

**Oregon Board of Medical Examiners
ACUPUNCTURE ADVISORY COMMITTEE MINUTES**

Friday, March 24, 2006, 12:00 PM
1500 SW 1st Ave, Suite 620
Portland, OR 97201
*Board accepted 4/14/06
Pending Committee Approval*

MEMBERS PRESENT:

Malvin Finkelstein, LAc – Chair
Ellen Goldsmith, LAc, LMT
Robert Gross, MD
Gene Hong, MD
Debra Mulrooney, LAc
David Watt, MD – Board Liaison

STAFF PRESENT:

Kathleen Haley, JD, Executive Director
Diana Dolstra, MSLS, Licensing Administrator
Jennifer Lannigan, PhD, Licensing Coordinator
Candice Kramer, Acupuncture Licensing Specialist
Vickie Wilson, Acting Chief Investigator

GUESTS PRESENT:

Natalie Arndt, LAc, Editor, Oregon Acupuncture Association (OAA) Newsletter
Steve Meeker, LAc, Vice President, Acupuncture and Oriental Medicine Society of Oregon (AOMSO)
Siomak Shirazi, LAc, President, Acupuncture and Oriental Medicine Society of Oregon (AOMSO)
David Tara, LAc, Oregon Acupuncture Association (OAA)
Stephen Kafoury, Oregon Acupuncture Association (OAA)
Travis Buckmaster, LAc, Secretary, Acupuncture and Oriental Medicine Society of Oregon (AOMSO)

WORKING LUNCH

Introductory comments by Malvin Finkelstein, LAc, Chair

EXECUTIVE SESSION:

MEMBER OF THE PRESS PRESENT:

Natalie Arndt, Editor, Oregon Acupuncture Association (OAA) Newsletter

Update on acupuncturists currently under Board investigation – Vickie Wilson, Acting Chief Investigator

Review application for unlimited licensure

Review application for unlimited licensure

Review application for unlimited licensure

Review mentorship quarterly reports

Review mentorship quarterly reports

PUBLIC SESSION:

Approve Acupuncture Advisory Committee minutes of the September 23, 2005 meeting

Review application for unlimited licensure

Proposed administrative rules changes – First Review
OAR 847-070-0016 – Qualifications

Review express licensing policy proposal

Coordinate graduating class presentations to educate them about the role of the Committee and to answer questions

Discuss the usage of “MD” credentials awarded in China

Discuss acupuncturist position on the Acupuncture Advisory Committee ending July 11, 2006

Approval of new licensee consent agenda

Approval of Limited Licenses, Special

Approval of Limited License, Visiting Professor one-year extension

Approval of Oregon licensed acupuncturists as clinical supervisors

Approval of Visiting Acupuncturist

Approve future meeting dates

Public Comment Session



Malvin Finkelstein, LAc, Committee Chair, called the meeting to order at 12:00 p.m.

Mr. Finkelstein stated that he would like to amend the current 15 minute public comment policy. He stated that he wished to allow the public to comment throughout Committee meeting deliberations as long as the communication could be done in a clear, orderly fashion.

Mr. Finkelstein presented the following speech:

As I become Chairperson, it just feels like there’s a certain perspective and a certain understanding that I think is useful to have. Whenever someone enters a new group or arena, they tend to look at the situation from the perspective that they bring to it. After participating for a while, they begin to develop the perspective of the group itself. So for the purpose of understanding, I’m asking all of us in the room to try to put ourselves in the role that the people behind this desk on this Committee has taken on.

Dr. Joel Seres was chairman of this Committee for more than 30 years made it a habit to give an introductory speech about the functions and purposes of the Acupuncture Advisory Committee whenever a new member joined this Committee. It was very interesting because, whenever we started, we didn’t have that much of a clue about what this group did and it takes a while of sitting in any group before all of a sudden you start realizing ‘Oh. That’s actually what it is. I understand it and now I’m thinking from that perspective.’ And all of a sudden, there you are, you’re in a different place. So all of this process tends to also educate the public and we all start to understand the different role that this group has as opposed to other groups.

The mission of all health care licensing boards is very simply stated: Protect the public. This means ensuring safe practice that does not hurt the patients and is at the level of safety and competency that is recognized by that profession. Entry level competency is a term that comes from the testing industry and is one of the basic definitions in psychometrics in science of testing. Basically, this means that to get licensed in the beginning, someone needs to be at the very beginning of their career, but to be competent. They're not going to do any harm. Entry level competency is usually assessed by a combination of education and testing and relates to the standard of the profession at the time. Since many fields evolve and grow, the standards evolve and grow also. This role of protecting the public basically means that our constituents are the public: the patients who receive Acupuncture. This is different than that of state or national organizations who represent the practitioners of Acupuncture. It is different than the schools or colleges that represent the education of Acupuncture, and thus, the students, faculty, and administrators of that school. Each of these groups have great understanding of the field of Acupuncture from that perspective that they come from. Each has much to offer others from that unique point of view. Since we come from a field of medicine that views all systems, both within the body and on community and global levels, interacting with other systems, the help of the Community comes from the cooperation of all its parts. Just as from the perspective from oriental medicine, the health of the liver and kidney are integratively dependent upon each another. The health of each of the parts of the Acupuncture and medical communities are dependent upon each other. I'd like to offer all of us the opportunity to cooperate and to try to understand the different perspectives we all bring to the table.

So to start the next part of this, I am going to go through a little history of the Board of Medical Examiners Acupuncture Advisory Committee within the context of Acupuncture within the United States.

It all started basically in 1973 when Oregon became one of the first three states to license Acupuncture, the others being Nevada and Maryland. That point in time, Oregon faced the regulation of Acupuncture in the Board of Medical Examiners, which established the Acupuncture Committee, re-titled the Acupuncture Advisory Committee. In 1973, there were no schools of Acupuncture in the United States; there were not tests, no national or state organizations. There were only a handful of books that had been translated into English. Training was only available in England, China, or other international locations, for those adventurous souls who were inspired to study Acupuncture. Practitioners of Acupuncture were primarily Asian, mostly Chinese. Chinese herbs, Acupressure, Chi Gong, were totally unknown in the United States outside of the Oriental or Asian communities. Since the mission of the Board of Medical Examiners (BME) Acupuncture Advisory Committee was to protect the public and assess entry-level competency, the Acupuncture Committee, on the advice of its members, both acupuncturists and medical doctors, established educational standards for the practice of Acupuncture in Oregon. At the time, this related to a series of hours and courses that were very detailed. This also began administering an Acupuncture exam, written, oral, and practical. There are a few of us who remember those days. I actually was one of them who took those exams. These two jobs, assessing entry level competency and testing it, were the two major functions of this Committee for many, many years. By 1982, there were a growing number of schools of Acupuncture and states licensing Acupuncture still small by current standards, but much more than at the beginning. At a landmark series of national meetings, held by the national professional organization, several new organizations were created. One to certify individuals by means of testing and assessing education now called the NCCAOM. A second, to establish standards for all of the Acupuncture schools in the United States and to accredit those schools that met those standards, now called ACAOM. And a third, which was a counsel association of Acupuncture schools basically to enable cooperation and coordination of standards now called CCAOM. These organizations went about fulfilling their missions and served as the hallmarks of Acupuncture's growth in the United States. After several years in the late 1980's, the Oregon BME adopted the NCCOAM national certification written exam as the requirement for licensure and stopped giving a written exam. In 1989, the NCCAOM began administering a practical point location exam, then called People's. After several years, in 1992, the BME and the Acupuncture Committee adopted this exam and stopped giving a practical exam. This completed the process of transferring testing from its own community to the national testing and certification agency and basically completed one of those first two major roles that this Committee had taken on in the beginning. By 1998, the school accreditation group, ACAOM, had become the educational standard in the United States. It had itself been accredited by the U.S. Department of Education; that then allowed Acupuncture school students to receive student loans. A growing number of states were changing the licensure regulations to require graduation from a school that was accredited or in candidacy. The NCCAOM changed their educational criteria for certification from a requirement of hours to that of ACAOM accreditation or candidacy. The BME Acupuncture Committee followed suit and adopted the standard of graduation from an Acupuncture school that had been accredited or had been in candidacy with ACAOM. At this time, the specific educational requirements for U.S. students were eliminated. At the same

time, the Acupuncture Committee utilized the international standards the NCCAOM had developed and stopped having to personally review a candidate who was trained in a country other than the United States. This moved this Committee and the Board of Medical Examiners away from the second of its two major functions of regulating the educational criteria for acupuncturists. By these decisions, the Board of Medical Examiners acknowledged that the profession of Acupuncture, on a national level, had successfully begun the process of defining entry level competency. Over the succeeding years, both of these groups, NCCAOM and ACAOM, had convened national level meetings with input from many members of the profession and psychometric professionals to conduct extensive evaluation and research to evaluate the ever changing nature of entry level competency and both educational levels and testing levels have been increased. Since the Oregon rules are now pegged to the national standards, the Oregon standards have also increased. The Acupuncture profession continues to work on a national level as it moves forward with doctoral programs.

It behooves us as a Committee, and as part of the Board of Medical Examiners, to continue to access the wisdom and research from members of the Acupuncture profession from all across the country.

So what does the BME Acupuncture Advisory Committee do now? Since it doesn't have those two major roles, it's actually much less exciting than it used to be in the old days, but it still does a lot of important things. It reviews candidates that have completed requirements for licensure, mostly a small task, since most candidates have met these educational and testing requirements. We do deal with the exceptions. Applicants who don't easily fit into the requirements come up for review. This Committee is occasionally asked to interpret the scope of practice that is written within the Acupuncture rules and regulations. Despite the well thought out wording that began the regulatory process, over time, new situations arise that require clarification. Since these are matters of interpretation, there are often no absolute answers, similar to the judicial system of the United States. There are frequently strongly held opinions from various sides of the issues. This Committee, to the best of its ability, attempts to steer a course that protects the best interest of the public safety and welfare. The Acupuncture Committee is periodically called upon to update some part of the rules and regs. Sometimes this is a simple thing, such as the recent change to the NCCAOM examination modules. This requires rules changes to agree with the new modules. Sometimes, this is more complex, such as the consideration of adding a Chinese Herbology requirement to the rules and regs. That's an issue that the Acupuncture Committee has deferred for future consideration. Most of the work of this Committee is not exciting and it is not controversial. Sometimes an issue comes up that is and it is up to the AAC to remain impartial to view the best interest of the public safety and welfare as its primary purpose. As I said earlier, the more clear input that this Committee receives from all the members of the Acupuncture Committee, the better we can do our job. The more understanding that the Community has about what our job is, and what considerations we need to weigh, the clearer the outcome.

Thank you.

EXECUTIVE SESSION:

**UPDATE ON ACUPUNCTURISTS CURRENTLY UNDER BOARD INVESTIGATION –
VICKIE WILSON, ACTING CHIEF INVESTIGATOR**

REVIEW APPLICATION FOR UNLIMITED LICENSURE

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REVIEW MENTORSHIP QUARTERLY REPORTS

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PUBLIC SESSION:

REVIEW APPLICATION FOR UNLIMITED LICENSURE

TAB A
Executive Session

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE NANSIK KIM FOR UNLIMITED LICENSURE.

Motion carried unanimously.

REVIEW APPLICATION FOR UNLIMITED LICENSURE

TAB B
Executive Session

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS OFFER CLIENT 32351 THE OPPORTUNITY TO REAPPLY FOR EITHER ACUPUNCTURE NEEDLING PRIVILEGES OR A LIMITED LICENSE, VISITING PROFESSOR.

Motion carried unanimously.

The Acupuncture Advisory Committee noted that Client 32351 documented successful completion of 138 hours of the Accreditation Commission for Acupuncture and Oriental Medicine western medicine requirement in effect July 1, 1998. As the eligibility requirement is 360 hours, if Client 32351 desires to pursue permanent Acupuncture licensure in the state of Oregon, the Committee determined that Client 32351 be requested to submit the remaining 222 hours as well as appear for an interview.

REVIEW APPLICATION FOR UNLIMITED LICENSURE

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE ROBYN HEMINGWAY FOR UNLIMITED LICENSURE.

Motion carried unanimously.

REVIEW MENTORSHIP QUARTERLY REPORTS

The Committee reviewed the quarterly reports and found them to be acceptable.

REVIEW MENTORSHIP QUARTERLY REPORTS

The Committee reviewed the quarterly reports and found them to be acceptable.

APPROVE MINUTES ACUPUNCTURE ADVISORY COMMITTEE

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE APPROVES THE MINUTES OF THE SEPTEMBER 23, 2005 ACUPUNCTURE ADVISORY COMMITTEE MEETING.

Motion carried unanimously.

REVIEW APPLICATION FOR UNLIMITED LICENSURE

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE KAREN LOU KETTLETY FOR UNLIMITED LICENSURE.

Motion carried unanimously.

PROPOSED ADMINISTRATIVE RULE CHANGES OAR 847-070-0016, -0019, -0022 FIRST REVIEW

EXHIBIT A

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE OAR 847-070-0016, -0019, -0022 AS SUBMITTED.

Motion carried unanimously.

DISCUSS FUTURE ADMINISTRATIVE RULE CHANGES TO OAR 847-070-0016 (1)(b)

Malvin Finkelstein, LAc, stated that he felt the Point Location portion of rule was no longer necessary. He continued by stating that, since passing the Point Location Examination (practical exam) of the Acupuncture Certification Examinations by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) is a current certification requirement, the rule does not apply to most Acupuncture practitioners. He suggested that the Committee remove this portion of the rule because he felt that it was safe to assume that the remaining few practitioners that had been granted NCCAOM certification without a practical examination would have gained practical experience over the duration of their career.

ACTION PLAN: Staff will draft rules reflecting Mr. Finkelstein's suggestion for first review at the next meeting.

DISCUSS RECIPROCITY OF ACUPUNCTURE LICENSURE

The Committee discussed whether or not the Board of Medical Examiners should draft rules that establish licensure reciprocity with other states.

The Committee decided that because the field of Acupuncture licensure is so new, there is not yet a clear standard that most states follow to license acupuncturists. Without this clear standard, the Board of Medical Examiners could not establish the requirements of the other states are similar to the requirements of Oregon. The Committee decided that it could not establish reciprocity rules because of this.

DISCUSS EXPRESS LICENSING FOR ACUPUNCTURISTS

In October 2005, the Board approved the Executive Director to issue permanent licenses to physician and podiatric physician applicants who have no issues that would require Committee or Board review (i.e., consent agenda applicants). Staff asked the Committee if it would like to extend this practice to Acupuncture applicants. If the Committee recommends this same policy for Acupuncture applicants, the applicants would find they would not need a Limited License, Special and would be issued a permanent license based upon the Executive Director's approval of licensure.

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE EXPRESS LICENSING FOR ACUPUNCTURE APPLICANTS BY THE BOARD'S EXECUTIVE DIRECTOR.

Motion carried unanimously.

COORDINATE COMMITTEE SPEECH TO GRADUATING ACUPUNCTURE CLASSES

Ellen Goldsmith, LAc, LMT, reported that she will once again speak to the National College of Naturopathic Medicine Acupuncture graduating class about the role of the Committee and the licensure process. She urged Committee members to speak to the students of Oregon College of Oriental Medicine (OCOM), too. Debra Mulrooney, LAc, explained that she covers the Committee role in courses at OCOM.

USAGE OF "MD" CREDENTIALS AWARDED IN CHINA

TAB C

The Committee discussed the possibility of drafting administrative rule changes regarding the usage of "MD" by practitioners who acquired their credentials outside of the United States as well as practitioners who acquire doctoral degrees in Oriental Medicine and Acupuncture within the United States. The Committee determined that a notice should be posted on the Board of Medical Examiners website indicating it is acceptable for graduates of the Oregon College of Oriental Medicine's new Doctor of Acupuncture and Oriental Medicine (DAOM) degree program to use the credentials "DAOM".

Kathleen Haley, JD, will discuss the possibility of any administrative rule changes with the Attorney General's office.

ACTION PLAN: Board staff to post a notice regarding acceptability of using DAOM credentials for OCOM graduates on Board website.

DISCUSS THE PHYSICIAN POSTION OPENING ON THE COMMITTEE

The Committee will interview applicants as the first item on the agenda at the next Committee meeting.

DISCUSS THE FEBRUARY 2006 BREACH OF SECURITY OF THE NATIONAL CERTIFICATION COMMISSION FOR ACUPUNCTURE AND ORIENTAL MEDICINE (NCCAOM) CERTIFICATION EXAM

The Committee noted that the NCCAOM cancelled the February 2006 national certification examination due to the security breach; NCCAOM will resume testing summer 2006 and will take precautions to prevent future breaches.

APPROVE NEW LICENSEE CONSENT AGENDA

ANDERSON, Alysia Mondell, LL15843	LA GRECA, Brandon Charles, LL15895
ASTON, Valerie, LL15749	LARSON, Lacey Marie
BERLETICH, Steven Michael, LL15819	LINCOLN, Charlene Kang
BOND I, Lynn Marie, LL15830	LYTLE, Jill Rosemary, LL15860
BOYLES Dennis Dwight, LL15785	MARCINKIEWICZ, Robin Ann, LL15803
CARDWELL, III, Bickerton Winston, LL15912	MCCARTHY, Kathryn K., LL15826
CARSON-CROPP Debra Marie, LL15804	MCGUIRE, Casey Patrick, LL15897
CHENG, Ivan, LL15789	METRO, Christopher Michael, LL15846
CHIK, Tanis Yat-Kai, LL15820	MIKI, Ajana Ayoko
COHEN, Emily Franklin, LL15786	MILLER, Jason Alan, LL15871
COOKS, David Alan, LL15821	MILLER, Kara Julia, LL15872
COOKS, Kelly Elizabeth Adams, LL15822	MILLEY, Ryan John, LL15878
COSTELLO, Mae Cecile, LL15866	NEUSE, Milena Marie, LL15837
DAUMEN, Jacob Robert	OMURA-LONG, Toshio James, LL15841
DEDA, Marya Eden, LL15781	PATEL, Jasmine Loveji, LL15807
GARRETT, Kimberly Joy, LL15867	PIVCEVICH, Carey Ann, LL15911
GREENLY, Mari Patrice, LL15823	PLATT, Elizabeth Kern, LL15913
HALLAM, Patricia Anne, LL15798	POLSON, Jan Linette LL15915
HAMILTON, Kristin Michelle, LL15870	POND, Alicia Xenia, LL15842
HAYES, Sarah Smith, LL15787	RUSH, Barbara Anne, LL15790
HENRIKSEN, Melanie Ann	SCHINASI, Aimee Mazal, LL15780
HISATOMI, Carrie Christina, LL15824	SIEBECKER, Allison Jean
JACKS, Jeremy Andy, LL15852	SHOWER, Rebecca Leigh, LL15847
JOHNSON, Jennifer Renee, LL15825	SINGH, Amit, LL15889
JOHNSON, Lorin, LL15900	SITTS, Colette Sue, LL15858
JONES, Deborah Kay, LL15833	SWANSON, Arthur Andre, LL15873
KHABRA, Virinderjit Singh, LL15797	SWIGART, Miracle Tumi, LL15902
KIRKHAM, Katherine Oline, LL15904	WEINER, Gary Martin LL15916
KJOS, Jennie Vi	ZAMBELLI, Joseph Xiques, LL15899

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE AFOREMENTIONED APPLICANTS FOR UNLIMITED LICENSURE.

Motion carried unanimously.

APPROVE ACUPUNCTURE APPLICANTS GRANTED A LIMITED LICENSE, SPECIAL

ANDERSON, Alysia Mondell, LL15843
ASTON, Valerie, LL15749
BERLETICH, Steven Michael, LL15819
BOND I, Lynn Marie, LL15830
BOYLES Dennis Dwight, LL15785
CARDWELL, III, Bickerton Winston, LL15912
CARSON-CROPP Debra Marie, LL15804
CHENG, Ivan, LL15789
CHIK, Tanis Yat-Kai, LL15820
COHEN, Emily Franklin, LL15786
COOKS, David Alan, LL15821
COOKS, Kelly Elizabeth Adams, LL15822
COSTELLO, Mae Cecile, LL15866
DAUMEN, Jacob Robert, LL15919
DEDA, Marya Eden, LL15781
GARRETT, Kimberly Joy, LL15867
GREENLY, Mari Patrice, LL15823
HALLAM, Patricia Anne, LL15798
HAMILTON, Kristin Michelle, LL15870
HAYES, Sarah Smith, LL15787
HISATOMI, Carrie Christina, LL15824
JACKS, Jeremy Andy, LL15852
JOHNSON, Jennifer Renee, LL15825
JOHNSON, Lorin, LL15900
JONES, Deborah Kay, LL15833
KHABRA, Virinderjit Singh, LL15797

KIRKHAM, Katherine Oline, LL15904
LA GRECA, Brandon Charles, LL15895
LYTLE, Jill Rosemary, LL15860
MARCINKIEWICZ, Robin Ann, LL15803
MCCARTHY, Kathryn K., LL15826
MCGUIRE, Casey Patrick, LL15897
METRO, Christopher Michael, LL15846
MILLER, Jason Alan, LL15871
MILLER, Kara Julia, LL15872
MILLEY, Ryan John, LL15878
NEUSE, Milena Marie, LL15837
OMURA-LONG, Toshio James, LL15841
PATEL, Jasmine Loveji, LL15807
PIVCEVICH, Carey Ann, LL15911
PLATT, Elizabeth Kern, LL15913
POLSON, Jan Linette LL15915
POND, Alicia Xenia, LL15842
RUSH, Barbara Anne, LL15790
SCHINASI, Aimee Mazal, LL15780
SHOWER, Rebecca Leigh, LL15847
SINGH, Amit, LL15889
SITTS, Colette Sue, LL15858
SWANSON, Arthur Andre, LL15873
SWIGART, Miracle Tumi, LL15902
WEINER, Gary Martin LL15916
ZAMBELLI, Joseph Xiques, LL15899

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE AFOREMENTIONED APPLICANTS GRANTED A LIMITED LICENSE, SPECIAL.

Motion carried unanimously.

APPROVE LIMITED LICENSE, VISITING PROFESSOR ONE-YEAR EXTENSION

ZHANG, Fang, LL19903
Oregon College of Oriental Medicine

Current extension dates 3/2/06-3/2/07
Final extension

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE FINAL ONE-YEAR EXTENSION OF THE LIMITED LICENSE, VISITING PROFESSOR FOR THE AFOREMENTIONED APPLICANT.

Motion carried unanimously.

APPROVE OREGON LICENSED ACUPUNCTURISTS AS CLINICAL SUPERVISORS

BELLIS, Paul Daniel

NAKAJI, Kevin Kazuto

DEHEN, Regina Ida

NEWELL, Michelle Louise

DORNAN, Kimberly Elizabeth

ROSENTHAL, Brian Arthur

KALNINS, Paul Karl

TAYLOR, Colleen Elizabeth

It was moved and seconded that

THE ACUPUNCTURE ADVISORY COMMITTEE RECOMMENDS THE BOARD OF MEDICAL EXAMINERS APPROVE THE AFOREMENTIONED ACUPUNCTURISTS AS CLINICAL SUPERVISORS.

Motion carried unanimously.

APPROVE VISITING ACUPUNCTURIST

MA, Shouchun, LAc, Washington Acupuncture License: AC00000091 (in good standing)

At Oregon College of Oriental Medicine Doctoral Program for the following time periods:

March 17-20, 2006 and April 21-24, 2006

FUTURE MEETING DATES:

Acupuncture Committee: September 22, 2006

PUBLIC DISCUSSION:

David Tara, LAc, President, Oregon Acupuncture Association (OAA), inquired about the status of the Board adopting an Acupuncture code of ethics.

The Committee responded to Mr. Tara by stating that, per page 406 of the Acupuncture Advisory Committee Minutes, the Board of Medical Examiners will use the recognized standards of the Acupuncture community as the standard for professional conduct and that typically such standards are established by the profession's association, such as the OAA.

Mr. Tara responded that the OAA would begin drafting its own code of ethics and will submit the code to the Board upon completion.

David Watt, MD, suggested that the Committee possibly create a statement of philosophy regarding Acupuncture professional conduct. He cautioned against creating administrative rules with specific references because those references are subject to change that would possibly create unintended changes in the rules.

NOTE: 4-14-06 The Board accepted the aforementioned Committee recommendations.

ADJOURNMENT:

There being no further business to discuss, Malvin Finkelstein, LAc, adjourned the meeting at 2:40 pm.

ACUPUNCTURE ADVISORY COMMITTEE MEETING MINUTES
Exhibit A

OREGON ADMINISTRATIVE RULES

CHAPTER 847, DIVISION 070 - BOARD OF MEDICAL EXAMINERS

PROPOSED RULES CHANGES – APRIL 2006

FIRST REVIEW BY THE BOARD

Qualifications

847-070-0016

[~~(4)~~] Effective November 21, 2001, an applicant for licensure as an acupuncturist in the State of Oregon must have the following qualifications:

[~~(a)~~] **(1)** Have graduated from an acupuncture program that satisfies the standards of the Accreditation Commission for Acupuncture and Oriental Medicine (A.C.A.O.M.), or its successor organization, or an equivalent accreditation body that are in effect at the time of the applicant's graduation. An acupuncture program may be established as having satisfied those standards by demonstration of one of the following:

[~~(A)~~] **(a)** Accreditation, or candidacy for accreditation by ACAOM at the time of graduation from the acupuncture program; or

[~~(B)~~] **(b)** Approval by a foreign government's Ministry of Education, or Ministry of Health, or equivalent foreign government agency at the time of graduation from the acupuncture program. Each applicant must submit their documents to a foreign credential equivalency service, which is approved by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) for the purpose of establishing equivalency to the ACAOM accreditation standard. Acupuncture programs that wish to be considered equivalent to an

ACAOM accredited program must also meet the curricular requirements of ACAOM in effect at the time of graduation.

~~[(b) Documentation of e]~~ **(2)** Certification in acupuncture by the National Certification Commission for Acupuncture and Oriental Medicine (N.C.C.A.O.M.). An applicant shall be deemed certified by the N.C.C.A.O.M. in Acupuncture if the applicant has passed the N.C.C.A.O.M. Acupuncture Certification Examinations, or has been certified through the N.C.C.A.O.M. Credentials Documentation Examination and passed the practical portion (Point Location Module) of the N.C.C.A.O.M. Acupuncture Certification Examinations. An applicant must have passed the N.C.C.A.O.M. practical examination, which is the point location portion of the Acupuncture Certification Examinations on or after April 22, 1991 in order to be eligible for Oregon licensure; or

~~[(e)]~~ **(3)** An applicant who does not meet the criteria in OAR 847-070-0016(1) **and (2)** must have the following qualifications:

~~[(A)]~~ **(a)** Have five years of licensed clinical acupuncture practice in the United States prior to July 1, 1998. This practice must include a minimum of 500 acupuncture patient visits per year.

Documentation shall include:

~~[(i)]~~ **(A)** Two affidavits from office partners, clinic supervisors, accountants, or others approved by the Board, who have personal knowledge of the years of practice and number of patient visits per year; and

~~[(ii)]~~ **(B)** Notarized copies of samples of appointment books, patient charts and financial records, or other documentation as required by the Board; and

~~[(B)]~~ **(b)** An applicant must have practiced as a licensed acupuncturist in the U.S. during five of the last seven years prior to application for Oregon licensure. Licensed practice includes clinical practice, clinical supervision, teaching, research, and other work as approved by the

Board within the field of acupuncture and oriental medicine. Documentation of this practice will be required and is subject to Board approval; and

~~[(C) Documentation of s]~~ **(c)** Successful completion of the A.C.A.O.M. western medicine requirements in effect on July 1, 1998; and

~~[(D) Documentation of e]~~ **(d)** Current certification in acupuncture by the N.C.C.A.O.M. An applicant shall be deemed certified in Acupuncture by the N.C.C.A.O.M. if the applicant has passed the N.C.C.A.O.M. Acupuncture Certification Examinations, or has been certified through the N.C.C.A.O.M. Credentials Documentation Examination; or

~~[(4)]~~ **(4)** An individual whose acupuncture training and diploma were obtained in a foreign country and who cannot document the requirements of subsections **(1) through (3)** of this rule because the required documentation is now unobtainable, may be considered eligible for licensure if it is established to the satisfaction of the Board that the applicant has equivalent skills and training and can document one year of training or supervised practice under a licensed acupuncturist in the United States; and

~~[(e)]~~ **(5)** In addition to meeting the requirements in (1) and (2), or (3), or (4) **of this rule**, all applicants for licensure must have the following qualifications:

~~[(A) A letter verifying t]~~ **(a)** Licensure in good standing from the state or states of all prior and current ~~[medically]~~ **health** related licensure; and

~~[(B)]~~ **(b)** Have good moral character as those traits would relate to the applicant's ability of properly engaging in the practice of acupuncture; and

~~[(C)]~~ **(c)** Have the ability to communicate in the English language well enough to be understood by patients and physicians. This requirement is met if the applicant passes the N.C.C.A.O.M. written acupuncture examination in English, or if in a foreign language, must also have passed an English language proficiency examination, such as TOEFL (Test of English as a Foreign Language), or TSE (Test of Spoken English). An applicant must obtain a TOEFL score

of 500 or more for the written TOEFL exam and 173 or more for the computer based TOEFL exam, or a TSE score of 200 or more prior to July 1995, and a score of 50 or more after July 1995. An applicant who is certified through the N.C.C.A.O.M. Credentials Documentation Examination must also have passed an English proficiency examination.

OAR 847-070-0019

Interview and Examination

(1) In addition to all other requirements for licensure, an applicant may be required to appear before the Acupuncture Committee for a personal interview regarding information received in the application process. The interview shall be conducted during a regular meeting of the committee.

(2) If there is reasonable cause to question the qualifications of an applicant, or if an applicant has not practiced as an acupuncturist for a period of twelve (12) or more consecutive months prior to application for Oregon licensure, the Board in its discretion may require the applicant to do one or more of the following:

(a) Pass the N.C.C.A.O.M. Acupuncture Certification Examinations.

(b) Pass an evaluation which may be written, oral, practical, or any combination thereof.

(c) Provide documentation of current N.C.C.A.O.M. Acupuncture certification.

(d) Document 15 hours of continuing education acceptable to the Board for every year the applicant has ceased practice prior to application for Oregon licensure. Continuing education that meets N.C.C.A.O.M.'s recertification requirements would qualify as Board approved continuing education.

(e) As a condition of licensure, practice under a Board approved mentor for a specified period of time.

(3) An applicant shall be required to pass an open-book examination on the Medical

Practice Act (ORS Chapter 677) and Oregon Administrative Rules (OAR Chapter 847, Division 070).

847-070-0022

Documents to be Submitted for Licensure

The documents submitted must be no larger than 8 ½" x 11". All documents will be retained by the Board as a permanent part of the application file. If original documents are larger than 8 ½" x 11", the copies must be reduced to the correct size with all wording and signatures clearly shown. The following documents are required for an applicant:

(1) Application Form: Completed formal application form provided by the Board.

Each and every question must be answered with full dates, showing month, day, and year.

(2) Birth Certificate: A copy of birth certificate for proof of name and birthdate, or a copy of Change of Name documentation, Marriage Certificate, or Divorce Decree if the applicant's name has been changed by court order, adoption, marriage, divorce, etc.

(3) Acupuncture School Diploma: A copy of a diploma showing graduation from an approved school of acupuncture, for those applicants who qualify under OAR 847-070-0016(1).

(4) Military Separation Paper: A copy of Separation Paper (showing beginning and ending dates) for each term of Active Duty in the Armed Forces (Report of Separation - Form DD-214 or equivalent; Statement of Service, Verification of Status for USPHS), for the past ten (10) years only. A Discharge Certificate is not acceptable.

(5) Photograph: A close-up, finished, original photograph (passport quality), no smaller than 2" x 2" and no larger than 2 1/2" x 3", front view, head and shoulders (not profile), with features distinct, taken within 90 days preceding the filing of the application with the applicant's signature in ink and date taken on the photograph side.

(6) A letter from the Dean of the applicant's program of acupuncture, for those applicants who qualify under OAR 847-070-0016(1).

(7) A letter from the National Certification Commission for Acupuncture and Oriental Medicine (N.C.C.A.O.M.) verifying current certification in acupuncture by the N.C.C.A.O.M., for those applicants who qualify under OAR 847-070-0016(2).

(8) A letter verifying licensure in good standing from the state or states of all prior and current health related licensure.

(9) A letter from the Director or other official for practice and employment to include an evaluation of overall performance and specific beginning and ending dates of practice and employment, for the past five (5) years only. For acupuncturists who have been or are in solo practice, three reference letters from acupuncturists in the local treatment community who are familiar with the applicant's practice and who have known the applicant for more than six months.