media, directory listings, personal resumes or curricula vitae, business cards, interviews or comments for use in media, statements in legal proceedings, lectures and public presentations. An inactive licensee shall not teach acupuncture and oriental medicine at an educational program.

C. Providing or offering to provide oriental medical services, engaging in the practice of acupuncture and oriental medicine or teaching acupuncture and oriental medicine at an educational program by an inactive licensee shall be grounds for disciplinary action by the board for unprofessional conduct and potentially for other appropriate reasons pursuant to Section 61-14A-17 of the act and 16.2.12 NMAC (Part 12 of the rules).

D. An inactive licensee shall comply with the disciplinary requirements of Section 61-14A-17 of the act and 16.2.12 NMAC (Part 12 of the rules).
[16.2.15.8 NMAC - Rp, 16.2.15.8 NMAC, 02-15-05]

16.2.15.9 INACTIVE LICENSE APPLICATION: A licensee in good standing may apply to have his or her license placed on inactive status. Upon approval of an application for an inactive license that fulfills the requirements listed below, the board shall place the license on inactive status. The application requirements for an inactive license shall be receipt of the following by the board:

1 A. the administrative fee for inactive license application specified in 16.2.10 NMAC (Part 10 of the
2 rules) paid by check or money order in U.S. funds; and

3 B. an inactive license application that is complete and in English on a form provided by the board
4 that shall include the applicant's name, address, date of birth and social security number;

5 C. an affidavit provided on the inactive license application form as to whether the applicant since last
6 renewing his or her license with the board:

7 (1) has been subject to any disciplinary action in any jurisdiction related to the practice of
8 acupuncture and oriental medicine, or related to any other profession including other health care professions for
9 which the applicant is licensed, certified, registered or legally recognized to practice including resignation from
10 practice, withdrawal or surrender of applicants license, certificate or registration during the pendency of disciplinary
11 proceedings or investigation for potential disciplinary proceedings; or

12 (2) has been a party to litigation in any jurisdiction related to the applicants practice of acupuncture
13 and oriental medicine, or related to any other profession including other health care professions for which the
14 applicant is licensed, certified, registered or legally recognized to practice; or

15 (3) has been convicted of a felony in any jurisdiction, including any finding of guilt by a court or
16 jury, or any plea of guilty, or any plea of nolo contendere or no contest, or plea or disposition of conditional
17 discharge, and including any such proceeding in which a sentence was imposed, suspended or deferred; or

18 (4) is in arrears on a court-ordered child support payment; or

19 (5) has violated any provision of the act or the rules; and

20 D. an official license history since last renewing his or her license with the board, which is a
21 certificate from each jurisdiction stating the disciplinary record of the applicant, from each jurisdiction where the
22 applicant has been licensed, certified, registered or legally recognized to practice acupuncture, oriental medicine or
23 any other profession, including other health care professions, in any jurisdiction, pursuant to any authority other than
24 the New Mexico Acupuncture and Oriental Medicine Practice Act; and

25 E. an affidavit as provided on the inactive license application form stating that the applicant
26 understands that:

27 (1) an applicant who has been subject to any action or proceeding comprehended by Subsection C of
28 16.2.15.9 NMAC (Part 15 of the rules) may be subject to disciplinary action at any time, including denial,
29 suspension or revocation of licensure, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17; and
30 subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender
31 Employment Act, NMSA 1978, Section 28-2-1, et seq; and

32 (2) an applicant who provides the board with false information or makes a false statement to the
33 board may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the
34 provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section 61-1-
35 1, et seq.; and

36 F. an affidavit as provided on the inactive license application form stating that the applicant
37 understands that:

38 (1) the applicant is responsible for reading, understanding and complying with the state of New
39 Mexico laws and rules regarding this application as well as the practice of acupuncture and oriental medicine; and

40 (2) the applicant must notify the board within ten (10) days if the applicant's address changes; and

41 (3) an inactive licensee shall comply with any continuing education requirements established by the
42 board; and

43 (4) an inactive license shall expire after fifteen (15) years; and

44 (5) an inactive licensee shall not practice acupuncture and oriental medicine, as defined in the act, in
45 New Mexico; an inactive licensee shall not represent himself or herself as a doctor of oriental medicine in public
46 statements that include, but are not limited to, paid or unpaid advertising, brochures, printed or copied materials,
47 electronic or digital media, directory listings, personal resumes or curricula vitae, business cards, interviews or
48 comments for use in media, statements in legal proceedings, lectures and public presentations; an inactive licensee
49 shall not teach acupuncture and oriental medicine at an educational program; and

50 (6) providing or offering to provide oriental medical services, engaging in the practice of acupuncture
51 and oriental medicine or teaching acupuncture and oriental medicine at an educational program by an inactive
52 licensee shall be grounds for disciplinary action by the board for unprofessional conduct and potentially for other
53 appropriate reasons pursuant to Section 61-14A-17 of the act and 16.2.12 NMAC (Part 12 of the rules); and

54 (7) an inactive licensee shall comply with the appropriate requirements of Section 61-14A-17 of the
55 act and 16.2.12 NMAC (Part 12 of the rules); and

(8) the board will not accept an inactive license application from a licensee who is under investigation for violations of the act or who has an active complaint pending before the board with the exception of an impaired licensee who is participating in a rehabilitation plan approved by the board; and

G. an accurate translation in English of all documents submitted in a foreign language; each translated document shall bear the affidavit of the translator certifying that he or she is competent in both the language of the document and the English language and that the translation is a true and faithful translation of the foreign language original; each translated document shall also bear the affidavit of the applicant certifying that the translation is a true and faithful translation of the original; each affidavit shall be signed before a notary public; the translation of any document relevant to an application shall be at the expense of the applicant.

[16.2.15.9 NMAC - Rp, 16.2.15.9 NMAC, 02-15-05]

16.2.15.10 INACTIVE LICENSE RENEWAL: An inactive license shall be renewed by July 31st of every year. Upon approval of an application for inactive license renewal that fulfills the requirements listed below, the board shall renew the inactive license. The application requirements for inactive license renewal shall be receipt of the following by the board:

A. the administrative fee for inactive license renewal specified in 16.2.10 NMAC (Part 10 of the rules) paid by check or money order in U.S. funds, or by credit card in U.S. funds if using the board's online renewal process; and

B. an inactive license application that is complete and in English on a form provided by the board that shall include the applicant's name, address, date of birth and social security number;

C. an affidavit as provided on the inactive license renewal form stating that the applicant understands that:

(1) the applicant must notify the board within ten (10) days if the applicant's address changes; and

(2) an inactive license shall expire after fifteen (15) years; and

(3) an inactive license must be renewed annually.

[16.2.15.10 NMAC - Rp, 16.2.15.10 NMAC, 02-15-05]

16.2.15.11 INACTIVE LICENSE EXPIRATION: An inactive license that is not renewed by September 30 shall expire and the person shall reapply for licensure as a new applicant.

[16.2.15.11 NMAC - Rp, 16.2.15.11 NMAC, 02-15-05]

16.2.15.12 INACTIVE LICENSE ~~REINSTATEMENT~~ REINSTATEMENT GENERAL PROVISIONS: An inactive licensee whose license has been inactive for varying periods up to fifteen (15) years may apply to have his or her inactive license reinstated. The following provisions apply.

A. Any applicant for inactive license reinstatement who has been subject to any action or proceeding comprehended by Subsection C of 16.2.15.13 NMAC (Part 15 of the rules) may be subject to disciplinary action at any time, including denial, suspension or revocation of licensure, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA 1978, Section 28-2-1, et seq.

B. Any applicant for inactive license reinstatement who provides the board with false information or makes a false statement to the board may be subject to disciplinary action at any time, including denial, suspension or revocation of licensure, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq.

C. The board will not approve an inactive license reinstatement application from an inactive licensee who is under investigation for violations of the act or who has an active complaint pending before the board.

D. The board will not approve an inactive license reinstatement application from an impaired inactive licensee, or an impaired inactive licensee who is currently participating in a rehabilitation plan approved by the board until the rehabilitation plan is successfully completed. Impaired means the inability to practice acupuncture and oriental medicine with reasonable skill and safety to patients as a result of mental illness or habitual or excessive use or abuse of alcohol or drugs as defined in the Controlled Substances Act, Section 30-31-1, et seq., NMSA 1978.

E. Once an inactive license has been reinstated, the licensee may not apply for inactive license status again for five (5) years.

[16.2.15.12 NMAC - Rp, 16.2.15.12 NMAC, 02-15-05; A, XX-XX-XX]

16.2.15.13 INACTIVE LICENSE ~~REINSTATEMENT~~ REINSTATEMENT APPLICATION - 5 YEARS OR LESS: An inactive licensee whose license has been inactive for five (5) years or less may apply to

1 have his or her license reinstated. Upon approval of an application for inactive license reinstatement that fulfills the
2 requirements listed below, the board shall reinstate the inactive license. The application requirements for inactive
3 license reinstatement shall be receipt of the following by the board:

4 A. the administrative fee for inactive license reinstatement application specified in 16.2.10 NMAC
5 (Part 10 of the rules) paid by check or money order in U.S. funds; and

6 B. an inactive license reinstatement application that is complete and in English on a form provided by
7 the board that shall include the applicant's name, address, date of birth and social security number;

8 C. an affidavit as provided on the inactive license reinstatement application form as to whether the
9 applicant since last renewing his or her license with the board:

10 (1) has been subject to any disciplinary action in any jurisdiction related to the practice of
11 acupuncture and oriental medicine, or related to any other profession including other health care professions for
12 which the applicant is licensed, certified, registered or legally recognized to practice including resignation from
13 practice, withdrawal or surrender of applicants license, certificate or registration during the pendency of disciplinary
14 proceedings or investigation for potential disciplinary proceedings; or

15 (2) has been a party to litigation in any jurisdiction related to the applicants practice of acupuncture
16 and oriental medicine, or related to any other profession including other health care professions for which the
17 applicant is licensed, certified, registered or legally recognized to practice; or

18 (3) has been convicted of a felony in any jurisdiction, including any finding of guilt by a court or
19 jury, or any plea of guilty, or any plea of nolo contendere or no contest, or plea or disposition of conditional
20 discharge, and including any such proceeding in which a sentence was imposed, suspended or deferred; or

21 (4) is in arrears on a court-ordered child support payment; or

22 (5) has violated any provision of the act or the rules; and

23 D. an official license history since last renewing his or her license with the board, which is a
24 certificate from each jurisdiction stating the disciplinary record of the applicant, from each jurisdiction where the
25 applicant has been licensed, certified, registered or legally recognized to practice acupuncture, oriental medicine or
26 any other profession, including other health care professions, in any jurisdiction, pursuant to any authority other than
27 the New Mexico Acupuncture and Oriental Medicine Practice Act; and

28 E. an affidavit as provided on the inactive license renewal application form stating that the applicant
29 understands that:

30 (1) an applicant who has been subject to any action or proceeding comprehended by Subsection C of
31 16.2.15.13 NMAC (Section 13 of Part 15 of the rules) may be subject to disciplinary action at any time, including
32 denial, suspension or revocation of licensure, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17;
33 and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal
34 Offender Employment Act, NMSA 1978, Section 28-2-1, et seq; and

35 (2) an applicant who provides the board with false information or makes a false statement to the
36 board may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the
37 provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section 61-1-
38 1, et seq.; and

39 F. an affidavit as provided on the inactive license renewal application form stating that the applicant
40 understands that:

41 (1) the applicant is responsible for reading, understanding and complying with the state of New
42 Mexico laws and rules regarding this application as well as the practice of acupuncture and oriental medicine; and

43 (2) the applicant must notify the board within ten (10) days if the applicant's address changes; and

44 (3) the applicant shall not practice acupuncture and oriental medicine in New Mexico until the
45 applicant receives a new active license issued by the board except as provided in Paragraph (2) of Subsection B of
46 16.2.15.14 NMAC or Paragraph (2) of Subsection D of 16.2.15.15 NMAC (Part 15 of the rules); and

47 G. an accurate translation in English of all documents submitted in a foreign language; each
48 translated document shall bear the affidavit of the translator certifying that he or she is competent in both the
49 language of the document and the English language and that the translation is a true and faithful translation of the
50 foreign language original; each translated document shall also bear the affidavit of the applicant certifying that the
51 translation is a true and faithful translation of the original; each affidavit shall be signed before a notary public; the
52 translation of any document relevant to an application shall be at the expense of the applicant; and

53 H. satisfactory proof as determined by the board of completion of any continuing education
54 requirements established by the board for all years the license was on inactive status.

55 [16.2.15.13 NMAC - Rp, 16.2.15.13 NMAC, 02-15-05; A, XX-XX-XX]

16.2.15.14 INACTIVE LICENSE [~~REINSTATMENT~~REINSTATEMENT APPLICATION - 5 TO 10 YEARS: An inactive licensee whose license has been inactive for more than five (5) years and less than ten (10) years may apply to have his or her inactive license reinstated. Upon approval of an application for inactive license reinstatement that fulfills the requirements listed below, the board shall reinstate the inactive license. The application requirements for inactive license reinstatement shall be receipt of the following by the board:

- A. fulfillment of the requirements of 16.2.15.13 NMAC (Section 13 of Part 15 of the rules); and
- B. either of the following:

(1) proof of clinical experience, as defined in 16.2.1.7 NMAC (Section 7 of Part 1 of the rules), for at least two out of every three years in another jurisdiction where the inactive licensee was licensed, certified, registered or legally recognized to practice acupuncture and oriental medicine, while the license was on inactive status; or

(2) proof of completion of 300 hours of clinical experience as an extern supervised by an externship supervisor as part of an externship as provided in 16.2.14 NMAC (Part 14 of the rules).

[16.2.15.14 NMAC - Rp, 16.2.15.14 NMAC, 02-15-05; A, XX-XX-XX]

16.2.15.15 INACTIVE LICENSE [~~REINSTATMENT~~REINSTATEMENT APPLICATION - MORE THAN 10 YEARS: An inactive licensee whose license has been inactive for more than ten (10) years may apply to have his or her inactive license reinstated. Upon approval of an application for inactive license reinstatement that fulfills the requirements listed below, the board shall reinstate the inactive license. The application requirements for inactive license reinstatement shall be receipt of the following by the board:

- A. fulfillment of the requirements of 16.2.15.13 NMAC (Section 13 of Part 15 of the rules); and
- B. passing the clinical skills examination; and
- C. passing the board approved jurisprudence examination; and
- D. either of the following:

(1) proof of clinical experience, as defined in 16.2.1.7 NMAC (Section 7 of Part 1 of the rules), for at least two out of every three years in another jurisdiction where the inactive licensee was licensed, certified, registered or legally recognized to practice acupuncture and oriental medicine, while the license was on inactive status; or

(2) proof of completion of 600 hours of clinical experience as an extern supervised by an externship supervisor as part of an externship as provided in 16.2.14 NMAC (Part 14 of the rules).

[16.2.15.15 NMAC - Rp, 16.2.15.15 NMAC, 02-15-05; A, XX-XX-XX]

16.2.15.16 INACTIVE LICENSE EXPIRATION: An inactive license that has been inactive for more than fifteen (15) years shall expire and the person who was previously licensed shall be required to apply as a new applicant.

[16.2.15.16 NMAC - Rp, 16.2.15.16 NMAC, 02-15-05]

History of 16.2.15 NMAC:

Pre-NMAC History: None

History of Repealed Material: 16.2.15 NMAC, Inactive License (filed 02-14-2003) repealed 02-15-05.

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 16 AURICULAR DETOXIFICATION

16.2.16.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[16.2.16.1 NMAC - N, 02-15-05]

16.2.16.2 SCOPE: Doctors of oriental medicine, certified auricular detoxification specialist applicants, certified auricular detoxification specialists, auricular detoxification specialist supervisor applicants, auricular detoxification specialist supervisors, auricular detoxification specialist training program applicants, auricular detoxification specialist training programs, treatment programs and treatment program applicants.
[16.2.16.2 NMAC - N, 02-15-05]

16.2.16.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Sections 61-14A-4.1.
[16.2.16.3 NMAC - N, 02-15-05]

16.2.16.4 DURATION: Permanent.
[16.2.16.4 NMAC - N, 02-15-05]

16.2.16.5 EFFECTIVE DATE: February 15, 2005, unless a later date is cited at the end of a section.
[16.2.16.5 NMAC - N, 02-15-05]

16.2.16.6 OBJECTIVE: Part 16 establishes the requirements regarding the training and certification of a certified auricular detoxification specialist, the scope of practice of a certified auricular detoxification specialist, the requirements for registration of an auricular detoxification specialist supervisor, the responsibilities of an auricular detoxification specialist supervisor, the approval of an auricular detoxification specialist training program, and the approval of a treatment program. Part 16 establishes the provisions for the renewal or expiration of a certified auricular detoxification specialist certification, auricular detoxification specialist training program and a substance abuse treatment program. Part 16 establishes the grounds for denial, suspension or revocation of a certified auricular detoxification specialist certification, an auricular detoxification specialist supervisor registration, an auricular detoxification specialist training program approval and a treatment program approval.
[16.2.16.6 NMAC - N, 02-15-05; A, 12-26-08]

16.2.16.7 DEFINITIONS: Refer to definitions in 16.2.1.7 NMAC (Section 7 of Part 1 of the rules).
[16.2.16.7 NMAC - N, 02-15-05]

16.2.16.8 CERTIFIED AURICULAR DETOXIFICATION SPECIALISTS GENERAL REQUIREMENTS:

A. A certified auricular detoxification specialist applicant who has been subject to any action or proceeding described in Subsection H of 16.2.16.10 NMAC (Section 10 of Part 16 of the rules) or who has violated the act or the rules, may be subject to disciplinary action, including denial, suspension or revocation of certification, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA 1978, Section 28-2-1, et seq.

B. A certified auricular detoxification specialist applicant who provides the board with false information or makes a false statement to the board may be subject to disciplinary action, including denial, suspension or revocation of certification, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq.
[16.2.16.8 NMAC - N, 02-15-05]

16.2.16.9 CERTIFIED AURICULAR DETOXIFICATION SPECIALISTS TRAINING AND EXAMINATION REQUIREMENTS: A certified auricular detoxification specialist applicant shall provide satisfactory proof that he or she has successfully completed a board approved auricular detoxification specialist training program as defined in 16.2.16.26 NMAC (Section 26 of Part 16 of the rules) that specifies successful completion of:

- 1 A. clean needle technique training; and
- 2 B. a board approved clean needle technique examination; and
- 3 C. the board approved jurisprudence examination covering the act and the rules with a score of not
- 4 less than ninety percent (90%).
- 5 [16.2.16.9 NMAC - N, 02-15-05; A, 12-26-08]
- 6

7 **16.2.16.10 CERTIFIED AURICULAR DETOXIFICATION SPECIALIST CERTIFICATION**

8 **APPLICATION:** Upon approval of a certified auricular detoxification specialist application that fulfills the
9 requirements listed below, the board shall issue a certified auricular detoxification specialist certification that will be
10 valid until July 31 following the initial certification. In the interim between regular board meetings, whenever a
11 qualified applicant for certified auricular detoxification specialist certification has filed his or her application and
12 complied with all other requirements of this section, the board's chairman or an authorized representative of the
13 board may grant an interim temporary certified auricular detoxification specialist certification that will suffice until
14 the next regular meeting of the board. In no event shall the applicant begin the practice of auricular detoxification
15 until the certified auricular detoxification specialist certification or interim temporary certified auricular
16 detoxification specialist certification is issued by the board. The application requirements for certified auricular
17 detoxification specialist certification shall be receipt of the following by the board:

- 18 A. the auricular detoxification specialist certification application fee specified in 16.2.10 NMAC
- 19 (Part 10 of the rules); and
- 20 B. an application for certified auricular detoxification specialist certification that is complete and in
- 21 English on a form provided by the board that shall include the applicant's name, address, date of birth and social
- 22 security number if the applicant has one; and
- 23 C. two (2) passport-type photographs of the applicant taken not more than six months prior to the
- 24 submission of the application; and
- 25 D. a copy of the applicant's high school diploma or high school general equivalency diploma (GED)
- 26 or diploma of higher education; and
- 27 E. a copy of the applicant's certificate of successful completion of a board approved auricular
- 28 detoxification specialist training program; and
- 29 F. the name of the auricular detoxification supervisor(s) registered with the board who will supervise
- 30 the applicant if known; and
- 31 G. an affidavit as provided on the certified auricular detoxification specialist application form as to
- 32 whether the applicant:
 - 33 (1) has been subject to any disciplinary action in any jurisdiction related to the practice of
 - 34 acupuncture and oriental medicine, the practice of auricular detoxification, the provision of medical or counseling
 - 35 services for disease prevention, harm reduction or the treatment or prevention of alcoholism, substance abuse or
 - 36 chemical dependency, or related to any other profession including other health care professions for which the
 - 37 applicant is licensed, certified, registered or legally recognized to practice including resignation from practice,
 - 38 withdrawal or surrender of applicants license, certificate or registration during the pendency of disciplinary
 - 39 proceedings or investigation for potential disciplinary proceedings; or
 - 40 (2) has been a party to litigation in any jurisdiction related to the applicants practice of acupuncture
 - 41 and oriental medicine, the practice of auricular detoxification, the provision of medical or counseling services for
 - 42 disease prevention, harm reduction or the treatment or prevention of alcoholism, substance abuse or chemical
 - 43 dependency, or related to any other profession including other health care professions for which the applicant is
 - 44 licensed, certified, registered or legally recognized to practice; or
 - 45 (3) has been convicted of a felony in any jurisdiction, including any finding of guilt by a court or
 - 46 jury, or any plea of guilty, or any plea of nolo contendere or no contest, or plea or disposition of conditional
 - 47 discharge, and including any such proceeding in which a sentence was imposed, suspended or deferred; or
 - 48 (4) is in arrears on a court-ordered child support payment; or
 - 49 (5) has violated any provision of the act or the rules; and
- 50 H. an affidavit as provided on the certified detoxification specialist application form attesting the
- 51 disciplinary record of the applicant with regard to each jurisdiction where the applicant has been licensed, certified,
- 52 registered or legally recognized to practice any profession, including health care professions, in any jurisdiction,
- 53 under any authority other than the New Mexico Acupuncture and Oriental Medicine Practice Act; and
- 54 I. an affidavit as provided on the certified auricular detoxification specialist application form
- 55 certifying that all documents submitted with the form are true and faithful copies of the original; and

1 J. an affidavit as provided on the certified auricular detoxification specialist application form
2 certifying a record free of convictions for drug or alcohol related offenses for at least two consecutive years before
3 the submission of the certified auricular detoxification specialist application; and

4 K. an affidavit as provided on the certified auricular detoxification specialist application form stating
5 that the applicant understands that:

6 (1) an applicant who has been subject to any action or proceeding comprehended by Subsection G of
7 16.2.16.10 NMAC (Section 10 of Part 16 of the rules) may be subject to disciplinary action at any time, including
8 denial, suspension or revocation of certification, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-
9 17; and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal
10 Offender Employment Act, NMSA 1978, Section 28-2-1, et seq.; and

11 (2) an applicant who provides the board with false information or makes a false statement to the
12 board may be subject to disciplinary action, including denial, suspension or revocation of certification, pursuant to
13 the provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section
14 61-1-1, et seq.; and

15 (3) the applicant is responsible for reading, understanding and complying with the state of New
16 Mexico laws and rules regarding this application as well as the practice of auricular detoxification; and

17 (4) the certified auricular detoxification specialist certification must be renewed annually by July 31;
18 and

19 (5) if the relationship with an auricular detoxification specialist supervisor terminates for any reason,
20 to continue working, the certified auricular detoxification specialist must arrange to be supervised by another
21 auricular detoxification specialist supervisor and notify the board within five (5) working days; and

22 (6) the applicant must notify the board within ten (10) days if the applicant's address changes; and

23 (7) the board may refuse to issue, or may suspend, or revoke any license, certified auricular
24 detoxification specialist certification or auricular detoxification specialist supervisor registration in accordance with
25 the Uniform Licensing Act, 61-1-1 to 61-1-31 NMSA 1978, for reasons authorized in Section 61-14A-17 NMSA
26 1978 of the act and clarified in 16.2.12 NMAC (Part 12 of the rules); and

27 L. an affidavit as provided on the certified auricular detoxification specialist application form stating
28 that the applicant understands that a certified auricular detoxification specialist is authorized to perform only the
29 following, for the purpose of harm reduction or treating and preventing alcoholism, substance abuse or chemical
30 dependency and only within a board approved treatment program that demonstrates experience in disease
31 prevention, harm reduction, or the treatment or prevention of alcoholism, substance abuse or chemical dependency:

32 (1) auricular acupuncture detoxification using the five auricular point national acupuncture
33 detoxification association (NADA) procedure or other board approved auricular procedures; and

34 (2) the application to the ear of simple board approved devices that do not penetrate the skin using the
35 five auricular point national acupuncture detoxification association (NADA) procedure or other board approved
36 auricular procedure and that the board approved devices that do not penetrate the skin are: seeds, grains, stones,
37 metal balls, magnets and any small sterilized, spherical object that is non-reactive with the skin; and

38 M. a board approved clean needle technique examination and the board approved jurisprudence
39 examination covering the act and the rules with passing scores of not less than ninety percent (90%);

40 N. an accurate translation in English of all documents submitted in a foreign language; each
41 translated document shall bear the affidavit of the translator certifying that he or she is competent in both the
42 language of the document and the English language and that the translation is a true and faithful translation of the
43 foreign language original; each translated document shall also bear the affidavit of the translator certifying that the
44 translation is a true and faithful translation of the original; each affidavit shall be signed before a notary public; the
45 translation of any document relevant to an application shall be at the expense of the applicant.

46 [16.2.16.10 NMAC - N, 02-15-05; A, 9-25-06; A, 12-26-08]

47
48 **16.2.16.11 CERTIFIED AURICULAR DETOXIFICATION SPECIALIST SCOPE OF PRACTICE**
49 **AND TITLE:**

50 A. A certified auricular detoxification specialist is authorized to perform only the following, for the
51 purpose of harm reduction or treating and preventing alcoholism, substance abuse or chemical dependency, only
52 within a board approved treatment program that demonstrates experience in disease prevention, harm reduction, or
53 the treatment or prevention of alcoholism, substance abuse or chemical dependency, and only under the supervision
54 of one or more auricular detoxification specialist supervisor(s) registered with the board:

55 (1) auricular acupuncture detoxification using the five auricular point national acupuncture
56 detoxification association (NADA) procedure, or other board approved auricular procedure; and

(2) the application to the ear of simple board approved devices that do not penetrate the skin using the five auricular point national acupuncture detoxification association (NADA) procedure, or other board approved auricular procedure; and

B. the board approved devices that do not penetrate the skin of the ear are:

(1) seeds or grains;

(2) stones;

(3) metal balls;

(4) magnets; and

(5) any small sterilized, spherical object that is non reactive with the skin; and

C. a certified auricular detoxification specialist is authorized to use the title certified auricular detoxification specialist or CADS.

[16.2.16.11 NMAC - N, 02-15-05; A, 12-26-08]

16.2.16.12 CERTIFIED AURICULAR DETOXIFICATION SPECIALIST RENEWAL GENERAL REQUIREMENTS:

A. Except as provided otherwise in the act, or in these rules, or pursuant to other State law, including but not limited to the board's right to deny an application for renewal pursuant to Section 61-14A-17 NMSA 1978, and the Parental Responsibility Act, NMSA 1978, Section 40-5A-1, et seq., each certified auricular detoxification specialist shall be granted renewal of his or her certification for one year upon receipt and approval by the board or its designee, completion of the requirements specified in Section 13 of 16.2.16 NMAC (Part 16 of the rules).

B. Any applicant for renewal who is licensed, certified, registered or legally recognized to practice any profession, including health care professions, in any jurisdiction, pursuant to any authority other than the New Mexico Acupuncture and Oriental Medicine Practice Act, shall provide an affidavit regarding the disciplinary record of the applicant since last renewing his or her certification with the board.

C. Any applicant for renewal who has been subject to any action or proceeding comprehended by Subsection D of 16.2.16.13 NMAC (Section 13 of Part 16 of the rules), may be subject to disciplinary action at any time, including denial, suspension or revocation of certification, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA 1978, Section 28-2-1, et seq.

D. Any applicant for renewal who provides the board with false information or makes a false statement to the board may be subject to disciplinary action at any time, including denial, suspension or revocation of certification, pursuant to the provisions of Section 61-14A-17 NMSA 1978, and the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq.

[16.2.16.12 NMAC - N, 02-15-05]

16.2.16.13 CERTIFIED AURICULAR DETOXIFICATION SPECIALIST RENEWAL: Upon approval of a certified auricular detoxification specialist renewal application that fulfills the requirements listed below, the board shall renew the certification, which shall be valid until July 31 of the next year. The application requirements for certification renewal shall be receipt of the following by the board:

A. the auricular detoxification specialist certification renewal fee specified in 16.2.10 NMAC (Part 10 of the rules) paid by check or money order in U.S. funds, or by credit card in U.S. funds if using the board's online renewal process; and

B. a certified auricular detoxification specialist renewal application that is complete and in English on a form provided by the board that shall include the applicant's name, address, date of birth and social security number; and

C. the name of the auricular detoxification specialist supervisor(s) registered with the board who will supervise the applicant if known and notice of which of these is to be the primary supervisor; and

D. an affidavit as provided on the certified auricular detoxification specialist renewal form as to whether the applicant since last receiving or renewing his or her certification with the board:

(1) has been subject to any disciplinary action in any jurisdiction related to the practice of auricular detoxification, or related to any other profession including other health care professions for which the applicant is licensed, certified, registered or legally recognized to practice including resignation from practice, withdrawal or surrender of applicants license, certificate or registration during the pendency of disciplinary proceedings or investigation for potential disciplinary proceedings; or

(2) has been a party to litigation in any jurisdiction related to the applicant's practice of auricular detoxification, or related to any other profession including other health care professions for which the applicant is licensed, certified, registered or legally recognized to practice; or

(3) has been convicted of a felony in any jurisdiction, including any finding of guilt by a court or jury, or any plea of guilty, or any plea of nolo contendere or no contest, or plea or disposition of conditional discharge, and including any such proceeding in which a sentence was imposed, suspended or deferred; or

(4) is in arrears on a court-ordered child support payment; or

(5) has violated any provision of the act or the rules; and

E. an affidavit as provided on the certified auricular detoxification specialist renewal form certifying a record free of convictions for drug or alcohol related offenses for a minimum of one (1) year prior to application for renewal; and

F. an affidavit as provided on the certified auricular detoxification specialist renewal form stating that the applicant understands that:

(1) an applicant who has been subject to any action or proceeding comprehended by Subsection C of 16.2.8.10 NMAC (Section 10 of Part 8 of the rules) may be subject to disciplinary action at any time, including denial, suspension or revocation of licensure, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17; and subject to the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq., and subject to the Criminal Offender Employment Act, NMSA 1978, Section 28-2-1, et seq; and

(2) an applicant who provides the board with false information or makes a false statement to the board may be subject to disciplinary action, including denial, suspension or revocation of licensure, pursuant to the provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978, Section 61-1-1, et seq.; and

G. an affidavit as provided on the certified auricular detoxification specialist renewal form stating that the applicant understands that:

(1) the applicant is responsible for reading, understanding and complying with the state of New Mexico laws and rules regarding this application as well as the practice of auricular detoxification and supervision; and

(2) the certification must be renewed annually by July 31; and

(3) the applicant must notify the board within ten (10) days if the applicant's address changes; and

H. if the applicant renews using the board's online application process, the applicant shall check all appropriate affidavit check boxes in the online application and the applicant's agreement to pay by credit card shall be equivalent to the applicant's witnessed signature and notary's stamp and signature normally required by the above affidavits; and

I. an accurate translation in English of all documents submitted in a foreign language; each translated document shall bear the affidavit of the translator certifying that he or she is competent in both the language of the document and the English language and that the translation is a true and faithful translation of the foreign language original; each translated document shall also bear the affidavit of the translator certifying that the translation is a true and faithful translation of the original; each affidavit shall be signed before a notary public; the translation of any document relevant to an application shall be at the expense of the applicant; and

J. satisfactory proof as determined by the board of completion of any continuing education requirements established by the board.

[16.2.16.13 NMAC - N, 02-15-05; A, 12-26-08]

16.2.16.14 CERTIFIED AURICULAR DETOXIFICATION SPECIALIST LATE RENEWAL: A

certified auricular detoxification specialist whose application to renew his or her certification is received late at the board's office during the sixty (60) day period following the required date of renewal shall have his or her certification renewed if the applicant for late certification renewal completes the requirements of 16.2.16.13 NMAC (Section 13 of Part 16 of the rules) and pays the auricular detoxification specialist certification late renewal fee specified in 16.2.10 NMAC (Part 10 of the rules).

[16.2.16.14 NMAC - N, 02-15-05]

16.2.16.15 CERTIFIED AURICULAR DETOXIFICATION SPECIALIST EXPIRED

CERTIFICATION: The certification of a certified auricular detoxification specialist who has not renewed his or her certification, including any required continuing education requirements, within the sixty (60) day period following the required date of renewal is expired and that certified auricular detoxification specialist shall not

practice auricular detoxification. Such an applicant seeking valid certification shall apply with the board as a new applicant.

[16.2.16.15 NMAC - N, 02-15-05]

16.2.16.16 CERTIFIED AURICULAR DETOXIFICATION SPECIALIST INACTIVE STATUS: A certified auricular detoxification specialist in good standing may place his or her certification on inactive status for up to three (3) years by notifying the board of his or her intention to do so. Renewal fees will not be due during the period of inactivity. The certified auricular detoxification specialist shall not engage in the practice of auricular detoxification while the certification is inactive. If certification has not been reactivated within three years of its being placed on inactive status, the certification shall be considered expired. Should the certified auricular detoxification specialist wish to reactivate an inactive certification, he or she may do so by notifying the board, and with board approval, performing eight complete auricular detoxification treatments directly supervised by a registered auricular detoxification supervisor within a board-approved training or treatment program within three (3) months prior to reactivation; satisfying any additional requirements for certification imposed by the board at the time of recertification; paying a single auricular detoxification specialist certification renewal fee specified in 16.2.10 NMAC (Part 10 of the rules); and complying with all other requirements of 16.2.16.13 NMAC (Section 13 of Part 16 of the rules).

[16.2.16.16 NMAC - N, 02-15-05; A, 12-26-08]

16.2.16.17 AURICULAR DETOXIFICATION SPECIALIST SUPERVISOR REQUIREMENTS AND RESPONSIBILITIES:

A. The auricular detoxification specialist supervisor shall:

- (1) be a licensed doctor of oriental medicine; ~~and~~
- (2) be registered with the board as an auricular detoxification specialist supervisor; ~~and~~
- (3) supervise no more than thirty (30) certified auricular detoxification specialists; ~~and~~
- (4) be accessible for consultation directly or by telephone to a certified auricular detoxification specialist under his or her supervision; ~~and~~
- (5) directly visit each certified auricular detoxification specialist under his ~~or her~~ supervision at the treatment program site at intervals of not more than six (6) weeks with the first visit occurring not more than two (2) weeks after supervision has begun for the first year, then once per year thereafter at the supervisor's discretion with regular meetings by electronic methods (telephone, email, teleconferencing as examples) at intervals to be determined by the supervisor; ~~and~~
- (6) be responsible for having each certified auricular detoxification specialist under his or her supervision require each patient to complete a written, signed consent form outlining the responsibilities of the certified auricular detoxification specialist, the nature of the treatment, expected outcomes, and the scope and limits of practice; ~~and~~
- (7) ensure that the certified auricular detoxification specialist is following a board approved treatment protocol; and
- (8) notify the board in writing, within five (5) days working days, when a certified auricular detoxification specialist enters into a supervisory relationship with the auricular detoxification specialist supervisor or the supervisory relationship is terminated; and

B. an auricular detoxification specialist supervisor shall be responsible for the delivery of competent, professional services and ensuring that patient consents are obtained; and

C. the auricular detoxification specialist supervisor shall terminate the supervisory relationship if the auricular detoxification specialist supervisor has the reasonable belief that the certified auricular detoxification specialist has violated the act or the rules; in such case the auricular detoxification specialist supervisor shall notify the board and the certified auricular detoxification specialist's employer, in writing, within five (5) working days that the supervisory relationship is terminated and give in writing the reasons for the termination.

[16.2.16.17 NMAC - N, 02-15-05; A, 9-25-06; A, 12-26-08; A, XX-XX-XX]

16.2.16.18 AURICULAR DETOXIFICATION SPECIALIST SUPERVISOR REGISTRATION APPLICATION: Upon approval of an auricular detoxification specialist supervisor registration application that fulfills the requirements listed below, the board shall issue an auricular detoxification specialist supervisor registration that will be valid until July 31 following the initial registration. In the interim between regular board meetings, whenever a qualified applicant for auricular detoxification specialist supervisor registration has filed his ~~or her~~ application and complied with all other requirements of this section, the board's chairman or an authorized

representative of the board may grant an interim temporary auricular detoxification specialist supervisor registration that will suffice until the next regular meeting of the board. In no event shall the auricular detoxification specialist supervisor begin supervising a certified auricular detoxification specialist until the auricular detoxification specialist supervisor registration or interim temporary auricular detoxification specialist supervisor registration is issued by the board. The application requirements for an auricular detoxification specialist supervisor registration shall be receipt of the following by the board:

A. the auricular detoxification specialist supervisor registration application fee specified in 16.2.10 NMAC [~~Part 10 of the rules~~]; and

B. proof of successful completion of an official national acupuncture detoxification association (NADA) course, or another board-approved training program, or a CV demonstrating experience, or education in the field of harm reduction and alcoholism, substance abuse and chemical dependency at least equivalent to that provided in a NADA training, and three (3) letters of reference attesting to the applicant's competence and experience in the field of auricular treatment for harm reduction, auricular treatment of alcoholism, substance abuse or chemical dependency; and

C. an application for auricular detoxification specialist supervisor registration that is complete and in English on a form provided by the board that shall include the applicant's name, address, date of birth and social security number; and

D. the names of all certified auricular detoxification specialists certified with the board who are under the supervision of the applicant; and

E. an affidavit as provided on the auricular detoxification specialist supervisor registration application form stating that the applicant understands that:

(1) a certified auricular detoxification specialist is authorized to perform only the following, for the purpose of harm reduction or treating and preventing alcoholism, substance abuse or chemical dependency and only within a board approved substance abuse treatment program that demonstrates experience in disease prevention, harm reduction, or the treatment or prevention of alcoholism, substance abuse or chemical dependency:

(a) auricular acupuncture detoxification using the five auricular point national acupuncture detoxification association (NADA) procedure or other board approved procedure; and

(b) the application to the ear of simple board approved devices that do not penetrate the skin using the five auricular point national acupuncture detoxification association (NADA) procedure and that the board approved devices that do not penetrate the skin are: seeds, grains, stones, metal balls, magnets and any small sterilized, spherical object that in non-reactive with the skin; and

(2) the auricular detoxification specialist supervisor shall not be a member of the certified auricular detoxification specialist's family or a member of the certified auricular detoxification specialist's household or have a conflict of interest with the certified auricular detoxification specialist as defined in 16.2.16.21 NMAC [~~Section 21 of Part 16 of the rules~~]. Exceptions may be made by the board on an individual basis due to limited availability of certified auricular detoxification specialists or supervisors; and

(3) the applicant is responsible for reading, understanding and complying with the state of New Mexico laws and rules regarding this application as well as the practice of auricular detoxification and supervision; and

(4) the board may refuse to issue, or may suspend, or revoke any license or auricular detoxification specialist supervisor registration in accordance with the Uniform Licensing Act, 61-1-1 to 61-1-31 NMSA 1978, for reasons authorized in Section 61-14A-17 NMSA 1978 of the act and clarified in 16.2.12 NMAC [~~Part 12 of the rules~~]; and

F. an affidavit as provided on the auricular detoxification specialist supervisor registration application form stating that the applicant understands that the auricular detoxification specialist supervisor shall:

(1) be registered with the board as an auricular detoxification specialist supervisor; [~~and~~]

(2) supervise no more than thirty (30) certified auricular detoxification specialists; [~~and~~]

(3) be accessible for consultation directly or by telephone to a certified auricular detoxification specialist under his or her supervision; [~~and~~]

(4) directly visit each certified auricular detoxification specialist under his [~~or her~~] supervision at the treatment program site at intervals of not more than six (6) weeks for the first year, then once per year thereafter at the supervisor's discretion with regular meetings by electronic methods (telephone, email, teleconferencing as examples) at intervals to be determined by the supervisor; [~~and~~]

(5) verify that each certified auricular detoxification specialist under his or her supervision has had each patient sign a consent form outlining the responsibilities of the certified auricular detoxification specialist, the nature of the treatment, expected outcomes, and the scope and limits of practice; [~~and~~]

(6) ensure that the certified auricular detoxification specialist is using a board approved treatment protocol; ~~and~~

(7) notify the board in writing, within five (5) days working days, when a certified auricular detoxification specialist enters into a supervisory relationship with the auricular detoxification specialist supervisor or the supervisory relationship is terminated; ~~and~~

(8) be responsible for the delivery of competent professional services and ensuring that patient consents have been obtained; ~~and~~

(9) terminate the supervisory relationship if the auricular detoxification specialist supervisor has the reasonable belief that the certified auricular detoxification specialist has violated the act or the rules or if a conflict of interest arises during the supervision; the auricular detoxification specialist supervisor shall notify the board and the CADS's employer, in writing, within five (5) working days that the supervisory relationship is terminated and give in writing the reasons for the termination; and

(10) notify the board within ten (10) days if the auricular detoxification supervisor's address changes or phone number changes.

[16.2.16.18 NMAC - N, 02-15-05; A, 12-26-08; A, XX-XX-XX]

16.2.16.19 CHANGE OF SUPERVISOR: If the auricular detoxification specialist supervisor relationship terminates for any reason, each party must notify the board in writing within five (5) working days of this fact.

[16.2.16.19 NMAC - N, 02-15-05]

16.2.16.20 COMPENSATION: Any compensation contract is solely between the auricular detoxification specialist supervisor and the certified auricular detoxification specialist's employing program or agency and is not the province of the board.

[16.2.16.20 NMAC - N, 02-15-05; A, 12-26-08]

16.2.16.21 AURICULAR DETOXIFICATION SPECIALIST SUPERVISOR CONFLICT OF INTEREST: An auricular detoxification specialist supervisor shall not be a member of the certified auricular detoxification specialist's family or a member of the certified auricular detoxification specialist's household. "Member of the certified auricular detoxification specialist's family" means a spouse, child, stepchild, grandchild, parent, grandparent, sibling, uncle, aunt, niece, or nephew, or other relative by blood, marriage, or legal process with whom the supervisor has or has had a close familial relationship. The supervisor shall not have a conflict of interest with the certified auricular detoxification specialist, such as a past or present familial, social, fiduciary, business, financial, or physician-patient relationship, that impairs or compromises or appears to impair or compromise the supervisor's neutrality, independence, or objectivity. If a conflict of interest arises during the supervision, the supervisor shall immediately report the conflict of interest to the board and shall cease supervision of the certified auricular detoxification specialist. Exceptions may be made by the board on an individual basis due to limited availability of certified auricular detoxification specialists or supervisors.

[16.2.16.21 NMAC - N, 02-15-05]

16.2.16.22 [RESERVED]

[16.2.16.22 NMAC - N, 02-15-05; Repealed, 12-26-08]

16.2.16.23 [RESERVED]

[16.2.16.23 NMAC - N, 02-15-05; Repealed, 12-26-08]

16.2.16.24 [RESERVED]

[16.2.16.24 NMAC - N, 02-15-05; Repealed, 12-26-08]

16.2.16.25 [RESERVED]

[16.2.16.25 NMAC - N, 02-15-05; Repealed, 12-26-08]

16.2.16.26 AURICULAR DETOXIFICATION SPECIALIST TRAINING PROGRAM APPROVAL: Upon approval of an auricular detoxification specialist training program approval application that fulfills the requirements listed below, the board shall issue an auricular detoxification specialist training program approval that will be valid until July 31 following the initial registration. In the interim between regular board meetings, whenever a qualified applicant for auricular detoxification specialist training program approval has filed an

1 application and complied with all other requirements of this section, the board's chairman or an authorized
2 representative of the board may grant an interim temporary auricular detoxification specialist training program
3 approval that will suffice until the next regular meeting of the board. The application requirements for an auricular
4 detoxification specialist training program approval shall be receipt of the following by the board:

5 A. the auricular detoxification specialist training program approval application fee specified in
6 16.2.10 NMAC (Part 10 of the rules); and

7 B. an application for auricular detoxification specialist training program approval that is complete
8 and in English on a form provided by the board that shall include the applicant's name, address, phone number, fax
9 number and email address, if available; and

10 C. a curriculum that shall include at least:

11 (1) 30 hours of classroom didactic education covering the following subjects related to auricular
12 detoxification: history and overview of the auricular detoxification profession; point descriptions, and locations and
13 use of the NADA five auricular point national acupuncture detoxification association (NADA) procedure or other
14 board approved procedures; acupuncture needle description, insertion and removal techniques, the use of devices
15 that do not penetrate the skin of the ear; trial treatment (explanation of what happens during a treatment and practice
16 on class members); public health and laws and regulations; exposure control; clean needle technique training;
17 occupational health and safety administration (OSHA) requirements; integration of auricular detoxification within
18 the treatment program; concepts of acupuncture and oriental medicine as related to addiction and recovery (the
19 concept of "empty fire", etc.); client management issues and strategies (special populations); ethical and legal issues
20 (confidentiality, HIPAA, the pertinent laws and rules of the state of New Mexico, etc.); and the nature of addiction
21 and recovery; and

22 (2) 40 client hours (40 successfully completed treatments) under direct supervision by a board
23 approved CADS supervisor at a site and with a supervisor pre-approved in writing by the training program,
24 documented by a HIPAA-compliant form in which the privacy of clients is respected; and

25 D. an affidavit as provided on the auricular detoxification specialist training program approval
26 application form stating that the applicant understands that:

27 (1) the auricular detoxification specialist training program must provide each person who
28 successfully completes the approved program with a certification of completion; and

29 (2) the auricular detoxification specialist training program registration must be renewed annually by
30 July 31; and

31 (3) the auricular detoxification specialist training program must notify the board within ten (10) days
32 if the program's address or phone number changes; and

33 (4) the board may refuse to issue, or may suspend, or revoke any auricular detoxification specialist
34 training program approval in accordance with the Uniform Licensing Act, 61-1-1 to 61-1-31 NMSA 1978, for
35 reasons authorized in Section 61-14A-17 NMSA 1978 of the act and clarified in 16.2.12 NMAC (Part 12 of the
36 rules); and

37 E. the name or names of the trainer(s) who shall be teaching in the program and copies of their
38 qualifications as trainers from NADA or other oriental medicine and auricular acupuncture drug detoxification, harm
39 reduction, substance abuse or relapse-prevention-related education and experience approved by the board to train
40 auricular detoxification specialist trainers; and

41 F. approval of a training program shall entail recognition that its trainers have the status of certified
42 auricular detoxification specialists and CADS supervisors within and for the purpose of and for the duration of a
43 training course.

44 [16.2.16.26 NMAC - N, 02-15-05; A, 12-26-08]

46 **16.2.16.27 AURICULAR DETOXIFICATION SPECIALIST TRAINING PROGRAM RENEWAL:**

47 Upon approval of an auricular detoxification specialist training program renewal application that fulfills the
48 requirements listed below, the board shall renew the approval, which shall be valid until July 31 of the next year.
49 The application requirements for approval renewal shall be receipt of the following by the board:

50 A. the auricular detoxification specialist training program approval renewal fee specified in 16.2.10
51 NMAC (Part 10 of the rules) paid by check or money order in U.S. funds, or by credit card in U.S. funds if using the
52 board's online renewal process; and

53 B. an application for auricular detoxification specialist training program renewal that is complete and
54 in English on a form provided by the board that shall include the applicant's name, address, phone number, fax
55 number and email address, if available; and

1 C. an affidavit as provided on the auricular detoxification specialist training program renewal of
2 approval application form stating that the program continues to provide at a minimum the curriculum required by the
3 board in 16.2.16.26 NMAC (Section 26 of Part 16 of the rules); and

4 D. an affidavit as provided on the auricular detoxification specialist training program renewal of
5 approval application form stating that the applicant understands that:

6 (1) the auricular detoxification specialist training program must provide each person who
7 successfully completes the approved program with a certificate of completion; and

8 (2) the auricular detoxification specialist training program registration must be renewed annually by
9 July 31; and

10 (3) the auricular detoxification specialist training program must notify the board within ten (10) days
11 if the program's address or phone number changes; and

12 (4) the board may refuse to issue, or may suspend, or revoke any auricular detoxification specialist
13 training program approval in accordance with the Uniform Licensing Act, 61-1-1 to 61-1-31 NMSA 1978, for
14 reasons authorized in Section 61-14A-17 NMSA 1978 of the act and clarified in 16.2.12 NMAC (Part 12 of the
15 rules); and

16 E. if the applicant renews using the board's online application process, the applicant shall check all
17 appropriate affidavit check boxes in the online application and the applicant's agreement to pay by credit card shall
18 be equivalent to the applicant's witnessed signature and notary's stamp and signature normally required by the
19 above affidavits.

20 [16.2.16.27 NMAC - N, 02-15-05; A, 12-26-08]

21
22 **16.2.16.28 TREATMENT PROGRAM APPROVAL:** All treatment programs for disease prevention, harm
23 reduction or the treatment or prevention of alcoholism, substance abuse or chemical dependency that are officially
24 recognized by a federal, state or local government agency shall automatically be approved by the board. Upon
25 approval of a treatment program application for approval that fulfills the requirements listed below, the board shall
26 issue a treatment program approval. In the interim between regular board meetings, whenever a qualified applicant
27 for a treatment program approval has filed an application and complied with all other requirements of this section,
28 the board's chairman or an authorized representative of the board may grant an interim temporary treatment program
29 approval that will suffice until the next regular meeting of the board. The application requirements for a treatment
30 program approval shall be receipt of the following by the board:

31 A. the treatment program approval application fee specified in 16.2.10 NMAC (Part 10 of the rules);

32 B. an application for treatment program approval that is complete and in English on a form provided
33 by the board that shall include the applicant's name, address, phone number, fax number and email address, if
34 available, and:

35 (1) confirmation that the treatment program is for disease prevention, harm reduction or the treatment
36 or prevention of alcoholism, substance abuse or chemical dependency; and

37 (2) whether the facility is at a fixed address or is mobile; and

38 (3) the name of the director of the program; and

39 (4) the number and qualifications of the treatment staff; and

40 C. an affidavit as provided on the treatment program approval application form stating that the
41 facility has access to a toilet and a sink; and

42 D. an affidavit as provided on the treatment program approval application form stating that the
43 applicant understands that:

44 (1) the treatment program must notify the board within ten (10) days if the program's address or
45 phone number changes; and

46 (2) the board may refuse to issue, or may suspend, or revoke any treatment program approval in
47 accordance with the Uniform Licensing Act, 61-1-1 to 61-1-31 NMSA 1978, for reasons authorized in Section 61-
48 14A-17 NMSA 1978 of the act and clarified in 16.2.12 NMAC (Part 12 of the rules).

49 [16.2.16.28 NMAC - N, 02-15-05; A, 12-26-08]

50
51 **16.2.16.29 GROUNDS FOR DENIAL, SUSPENSION OR REVOCATION OF LICENSE,**
52 **CERTIFICATION, REGISTRATION OR APPROVAL:** The board may refuse to issue, or may suspend, or
53 revoke any license, certification, registration or approval in accordance with the Uniform Licensing Act, 61-1-1 to
54 61-1-31 NMSA 1978, for reasons authorized in Section 61-14A-17 NMSA 1978 of the act and clarified in 16.2.12
55 NMAC (Part 12 of the rules).

56 [16.2.16.29 NMAC - N, 02-15-05]

1
2 **History of 16.2.16 NMAC:**
3 Pre-NMAC History: None.
4
5 **History of Repealed Material:** [Reserved]
6

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 18 EXPANDED PRACTICE EDUCATIONAL COURSES

16.2.18.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[16.2.18.1 NMAC - N, XX-XX-XX]

16.2.18.2 SCOPE: All doctors of oriental medicine who are certified for expanded practice or who are applicants for certification for expanded practice, as well as all educational courses and applicants for approval of educational courses.
[16.2.18.2 NMAC - N, XX-XX-XX]

16.2.18.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Section 61-14A-8.1.
[16.2.18.3 NMAC - N, XX-XX-XX]

16.2.18.4 DURATION: Permanent.
[16.2.18.4 NMAC - N, XX-XX-XX]

16.2.18.5 EFFECTIVE DATE: XXXXXXXX, 2012, unless a later date is cited at the end of a section.
[16.2.18.5 NMAC - N, XX-XX-XX]

16.2.18.6 OBJECTIVE: Part 18 lists the prerequisites, educational course approval requirements, class hours, curriculum knowledge and skills for each of the following expanded practice categories: basic injection therapy, injection therapy, intravenous therapy and bioidentical hormone therapy.
[16.2.18.6 NMAC - N, XX-XX-XX]

16.2.18.7 EDUCATIONAL COURSE APPROVAL GENERAL REQUIREMENTS: The board shall approve an educational course for a specific category of expanded practice upon completion of the following general requirements and the specific requirements listed for the specific category of expanded practice educational course approval.

A. The educational course shall provide at least the minimum number of hours of education in the areas listed for the specific category of educational course hours. One (1) hour of education shall be equal to that defined by the accreditation commission for acupuncture and oriental medicine (ACAOM). The education shall be in addition to the education required to meet the minimum educational program requirements for licensure as a doctor of oriental medicine.

B. The educational course application shall include a description of the education being provided as required by the educational course general curriculum defined in 16.2.18 10 NMAC and the educational course curriculum defined for the specific category of expanded practice for which the educational course is applying for approval.

C. The educational course application shall include the curriculum vitae for all teachers and all classes shall be taught by qualified teachers approved by the board with the following qualifications:

(1) the education in the pharmacology of the authorized substances shall be taught by a licensed pharmacist, Pharm D or a Ph.D. in pharmacology; and

(2) the education in the clinical therapeutic use of the authorized substances shall be taught by a licensed health care practitioner with appropriate training and a minimum of five (5) years experience using the authorized substances.

D. The educational course application shall include documentation that all required clinical practice hours shall have a teacher to student ratio of at least one (1) teacher to no more than eight (8) students.

E. The educational course application shall include examples of the test questions that students enrolled in the course are required to successfully pass in order to ensure competence in all required areas. Testing methodology shall be approved by the board and testing shall be administered as approved by the board. The educational course shall send all student test scores and evaluation instruments directly to the board.

- 1 F. The educational course application shall include an example of the certificate that shall
2 be given for successful completion of the educational course.
- 3 G. Each educational course shall be completed within two (2) years of commencement of
4 that course.
- 5 H. A student who is allergic or hypersensitive to an authorized substance may be excused
6 from participating in clinical practice when such an authorized substance is being used.
- 7 I. The board has the authority to observe, audit and evaluate educational courses. Each
8 educational course applicant shall agree that the educational course may be observed, audited and evaluated
9 by an authorized member of the board or by an agent of the board, prior to approval, after approval or
10 during any educational course classes. A course audit or evaluation may result in denial, suspension or
11 revocation of the course's approval by the board in accordance with law.
- 12 J. The educational course shall specify whether the organization offering the educational
13 course is a sole proprietorship, partnership, LLC, corporation or non-profit corporation and shall provide
14 proof of such legal business status.
- 15 K. An educational course shall submit a new application on the form approved by the board,
16 pay the appropriate fee defined in 16.2.10 NMAC and comply with all other new application requirements
17 if any of the following changes:
- 18 (1) ownership;
 - 19 (2) faculty; and
 - 20 (3) curriculum.
- 21 L. An educational course shall inform the board in writing, provided that the educational
22 course certifies that all factors defined in 16.2.18 8 J NMAC remain unchanged, if any of the following
23 changes:
- 24 (1) name;
 - 25 (2) address; and
 - 26 (3) phone number.

27 [16.2.18.7 NMAC - N, XX-XX-XX]

28
29 **16.2.18.8 EDUCATIONAL COURSE APPROVAL BOARD REQUIREMENTS:**

- 30 A. The board shall have final authority for approval of all educational courses including
31 classes and teachers.
- 32 B. The board shall notify the applicant in writing by mail postmarked no more than 75 days
33 after the receipt of the initial application as to whether the application is complete or incomplete and
34 missing specified application documentation.
- 35 C. The board shall notify the applicant in writing by mail postmarked no more than 75 days
36 after the notice of receipt of the complete application sent out by the board, whether the application is
37 approved or denied.
- 38 D. If the application is denied, the notice of denial shall state the reason the application was
39 denied.
- 40 E. In the interim between regular board meetings the board's chairman or an authorized
41 representative of the board shall issue an interim temporary educational course approval to a qualified
42 applicant who has filed, with the board, a complete application and complied with all requirements for
43 educational course approval. The interim temporary educational course approval shall automatically expire
44 on the date of the next regular board meeting and final educational course approval shall only be granted by
45 the board.

46 [16.2.18.8 NMAC - N, XX-XX-XX]

47
48 **16.2.18.9 EDUCATIONAL COURSE PREREQUISITES:**

- 49 A. Proof of completion of a course in pharmacology from an accredited institution or the
50 equivalent of at least three (3) college or university credit hours (30-45 contact hours) in pharmacology
51 from an accredited college or university. If the applicant prefers they can sit for a pharmacology final exam
52 at an accredited institution;
- 53 B. proof of completion of a four (4) hour American heart association approved CPR or basic
54 life support (BLS) course. A current card will serve as proof; and

C. proof of completion of a two (2) hour instruction from an approved American heart association provider in the use of inhaled O₂ and IM epinephrine for emergency use or inclusion of that education and training in the basic education course curriculum.

D. The basic injection course is a prerequisite to injection therapy certification and intravenous therapy certification.

[16.2.18.9 NMAC - N, XX-XX-XX]

16.2.18.10 EDUCATIONAL COURSE GENERAL CURRICULUM: The educational program shall provide the doctor of oriental medicine, who successfully completes the program, with the following entry level general knowledge and skills, at the current professional standard of care within the context of an integrative healthcare system., as well as the specific entry level knowledge and skills, at the current professional standard of care within the context of an integrative healthcare system, defined for the specific category of expanded practice educational program approval.

A. Expanded practice and prescriptive authority and oriental medicine: knowledge of how the principles of the developmental system of oriental medicine such as yin, yang, qi and xue apply to the expanded practice certifications as well as an understanding of the expanded practice as a development in the evolution of oriental medicine.

B. Biomedical knowledge: knowledge of anatomy, physiology, pathology, endocrinology, biochemistry, pharmacology and diagnostic options sufficient to provide a foundation for the knowledge and skills required for the specific category of expanded practice.

C. Pharmacology:

(1) knowledge of the biochemistry, pharmacology, clinical application, safety and handling, side effects, interactions, contraindications, safeguards and emergency procedures for all authorized substances in the formulary defined for the relevant specific category of expanded practice;

(2) knowledge of how to make a differential diagnosis relative to the prescription or administration of authorized substances in the formulary defined for the relevant specific category of expanded practice;

(3) knowledge of the potency and appropriate dosage of single and combined authorized substances in the formulary defined for the relevant specific category of expanded practice;

(4) knowledge of and skill in utilizing appropriate clinic based aseptic technique; and

(5) knowledge of the compounding requirements of the United States pharmacopeia and National formulary (USP-NF) with regard to the authorized substances in the formulary defined for the relevant specific category of expanded practice.

D. Referral:

(1) understanding the limits of their training, knowledge and skill and when it is appropriate to refer; and

(2) knowledge of the options available regarding referral including an understanding of the potential benefit or contraindications of all categories of expanded practice.

E. Emergency Care (Previous CPR/BLS certification):

(1) knowledge of how to recognize a medical emergency situation arising in the clinic and what emergency outcomes may arise relative to performing the authorized diagnostic and therapeutic procedures and the prescription or administration of the specifically authorized substances, what procedures and substances are best for managing each emergency situation and whom to contact for emergency support and care;

(2) skill in providing first aid until the medical emergency team arrives;

(3) appropriate initial screening for potential allergic or adverse reactions;

(4) skill in identifying and responding to adverse or allergic reactions or mild to severe; vasovagal reactions with knowledge of appropriate support measures depending on the type of reaction:

(a) patient reassurance;

(b) patient positioning;

(c) oral OTC diphenhydramine (benadryl) if appropriate;

(d) inhaled oxygen;

(e) inhaled OTC epinephrine (primatine mist) or IM injected epinephrine if

appropriate; and

(f) emergency ambulance transport;

- (5) knowledge of the immediate and longer term indications of inadvertent pneumothorax and the appropriate procedure for patient care and guidance in such situations.
- F. Record keeping, storage and dispensing of dangerous drugs and controlled substances:
- (1) knowledge of the proper storage requirements in the clinic for the drugs, dangerous drugs and controlled substances in the specifically authorized formulary;
 - (2) knowledge of how to keep accurate records of all authorized drugs, dangerous drugs and controlled substances obtained, stored, compounded, administered or dispensed; and
 - (3) skill in appropriately handling and using appropriate clean or aseptic technique for all drugs, dangerous drugs and controlled substances in the specifically authorized formulary.
- G. Pharmaceutical law:
- (1) knowledge of the appropriate areas of New Mexico pharmaceutical law;
 - (2) knowledge of the appropriate areas of the United States pharmacopeia and national formulary (USP-NF) that relate to compounding of the authorized substances in the formulary defined for the relevant specific category of expanded practice; and
 - (3) knowledge of drugs, dangerous drugs, and controlled substances and what dangerous drugs or controlled substances that are or are not authorized under the provisions of the specific category or categories of expanded practice for which he is certified.
- H. Scope of practice:
- (1) knowledge of the areas of the New Mexico Acupuncture and Oriental Medicine Practice Act and the rules of the New Mexico Board of Acupuncture and Oriental Medicine that are appropriate to the scope of practice of a doctor or oriental medicine certified for the specific category of expanded practice;
 - (2) understanding and knowledge of what diagnostic or therapeutic procedures are authorized by the specific category of expanded practice; and
 - (3) understanding and knowledge of what substances in a specific formulary are authorized for use by doctors of oriental medicine certified for the specific category of expanded practice.
- [16.2.18.10 NMAC - N, XX-XX-XX]

16.2.18.11 BASIC INJECTION THERAPY EDUCATIONAL COURSE APPROVAL: The board shall approve a basic injection therapy educational program upon completion of the following requirements. The educational course shall submit to the board:

- A. The completed application form provided by the board;
 - B. payment of the application fee for expanded practice educational course approval specified in 16.2.10 NMAC;
 - C. documentation that it will comply with all educational course approval general requirements defined in 16.2.18.8 NMAC;
 - D. documentation demonstrating that it will provide the educational course general curriculum defined in 16.2.18.10 NMAC;
 - E. documentation demonstrating that it will provide the basic injection therapy educational course hours defined in 16.2.18.12 NMAC; and
 - F. documentation demonstrating that it will provide the basic injection therapy educational course curriculum defined in 16.2.18.13 NMAC.
- G. documentation of examination and testing to be administered to each applicant with a passing grade of 70 to be required for certification to demonstrate learned knowledge.
- [16.2.18.11 NMAC - N, XX-XX-XX]

16.2.18.12 BASIC INJECTION THERAPY EDUCATIONAL COURSE HOURS: The education shall consist of a minimum total of 56 contact hours (the equivalent of eight (8) seven (7) hour days of education) with at least the minimum number of hours of education in the areas listed below:

- A. a minimum of eight (8) hours in pharmacology and biomedical differential diagnosis relative to the prescription, administration, compounding and dispensing of the authorized substances in the basic injection therapy formulary including homeopathic medicines;
- B. a minimum of two (2) hours in the drawing and compounding of the authorized substances intended for injection utilizing approved aseptic technique and proper record keeping, storage and dispensing of substances. At least half of the required hours shall be clinical practice;

C. a minimum of fourteen (14) hours in orthopedic and neurological evaluation. At least half of these required hours shall be clinical practice;

D. a minimum of two (2) hours in the theory and practice of vapocoolant spray and stretch techniques using the authorized vapocoolants. At least half of these required hours shall be clinical practice;

E. a minimum of twenty-eight (28) hours in the theory and practice of injection therapy including: eleven (11) hours of trigger point therapy and injection of acupuncture points; eleven (11) hours of basic mesotherapy; six (6) hours of basic neural therapy, and therapeutic injections (vitamins), using the authorized substances in the basic injection therapy formulary. At least half of these required hours shall be clinical practice;

F. a minimum of one (1) hour in pharmaceutical law as provided by the New Mexico board of pharmacy; and

G. a minimum of one (1) in oriental medicine scope of practice relative to the authorized substances and techniques.

[16.2.18.12 NMAC - N, XX-XX-XX]

16.2.18.13 BASIC INJECTION THERAPY EDUCATIONAL COURSE CURRICULUM: The basic injection therapy educational course curriculum shall provide the doctor of oriental medicine, who successfully completes the course, with the educational course general curriculum knowledge and skills defined in 16.2.18.10 NMAC and the following specific knowledge and skills:

A. orthopedic and neurological physical exam and differential diagnosis:

(1) knowledge of anatomy of the regions to be examined and treated;

(2) knowledge of the most common orthopedic pain differential diagnoses for these areas as well as other medical differential diagnoses that should be ruled out;

(3) skill in interpreting physical exam signs in context as evidence for or against the differential diagnoses;

(4) knowledge of the most important treatment options for these differential diagnoses including but not limited to injection therapy, spray and stretch therapy, exercise, physical medicine, manipulation, manual medicine, acupuncture, moxibustion, medical therapy with herbal medicine, supplements, homeopathic medicines and diet therapy;

(5) knowledge of which basic imaging methods, if any, are useful in the examination of the above differential diagnoses; and

(6) skill in selecting and performing the most appropriate basic orthopedic and neurologic physical examination methods including but not limited to the most basic forms of reflex testing, motor power testing, sensory exam, common orthopedic provocations, ligament stretch testing, accurate palpation and marking of anatomic landmarks, ligament and tendon compression testing and myofascial trigger point compression.

B. General injection therapy:

(1) knowledge of the needles, syringes and other equipment used to perform the various types of injection therapy;

(2) knowledge of appropriate aseptic techniques and clean needle procedures and techniques;

(3) knowledge of the various solutions used in the various styles of injection therapy and skill in properly drawing and compounding into syringes the authorized substances intended for injection, using approved aseptic technique;

(4) knowledge of how to generate and carry out a comprehensive treatment plan that addresses the causative factors leading to pain and dysfunction from the perspective of the understanding of each style of injection therapy, offers post treatment palliation and provides post therapy recommendations to support rehabilitation and prevent recurrence;

(5) knowledge of how to explain to the patient the purpose of the therapy, the expected outcome and possible complications of the therapy that could occur;

(6) understanding that injection therapy techniques authorized for the basic injection therapy certification are limited to intradermal, subcutaneous and intramuscular, injections; and

(7) knowledge of the anatomical locations that are relatively safe for injection therapy, as well as those locations that should be avoided for injection therapy.

C. Acupuncture point injection therapy:

- (1) knowledge of how acupuncture point injections can complement traditional acupuncture;
 - (2) knowledge of the conditions that can be treated with acupuncture point injections; and
 - (3) skill in injecting acupuncture points.
- D. Trigger point therapy:
- (1) knowledge of what a trigger point is, what the causative factors leading to trigger points are, what the most common perpetuating factors are and how to recognize and identify the most common pain referral patterns in the head, back, hip and extremities;
 - (2) knowledge of how to locate and palpate trigger points; and
 - (3) skill in locating, injecting and spraying and stretching the most commonly treated trigger points and muscles.
- E. Neural therapy:
- (1) knowledge of the relationship between interference fields, the autonomic nervous system, pain and disease;
 - (2) skill in identifying common interference fields in the body; and
 - (3) skill in injecting common neural therapy injection sites such as peripheral nerves, scars, tonsils, intercutaneous and subcutaneous sites.
- F. Mesotherapy:
- (1) knowledge of the mechanism of action of mesotherapy injections for pain and sports medicine and cosmetic treatment; and
 - (2) skill in injecting using mesotherapy methodology.
- G. Therapeutic injections:
- (1) knowledge of how to evaluate the patient and determine a treatment plan with appropriate dosage, using appropriate authorized substances; and
 - (2) skill in performing therapeutic injections at appropriate anatomical locations and depths.
- H. Local anesthesia: knowledge of basic nerve pathways for application of local anesthesia.
- [16.2.18.13 NMAC - N, XX-XX-XX]
- 16.2.18.14 [RESERVED]
- 16.2.18.15 [RESERVED]
- 16.2.18.16 [RESERVED]
- 16.2.18.17 [RESERVED]
- 16.2.18.18 [RESERVED]
- 16.2.18.19 **BIOIDENTICAL HORMONE THERAPY EDUCATIONAL COURSE APPROVAL:**
The board shall have final authority for approval of a bioidentical hormone educational program upon completion of the following requirements. The educational course shall submit to the board:
- A. the completed application form provided by the board;
 - B. payment of the application fee for expanded practice educational course approval specified in 16.2.10 NMAC;
 - C. documentation that it will comply with all educational course approval general requirements defined in 16.2.18.8 NMAC;
 - D. documentation demonstrating that it will provide the educational course general curriculum defined in 16.2.18.10 NMAC;
 - E. documentation demonstrating that it will provide the bioidentical hormone therapy educational course hours defined in 16.2.18.21 NMAC;
 - F. documentation demonstrating that it will provide the bioidentical hormone therapy educational course curriculum defined in 16.2.18.22 NMAC; and
 - G. documentation of examination and testing to be administered to each applicant with a passing grade of 70 to be required for certification to demonstrate learned knowledge.
- [16.2.18.19 NMAC - N, XX-XX-XX]

16.2.18.20 **BIOIDENTICAL HORMONE THERAPY EDUCATIONAL COURSE HOURS:** The bioidentical hormone educational course shall consist of a minimum total of 80 hours of education, with at least 24 hours of practical experience defined in 16.2.18.21 B., E. and F. NMAC in the areas listed below:

- A. a minimum of eight (8) hours in the pharmacology of bioidentical hormones;
- B. a minimum of eighteen (18) hours in an overview of the endocrine system, including the anatomy and interactive physiology of the hypothalamic-pituitary-adrenal-thyroid (HPAT) and gonadal axis, the stress response and normal adrenal and thyroid function. Also to include normal male and female sex hormone physiology. At least half of these hours shall be in practice or review of case studies;
- C. a minimum of twenty (20) hours in theory and practice of endocrinology including evaluation and treatment of the patient with hormonal dysfunction and imbalances including but not limited to; adrenal fatigue, auto-immune endocrine disorders, hypothyroid, hyperthyroid, men's hormone imbalances and women's hormonal imbalances pre, peri and post menopause and consideration and assessment for treatment with Bio-identical Hormone Replacement Therapy, BHRT. At least half of these hours will be in practice or review of case studies.
- D. a minimum of fourteen (14) hours in blood chemistry analysis including but not limited to; CBC, CMP, LFT, lipids, ferritin, homocysteine, vitamin D, iodine, hs CRP, fibrinogen, ANA, ESR, HgBAIC, insulin antibodies;
- E. a minimum of two (2) hours in urine analysis;
- F. a minimum of sixteen (16) hours in the assessment and treatment of hormone and neurotransmitter imbalances through blood, urine and saliva hormone testing and evaluation. Appropriate treatment options for the biomedical differential diagnoses including, but not limited to; adrenal fatigue, thyroid imbalances, andropause, menopausal syndrome, and other male and female hormone imbalances. At least half of these hours shall be in practice or case study review.
- G. a minimum of one (1) hour in pharmaceutical law as provided by the New Mexico board of pharmacy; and
- H. a minimum of one (1) in oriental medicine scope of practice relative to the prescription or administration of the authorized substances.

[16.2.18.20 NMAC - N, XX-XX-XX]

16.2.18.21 BIOIDENTICAL HORMONE THERAPY EDUCATIONAL COURSE

CURRICULUM: The bioidentical hormone therapy educational course curriculum shall provide the doctor of oriental medicine, who successfully completes the course, with the educational course general curriculum knowledge and skills defined in 16.2.18 10 NMAC and the following specific knowledge and skills:

- A. bioidentical hormone therapy:
 - (1) knowledge of anatomy, physiology, endocrinology, pathology, biochemistry, pharmacology, diagnostic and referral options including imaging, and clinical strategies with a focus on hormone pathways, neurotransmitter imbalances, precursors and intermediaries relevant to bioidentical hormone therapy;
 - (2) knowledge of how to perform a diagnosis of the various aspects of the endocrine and neurotransmitter system using blood, urine, and saliva testing;
 - (3) knowledge of the application, clinical use, dosage, dosage adjustment or discontinuation consequences and safety concerns relevant to all modes of administration of the authorized substances; and
 - (4) knowledge of how to explain to the patient the purpose, expected outcome, risks and possible complications of bioidentical hormone therapy as well as the advantages of bioidentical hormone therapy, relative to non bioidentical hormone therapy.
- B. Non-hormone therapy:
 - (1) knowledge of how to optimize hormone balance using authorized substances that are not hormones or are hormone precursors, and the benefits and limits of such therapy; and
 - (2) knowledge of how to explain to the patient the purpose, expected outcome, risks and possible complications of non-hormone therapy as well as the advantages of non-hormone therapy relative to bioidentical hormone therapy.

[16.2.18.21 NMAC - N, XX-XX-XX]

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 19 EXPANDED PRACTICE CERTIFICATIONS

16.2.19.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[16.2.19.1 NMAC - N, 11-28-09]

16.2.19.2 SCOPE: All doctors of oriental medicine who are certified for expanded practice or who are applicants for certification for expanded practice, as well as all educational programs and students enrolled in an educational program.
[16.2.19.2 NMAC - N, 11-28-09]

16.2.19.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Section 61-14A-8.1.
[16.2.19.3 NMAC - N, 11-28-09]

16.2.19.4 DURATION: Permanent.
[16.2.19.4 NMAC - N, 11-28-09]

16.2.19.5 EFFECTIVE DATE: November 28, 2009, unless a later date is cited at the end of a section.
[16.2.19.5 NMAC - N, 11-28-09]

16.2.19.6 OBJECTIVE: This part lists the certification requirements for each of the following expanded practice categories: basic injection therapy, injection therapy, intravenous therapy and bioidentical hormone therapy.
[16.2.19.6 NMAC - N, 11-28-09]

16.2.19.7 DEFINITIONS:
A. The definition in this section is in addition to those in the act and 16.2.1 NMAC.
B. The following definition applies to the rules and the act: **“educational course”** is a comprehensive foundation of studies, approved by the board leading to demonstration of entry level competence in the specified knowledge and skills required for the four respective certifications in expanded practice; an educational course is not an educational program as this term is used in the act and the rules and as defined in 16.2.1 NMAC.
[16.2.19.7 NMAC - N, 11-28-09]

16.2.19.8 EXPANDED PRACTICE CERTIFICATION GENERAL PROVISIONS: The four categories of expanded practice certification authorized by 61-14A-8.1. NMSA 1978 and defined in 16.2.19 NMAC that include, basic injection therapy, injection therapy, intravenous therapy and bioidentical hormone therapy shall all include the following provisions:

A. a doctor of oriental medicine or oriental medicine student enrolled in an educational course shall be authorized to perform the techniques and shall have the prescriptive authority, for the duration of the course, to administer and compound the substances that are authorized in the expanded practice formulary for which he is studying under the supervision of the board approved teacher for that educational course; under other circumstances the student shall not be authorized to obtain, prescribe or dispense such substances;

B. students enrolled in an educational program as defined in 16.2.1 NMAC shall be authorized to participate in a board approved basic injection therapy course and shall comply with the provisions of Subsection A of this section; upon successful completion of the course and submission of a complete application for certification to the board, such a student shall be appropriately certified by the board for basic injection therapy at the time of licensure as a doctor of oriental medicine;

C. the board shall maintain a list of each doctor of oriental medicine who is certified for each expanded practice category and shall notify the New Mexico board of pharmacy of all such certified licensees;

1 D. the board shall annually renew the certification or certifications of a doctor of oriental
2 medicine in good standing who is certified for expanded practice if the licensee has completed all
3 continuing education required by 16.2.9 NMAC;
4 E. all expanded practice and prescriptive authority certifications shall automatically
5 terminate when licensure as a doctor of oriental medicine:
6 (1) is placed on inactive status as specified in 16.2.15 NMAC;
7 (2) expires as specified in 16.2.8 NMAC; or
8 (3) is suspended, revoked or terminated for any reason as defined in 16.2.12 NMAC;
9 F. an expanded practice certification that is revoked or terminated shall not be reinstated;
10 the doctor of oriental medicine must reapply for expanded practice certification as a new applicant;
11 G. all expanded practice certifications that were automatically terminated due to inactive
12 status, expiration or suspension as specified in Subsection E of this section, shall be automatically
13 reinstated when licensure as a doctor of oriental medicine is reinstated, provided that:
14 (1) all fees required by 16.2.10 NMAC have been paid;
15 (2) all continuing education requirements specified in 16.2.9 NMAC have been completed;
16 and
17 (3) all other relevant, reinstatement provisions, required by board rule, have been completed;
18 H. each year the board may review the expanded practice formularies for necessary
19 amendments; when new substances are added to a formulary, appropriate education in the use of the new
20 substances shall be approved and required by the board and the board of pharmacy for doctors of oriental
21 medicine applying for new certification or as continuing education for renewal of the applicable expanded
22 practice certification or certifications;
23 I. a doctor of oriental medicine certified for a category of expanded practice under 16.2.19
24 NMAC that authorizes the use of testosterone, a controlled substance, and any other drug that is classified
25 as a controlled substance, shall register with the federal DEA (drug enforcement agency) prior to obtaining,
26 prescribing, administering, compounding or dispensing the controlled substance;
27 J. a doctor of oriental medicine certified for expanded practice, when prescribing, shall use
28 prescription pads printed with his or her name, address, telephone number, license number and his or her
29 specific expanded practice certifications; if a doctor of oriental medicine is using a prescription pad printed
30 with the names of more than one doctor of oriental medicine, the above information for each doctor of
31 oriental medicine shall be on the pad and the pad shall have a separate signature line for each doctor of
32 oriental medicine; each specific prescription shall indicate the name of the doctor of oriental medicine for
33 that prescription and shall be signed by the prescribing doctor of oriental medicine;
34 K. a doctor of oriental medicine certified for expanded practice shall always, when
35 diagnosing and treating a patient, use the skill and care ordinarily used by reasonably well-qualified doctors
36 of oriental medicine similarly certified and practicing under similar circumstances, giving due
37 consideration to the locality involved; failure to comply with this fundamental requirement may result in
38 denial, suspension or revocation of licensure or certification, or other disciplinary measures, pursuant to the
39 provisions of the act, NMSA 1978, Section 61-14A-17, and the Uniform Licensing Act, NMSA 1978,
40 Section 61-1-1, et seq.;
41 L. when a doctor of oriental medicine is certified for injection therapy, this certification
42 automatically supersedes his certification for basic injection therapy; and
43 M. the provisions for certification transition from extended prescriptive authority (Rx1) and
44 expanded prescriptive authority (Rx2) to the expanded practice categories specified in 16.2.19 NMAC.
45 [16.2.19.8 NMAC - N, 11-28-09]

46
47 **16.2.19.9 EXPANDED PRACTICE CERTIFICATION BOARD REQUIREMENTS:**

48 A. The board shall have final authority for certification of all applicants.
49 B. The board shall notify the applicant in writing by mail postmarked no more than 30 days
50 after the receipt of the initial application as to whether the application is complete or incomplete and
51 missing specified application documentation.
52 C. The board shall notify the applicant in writing by mail postmarked no more than 30 days
53 after the notice of receipt of the complete application sent out by the board, whether the application is
54 approved or denied.
55 D. If the application is denied, the notice of denial shall state the reason the application was
56 denied.

1 E. In the interim between regular board meetings the board's chairman or an authorized
2 representative of the board shall issue an interim temporary expanded practice certification to a qualified
3 applicant who has filed, with the board, a complete application and complied with all requirements for
4 expanded practice certification. The interim temporary expanded practice certification shall automatically
5 expire on the date of the next regular board meeting. Final expanded practice certification shall only be
6 granted by the board.

7 F. The board shall have the authority to deny, suspend, revoke or otherwise discipline an
8 expanded practice certification, in accordance with the Uniform Licensing Act, 61-1-1 to 61-1-31 NMSA
9 1978, for reasons authorized in the act and clarified in 16.2.12 NMAC.

10 [16.2.19.9 NMAC - N, 11-28-09]

11
12 **16.2.19.10 EXPANDED PRACTICE SCOPE OF PRACTICE: (from 16.2.2.10 NMAC):**

13 A. In addition to the scope of practice outlined in section 16.2.2 NMAC for a doctor of
14 oriental medicine in New Mexico, the scope of practice for those certified in expanded practice shall
15 include certification in any or all of the following modules: (61-14A-8.1BNMSA1978) basic injection
16 therapy, injection therapy, intravenous therapy and bio-identical hormone therapy as specified in 16.2.19
17 NMAC.

18 B. The scope of practice for those doctors of oriental medicine certified in expanded practice
19 shall also include the expanded practice and prescriptive authority defined in 61-14A-8.1C NMSA1978.

20 [16.2.19.10 NMAC - N, 11-28-09]

21
22 **16.2.19.11 BASIC INJECTION THERAPY CERTIFICATION:** The board shall issue, to a
23 doctor of oriental medicine, certification for basic injection therapy upon completion of the following
24 requirements.

25 A. The doctor of oriental medicine shall be a doctor of oriental medicine in good standing.

26 B. The doctor of oriental medicine shall submit to the board the completed application form
27 provided by the board.

28 C. The doctor of oriental medicine shall pay the application fee for expanded practice
29 certification specified in 16.2.10 NMAC.

30 D. The doctor of oriental medicine shall submit, with the application, proof of successful
31 completion of the basic injection therapy educational course specified in 16.2.18 NMAC.

32 [16.2.19.11 NMAC - N, 11-28-09]

33
34 **16.2.19.12 INJECTION THERAPY CERTIFICATION:** The board shall issue to a doctor of
35 oriental medicine, certification for injection therapy, upon completion of the following requirements.

36 A. The doctor of oriental medicine shall be a doctor of oriental medicine in good standing.

37 B. The doctor of oriental medicine shall submit to the board the completed application form
38 provided by the board.

39 C. The doctor of oriental medicine shall pay the application fee for expanded practice
40 certification specified in 16.2.10 NMAC.

41 D. The doctor of oriental medicine shall submit, with the application, proof of:

42 (1) current certification by the board for basic injection therapy; or

43 (2) any course combining basic injection therapy and injection therapy, as they are specified
44 in the board's rules, or otherwise in accordance with law, must be completed within three years of the start
45 of course.

46 E. The doctor of oriental medicine shall submit, with the application, proof of successful
47 completion of the injection therapy educational course approved by the board.

48 [16.2.19.12 NMAC - N, 11-28-09]

49
50 **16.2.19.13 INTRAVENOUS THERAPY CERTIFICATION:** The board shall issue to a doctor of
51 oriental medicine, certification for intravenous therapy, upon completion of the following requirements.

52 A. The doctor of oriental medicine shall be a doctor of oriental medicine in good standing.

53 B. The doctor of oriental medicine shall submit to the board the completed application form
54 provided by the board.

55 C. The doctor of oriental medicine shall pay the application fee for expanded practice
56 certification specified in 16.2.10 NMAC.

1 D. The doctor of oriental medicine shall submit, with the application, proof of successful
2 completion of any intravenous therapy educational course approved by the board.
3 [16.2.19.13 NMAC - N, 11-28-09]
4

5 **16.2.19.14 BIOIDENTICAL HORMONE THERAPY CERTIFICATION:** The board shall
6 issue to a doctor of oriental medicine, certification for bioidentical hormone therapy, upon completion of
7 the following requirements:

8 A. the doctor of oriental medicine shall be a doctor of oriental medicine in good standing;
9 B. the doctor of oriental medicine shall submit to the board the completed application form
10 provided by the board;

11 C. the doctor of oriental medicine shall pay the application fee for expanded practice
12 certification specified in 16.2.10 NMAC; and

13 D. the doctor of oriental medicine shall submit, with the application, proof of successful
14 completion of the bioidentical hormone therapy educational course approved by the board.
15 [16.2.19.14 NMAC - N, 11-28-09]
16

17 **16.2.19.15 EXPANDED PRACTICE CERTIFICATION RENEWAL (FROM 16.2.8.13**
18 **NMAC):**

19 A. If a doctor of oriental medicine certified for expanded prescriptive authority does not
20 complete all expanded prescriptive authority continuing education requirements specified in 16.2.9.9
21 NMAC within the 60 day grace period, the expanded prescriptive authority certification is expired and that
22 licensee shall not be certified for expanded prescriptive authority until the continuing education is
23 completed. Provided that all other renewal requirements have been received by the board, such a licensee
24 shall continue to be licensed as a doctor of oriental medicine and is authorized for that scope of practice but
25 shall not be authorized for the relevant expanded prescriptive authority scope of practice. For an expired
26 expanded prescriptive authority certification, if a properly completed application for certification renewal,
27 including proof of completion of the required expanded prescriptive authority continuing education, is
28 received at the board office within one year of the last regular renewal date, the expanded prescriptive
29 authority certification shall be renewed if all the requirements of late certification renewal during the 60
30 day grace period provided by Section 61-14A-15 NMSA 1978 are completed, in addition to the
31 requirements of 16.2.8.11 NMAC, and the licensee also pays the fee for expired certification renewal
32 specified in 16.2.10 NMAC. For each licensee whose expanded prescriptive authority certification has
33 expired, the board shall notify the licensee by return receipt mail sent to the address on record that the
34 expanded prescriptive authority certification has expired and shall notify the licensee that he or she must
35 not practice those areas authorized by the expanded prescriptive authority certification until the prescriptive
36 authority certification is renewed. This notification shall also contain an explanation of the procedures and
37 fees for renewing the expanded prescriptive authority certification and the consequences of not renewing
38 the expanded prescriptive authority. The board is responsible for sending the notification by return receipt
39 mail in a timely manner to the address on record for the licensee and for maintaining a record of all such
40 notifications sent, including the return receipt documents. The board is not responsible for verifying that
41 the return receipt was returned by the post office to the board, for further follow up to verify that the
42 notification was received or to locate and notify a licensee who has changed address without properly
43 notifying the board of the new address. The licensee is responsible for notifying the board of the correct
44 current address and of any address changes. Any licensee, after being properly notified as described above,
45 who fails to renew, including completion of any required continuing education, his expired expanded
46 prescriptive authority certification by the next July 31 annual license renewal date, after the notification
47 shall be required to apply as a new applicant for expanded prescriptive authority certification. except that
48 there shall be a limited expanded prescriptive authority certification reinstatement period as specified in
49 16.2.8.13 NMAC.

50 B. The board may, on an individual basis, renew a license that has expired for more than one
51 year if the former licensee can demonstrate good cause as specified in 16.2.1.7 NMAC.

52 C. The board shall report to the New Mexico board of pharmacy any expired license that
53 was previously held by a doctor of oriental medicine who was is certified for the expanded prescriptive
54 authority prescriptive authority and shall report to the New Mexico board of pharmacy any renewed or
55 reinstated license of a doctor of oriental medicine who is certified for the expanded prescriptive authority.
56 [16.2.19.15 NMAC - N, 11-28-09]

1
2 **16.2.19.16 TRANSITION PROVISIONS:**

3 A. A doctor of oriental medicine, previously certified for extended prescriptive authority
4 including prolotherapy. (Rx1) as of the effective date of this section, shall be automatically certified for
5 basic injection therapy and prolotherapy using previously taught and appropriate injection routes and only
6 substances listed in 16.2.20.8 F (1) NMAC under the provisions of 16.2.19.10 NMAC.

7 B. A doctor of oriental medicine, previously certified for the expanded prescriptive authority
8 (Rx2) as of the effective date of this section, shall be automatically certified for:

9 (1) injection therapy under the provisions of 16.2.19.11 NMAC basic injection therapy
10 certification is automatically superseded by injection therapy certification;

11 (2) intravenous therapy under the provisions of 16.2.19.12 NMAC; and

12 (3) bioidentical hormone therapy under the provisions of 16.2.19.13 NMAC.

13 [16.2.19.16 NMAC - N, 11-28-09]

14
15 **16.2.19.17 LICENSE DESIGNATION:** The designation for expanded practice shall follow the
16 license number on the license and shall reflect the respective modules of certification: Rx basic, Rx
17 injection, Rx intravenous, Rx hormones.

18 [16.2.19.17 NMAC - N, XX-XX-XX]

19
20 **History of 16.2.19 NMAC:** [RESERVED]

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 2 ACUPUNCTURE AND ORIENTAL MEDICINE PRACTITIONERS
PART 20 EXPANDED PRACTICE FORMULARY

16.2.20.1 ISSUING AGENCY: New Mexico Board of Acupuncture and Oriental Medicine.
[16.2.20.1 NMAC - Rp/E, 16.2.20.1 NMAC, 06/15/2010; Re-pr, 11/28/10]

16.2.20.2 SCOPE: All doctors of oriental medicine who are certified for expanded practice, or who are enrolled in an educational course, or who are applicants for certification for expanded practice, as well as all educational courses.
[16.2.20.2 NMAC - Rp/E, 16.2.20.2 NMAC, 06/15/2010; Re-pr, 11/28/10]

16.2.20.3 STATUTORY AUTHORITY: This part is promulgated pursuant to the Acupuncture and Oriental Medicine Practice Act, Section 61-14A-8.1 NMSA 1978.
[16.2.20.3 NMAC - Rp/E, 16.2.20.3 NMAC, 06/15/2010; Re-pr, 11/28/10]

16.2.20.4 DURATION: Permanent.
[16.2.20.4 NMAC - Rp/E, 16.2.20.4 NMAC, 06/15/2010; Re-pr, 11/28/10]

16.2.20.5 EFFECTIVE DATE: June 15, 2010 unless a later date is cited at the end of a section.
[16.2.20.5 NMAC - Rp/E, 16.2.20.5 NMAC, 06/15/2010; Re-pr, 11/28/10]

16.2.20.6 OBJECTIVE: This part lists the formulary for each of the following expanded practice certification categories: basic injection therapy, injection therapy, intravenous therapy and bioidentical hormone therapy.
[16.2.20.6 NMAC - Rp/E, 16.2.20.6 NMAC, 06/15/2010; Re-pr, 11/28/10]

16.2.20.7 DEFINITIONS: [RESERVED]

16.2.20.8 EXPANDED PRACTICE FORMULARIES GENERAL PROVISIONS: The following general provisions shall apply to the expanded practice general formulary and each specific formulary for each specific expanded practice category that follows in this rule:

- A. drugs, dangerous drugs and controlled substances are defined in the New Mexico Drug, Device and Cosmetic Act and the New Mexico Controlled Substances Act;
- B. all substances from threatened or endangered species, as determined by the convention on the international trade in endangered species of wild fauna and flora and the U.S. fish and wildlife service (<http://endangered.fws.gov/>), shall be automatically eliminated from expanded practice formularies;
- C. definitions from the New Mexico Drug, Device and Cosmetic Act and the New Mexico Controlled Substances Act apply to the appropriate terms in the expanded practice formularies;
- D. a doctor of oriental medicine shall comply with all federal and state laws that pertain to obtaining, possessing, prescribing, compounding, administering and dispensing any drug;
- E. a substance shall only be approved for use if procured in compliance with all federal and state laws; the various expanded practice formularies do not supersede such laws; and
- F. the following drugs, dangerous drugs and controlled substances are authorized in the modes of administration that are specified except as limited or restricted by federal or state law:
 - (1) **basic injection certification and prescriptive authority:** shall include topical vapocoolants the intradermal intramuscular, and subcutaneous injection of: homeopathic medicines; dextrose; enzymes except urokinase; hyaluronic acid; minerals; sarapin; sodium chloride; sterile water; and vitamins;
 - (2) **injection certification and prescriptive authority:**
 - (a) all substances from basic injection module; and
 - (b) all non-epidural, non intrathecal injection of: alcohol, amino acids, autologous blood and blood products and appropriate anticoagulant, live cell products, ozone, bee venom, beta glucans, caffeine collagenase, dextrose, dimethyl sulfoxide, gammaglobulin, glucose, glucosamine, glycerin, hyaluronidase, methylsulfonylmethane, phenol, phosphatidylcholine, procaine, sodium hyaluronate, sodium morrhuate, therapeutic serum;

1 (3) **intravenous certification and prescriptive authority:** amino acids, calcium
2 ethylenediaminetetraacetic acid, dextrose, glutathione, homeopathic medicines, lactated ringers, minerals,
3 phosphatidylcholine, sodium bicarbonate sodium chloride, sodium morrhuate, sterile water, water soluble
4 vitamins, autologous blood and blood products with appropriate anticoagulant, live cell products, ozone,
5 and ultraviolet radiation of blood with appropriate anticoagulant except that authority is not provided for
6 total parenteral nutrition;

7 (4) **non-injectable bioidentical hormone certification and prescriptive authority:** 7-keto
8 dehydroepiandrosterone (7 keto DHEA), cortisone, dehydroepiandrosterone (DHEA), dihydrotestosterone,
9 estradiol (E2), estriol (E3), estrone (E1), hydrocortisone, pregnenolone, progesterone, testosterone,
10 tetraiodothyronine (T4), levothyroxine, thyroxine (T4), & triiodothyronine (T3) combination,
11 triiodothyronine, liothyronine (T3), desiccated thyroid;

12 G. applicable to any of the four certifications above: subcutaneous or intramuscular injection
13 of epinephrine, inhaled oxygen, and additives necessary to stabilize, preserve or balance pH of approved
14 substances.

15 [16.2.20.8 NMAC - Rp/E, 16.2.20.8 NMAC, 06/15/2010; Re-pr & A, 11/28/10]

16
17 **History of 16.2.20 NMAC:**

18 **History of Repealed Material:**

19 16.2.20 NMAC, Expanded Practice Formulary (filed 10/29/2009) repealed 06/15/2010.

20
21 **Other History:**

22 16.2.20 NMAC, Expanded Practice Formulary (filed 10/29/2009) was replaced by 16.2.20 NMAC,
23 Expanded Practice Formulary, effective 06/15/2010. This was an emergency filing that was necessary due
24 to the courts reversing and setting aside the language effective on 11/28/2009.
25
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