



Oregon Board of Naturopathic Medicine

Our mission is to protect the public through licensing and regulation of naturopathic physicians. The Board will promote physician excellence and foster communication within the profession and with the public.

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This Is Your RENEWAL NOTICE

Access Your Renewal Documents Online Today www.oregon.gov/obnm

Login Using:

- Your Last Name
- Your License Number (found on your license)
- Last 4-digits of Your
- Social Security Number

Fees & CE Requirements Also Found Online www.oregon.gov/obnm

The OBNM Review

Fall Winter

2012

TO DEA or NOT TO DEA - That is the Question

~Greg Eckel, LAc, ND

We have the right, so should NDs register for and maintain a DEA license?

This question is one of particular importance when considering that we have seen several instances of physicians prescribing testosterone without valid DEA licensure, not realizing it is a schedule III controlled substance.

NDs have prescription rights for schedules II, II-N, III, III-N, IV, and V per OAR 850-060-0125. You are also required to hold an active DEA registration to prescribe from any of these schedules for drugs listed in the Formulary compendium (850-060-0226).

The following websites are useful resources to have on hand for frequently asked questions about prescribing any and all controlled substances:

The OBNM site:

www.oregon.gov/obnm/Pages/FAQ.aspx

The DEA website:

<http://www.deadiversion.usdoj.gov>

So, how do practitioners determine if they are going to get or renew a costly DEA license?

The answer lies within the framework of your scope of practice. To have full scope of practice in the state of Oregon, all practitioners need DEA licensure to meet the varied and changing needs of your patient population.

Additionally, some pharmacies will not bill your patient's insurance for prescriptions you have written without a valid DEA number. While many pharmacies are moving towards using NPI numbers for this, we know that this older system is still in place in many locations. Therefore, the answer to this question is up to you and how you perceive the scope of your practice today and in the future.

“Hold yourself responsible for a higher standard than anybody expects of you. Never excuse yourself.”

~Henry Ward Beecher

PDMP ~ Prescription Drug Monitoring Program

The Prescription Drug Monitoring Program (PDMP) became operational in September 2011.

The biggest service this program provides is giving you the knowledge you need to have informed conversations with your patients regarding their health and current medications.

Yes, **it will help you with drug seeking patients** – have an informed conversation with him/her.

Yes, **it will help you with patients who want to reduce prescription drugs, but forget what all they are taking** – you can create better informed treatment plans.

Yes, **it helps with the patient who denies talking any prescription medications, but you want to be sure you do not start a protocol of herb with drug interactions** – you can make better informed care determinations.

Today, all health care practitioners with prescribing authority should be using this invaluable service. (cont'd on page 7)

OBNM LEGISLATURE

CALLING ALL "EXPERTS"

From time to time while conducting investigations, the Board needs ND expertise.

Might You Be Interested?

- What is your field of practice?
- Are you considered an "expert?"
- Are you licensed in more than one health profession?
- If so, what profession—other than naturopathic medicine?
- Do you know someone, in another health profession, who might be a viable expert for the Board?
- If so, what area?
- Are you fluent in a second (or third) language and able to help translate during an interview?

FOR MORE INFORMATION PLEASE CONTACT OBNM TODAY

LC 380 — Cost Recovery in Contested Cases

The OBNM is asking for the authority to charge back — to the respondents, not all licensees — the unexpected costs incurred in a contested case hearing; thus, avoiding future fee increases to all licensees.

As the profession grows and the number of consumers of naturopathic medicine increases, the Board receives and investigates more complaints.

- There were 200-plus licensees in January 1999; there are over 950 licensees in January 2012, with 50-60 new doctors being licensed every year.

- The number of complaints requiring investigation has also risen: 18 in 2007, 30 investigation each year in 2008, 2009 and 2010, and 36 in 2011.

As the number of notices of proposed discipline that are issued increases, so do requests for a hearing. It is the legal right of anyone to contest the Board's notice and request a hearing. Contested cases are being requested more often and the Board has no way to know what to budget for these unknown costs, nor how much of an increase to licensing fees is necessary to maintain the agency's operations.

The 2011-2013 budget required a fee increase to all licensees, as the legal fees involved with contested cases has increased over the last several biennium and depleted any cash reserves of the Board.

A contested case — if it does not go to hearing — can cost the Board between \$2,000 and \$6,000. A contested case that goes to hearing can cost the Board \$7,000 to \$24,000 ... or more. Currently these costs are paid by all licensees.

Legislative Concept 380 is being proposed by the OBNM to allow these costs to be referred back to the respondent, instead of all licensees.

The OBNM would like your thoughts on this critical legislation. Please email any comments or questions to the director.

Anne Walsh, at obnm.info@state.or.us.

LC 381 — The Board's Subpoena Authority

Currently, only the Board Chairperson can issue a subpoena to require records needed in an investigation. By law, OBNM must conduct timely investigations. If the issuance of a subpoena needs to wait on the signature of the OBNM Chair, there is the potential for a delay in the investigation process. Thus, the ability to issue timely subpoena is critical to this effort. To that end, the OBNM is requesting the right to authorize a designee of the Board to issue subpoenas as part of an open investigation.

"Have a cup of coffee with your locally-elected representatives and tell them about your practice. Attend a Board meeting & share your ideas. Or ... better yet, apply to serve on the Board, or work on a Board committee!"

~ Yi-Kang Hu, Ph.D., JD.,
OBNM Public Board Member

Down on the Pharm

UPDATES FROM THE OBNM FORMULARY COUNCIL

At the March 14, 2012 Formulary Council meeting, the council recommended the addition of nitrous oxide; in June 2012, it was added, by rule to OAR 850-060-0226(8) Central Nervous System Agents.

At the September 19, 2012 meeting, the Council discussed a revision of their purpose. Applications for drug submissions have decreased with the ongoing changes to the formulary compendium.

At the March 2013 meeting, along with considering any new applications, the council will consider new drugs that are available and recommend the Board exclude any of these drugs that may not fit within the scope of practice.

OBNM INFORMATION & UPDATES

OBNM BOARD MEMBERS

Who is Your Patient?

If you are providing medical services to a family member, a friend, or an employee, you are treating a patient. A physician-patient relationship starts when you provide any medical services.

OAR 850-010-0005(8) "Patient" means any person who is examined, treated, or otherwise provided naturopathic medical services, whether or not the person has entered into a physician-patient relationship or has agreed to pay a fee for services.

Coordinated Care

November 1st will be a big day for thousands of OHP Open Card patients — **they will be enrolled in the new Coordinated Care Organizations (CCO) health plan.** It may also be the day that they lose access to you as their primary care physician. Thus, for many patients, this could be a tremendously and needlessly traumatic transition.

To assure continued care for your patients, you can do the following.

~**Contact OANP** to find your regional CCO to ask how you can get credentialed in order to ensure patient continuity of care.

~**Communicate with your patients.** It is important that you communicate with your patients so they understand these changes.

2012-13 Office Closures

State-mandated furlough days (~ June 2013):

Friday November 23, 2012

Friday, January 18, 2013

Friday, April 19, 2013

Friday, May 24, 2013

The OBNM office will be closed while observing the following 2012-13 holidays:

Veterans Day, November 12, 2012

Thanksgiving Day, November 22, 2012

Christmas Day, December 25, 2012

New Year's Day, January 1, 2013

Martin Luther King Jr Day,

January 21, 2013

Presidents Day, February 18, 2013

Memorial Day, May 27, 2013

Independence Day, July 4, 2013

Labor Day, September 2, 2013

Veterans Day, November 11, 2013

Thanksgiving, November 28, 2013

Christmas Day, December 25, 2013

2012 License Renewals

RENEWALS ARE READY

You can renew online

Visit the OBNM Web Site

www.oregon.gov/obnm

Before proceeding to access your renewal online, please review the following.

In order to login, you will need:

- **Your license number** (no letters, just the number) and
- **Your social security number.**

Once you access our site, you will need:

- Information on any address changes you may have
- Your CE records to enter, which must include (for an active license) 45+ hours of CE, with at least 10 hours in pharmacy and 2 in ethics
- If licensed within the last two years, information on pain management
- If you hold a certificate in natural childbirth, you need to fax or email a copy of a current neonatal resuscitation card
- Answers to all history questions *since your last renewal* and
- Your credit card (if paying online).

Please note: If you answer yes to any history questions, you must provide a brief explanation directly to the OBNM office (via email or fax) along with any supporting documentation. History questions are only for activities since your last renewal.

If you start the online renewal process — with everything you need — it will take between 10 and 20 minutes to complete. If you are not prepared, or are unable to complete your renewal in one visit, the information you have added will be saved.

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So, now that you know everything you need, why not go ahead and get that renewal done early this year.

Michelle Homer, ND, Board Chair - A member of the Board since 2007, she has served as Board Chair since June 2011. Dr. Homer works at Southern Oregon Head Start.

Yi-K Hu, PhD., Public Member - A member since 2006, Dr. Hu is a licensed Oregon attorney. He has a private practice and volunteers with Legal Aid Services of Oregon. Dr. Hu earned his Ph.D. in Biochemistry & Molecular Biology.

Sara Ohgushi, ND - As a Board member since 2009, Dr. Ohgushi has been in private practice since 2000 and is certified in natural childbirth. Dr. Ohgushi is the President of the American Association of Naturopathic Midwives.

Patrick Chapman, ND - Appointed to the Board in 2009, he is the Board's appointed representative to the Formulary Council. Dr. Chapman has been licensed since 2004, with a private practice in Sellwood.

Gregory Eckel, ND - Dr. Eckel has served on the Board since 2010. Dr. Eckel has been licensed since 2001 and practices in downtown Portland.

Dwight Adkins, Public Member— Appointed to the Board August 2011. He is a Strategic Consultant with Samantha Swaim Fundraising LLC. Their focus is helping non profits change the world.

Sheila Myers, ND - The newest Board member, appointed September 2011 practices in Bend Oregon. Being in practice since 1991, she has the experience and knows the needs of rural Central Oregon practice.

Paradigm of Pain Management Turmoil

~Kevin Wilson, ND, FC Chair

The paradigm of pharmaceutical pain management is in turmoil. There is an apparent schism within the regulatory agencies both encouraging better and more aggressive pain management, and marginalizing and persecuting high prescribing physicians. The statistics about opiate excesses and associated overdose deaths are alarming.

— *How is the compassionate and responsible physician to proceed, given these seemingly irreconcilable polar positions?* —

It is clear that opiates have terrible negatives associated with them, including addiction and dependence and drug resistance. In fact, it is clear that the tolerance to and dependence on opiates begin within the first few doses! Furthermore, new science shows that opiates actually create a more painful central nervous system state by creating inflammatory changes in the glial cells independently of the pain modulating effects that we have depended upon.

By giving pain patients opiates with the generous sense of humane pain relief, we may actually be creating a chronic pain patient. Each physician must struggle with what is ethically correct and right and clinically effective; do not be afraid, but be careful, thoughtful and have an exit strategy in mind. It is easy to be fooled by those on opiates; all prescribers are eventually. That is not a crime, but not learning from one's mistakes may be.

Additionally burdensome is the fact that some of the safest newer agents for chronic pain in the opiate realm such as buprenorphine are very expensive and bureaucratically challenged as well.

Unfortunately, as many know, non-steroidal anti-inflammatory drugs are not a good option. Not only do they impair our ability to repair injured tissues, but they put our patients at heightened risk for strokes, kidney damage and GI bleeding even on the first dose and at normal doses. Even stroke preventive doses of aspirin create measurable GI inflammation and bleeding.

The exciting aspect to this clinical dilemma is that the naturopathic method has valuable treatments to offer. Not only are we able to prescribe powerful conventional and alternative pain medicines for the acute painful condition but we can alter the painful biological terrain with diet, lifestyle and natural therapeutics unfamiliar to the average physician. I believe that botanical medicines,

not including opiates, will reestablish themselves as valuable and viable options for patients in pain. As is often the case, old abandoned medicines such as the nervines, boswellia, turmeric and harpagophytum can offer some serious relief.

The new information about cannabidiol, and a non-intoxicating cannabinoid found in several plants such as hops offers some exciting options for pain relief. Certain nutrients such as alpha lipoic acid, N-acetyl carnitine and B12 and many others modulate pain to a measurable degree.

Strategically, it may be the best plan to address acute pain aggressively to limit the possibility of it becoming chronic pain. We should consider using all the tools at our disposal to help mitigate pain, but remember also that sometimes the best practice is to do little and let the natural healing and recovery ensue.

Additionally, we all need to embrace the profoundly valuable modalities of pain psychology, neural blockade, physical therapy, strength training and cranial electrical stimulation and acupuncture as not just ancillary aids but core approaches to our patients in pain. The elasticity of the nervous system is a hopeful concept that can be effective in patients reconfiguring their nociceptive mechanisms away from pain towards comfort.

ND's are in a unique and important position on the pain management landscape. The old model is fading, being forced to look around and ask for help. We have some answers, but as anyone who has dealt with a chronic pain patient or a painful condition themselves knows, pain humbles all, patient and physician alike.



— *We are not the answer to pain, but we become equal partners in the battle to limit suffering.* —

Just as it takes a village to raise a child, it may in fact, take a team to control bad pain. The new paradigm is collaborative team efforts for our patients. Let's work together, referring to those of us who have helpful skills and to non-naturopathic colleagues who also understand the complexity of pain.

There is more than enough pain to go around.

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SERV-OR ~ Ready to Help

Administrative Rules Updates

The last year brought changes to the following:

850-060-0215, NDs holding a current DEA Registration can now prescribe from drugs listed in the Formulary compendium, that are Schedule II, IIN, III, IIIN, IV, and V.

850-030-0035 increased the renewal fees. Even with the increase in renewal fees, the fees are still less than they were in 2001.

850-050-0120 was amended to clarify the timeline for self-reporting offenses to be in statutory compliance.

850-030-0030 was amended to read more easily so the applicant has a better understanding of the applicants responsibility in the licensure process from examination to licensure.

850-030-0031 was created to remove the licensure requirements from 850-030-0030, and in doing so define the process more clearly.

850-030-0070 cleans up the language on reciprocal licensure.

850-060-0226 now includes Nitrous Oxide, added to (8)Central Nervous System Agents.

Oregon Revised Statutes (ORS) provide the authority (ORS 685) governing the practice of Naturopathic medicine. Changes to these laws can only be made by the Legislature during session **Oregon Administrative Rules (OAR)** define the statutes (ORS 685). The Board writes rules and all interested parties are given the opportunity to comment before they are adopted as permanent.

MANY CE OPPORTUNITIES

can be found at our web site:
<http://www.oregon.gov/OBNM/CE.shtml>

Not all approved programs are listed, so read OAR 850-040-0210 to find out if a program qualifies, and check with the presenter, sponsor or the Board office if you have questions.

Join other health professionals and get trained, pre-credentialed and deployed rapidly to help those in need.

The State Emergency Registry of Volunteers in Oregon, known as SERV-OR is run by the Oregon Health Authority and is a great avenue for licensed healthcare professionals who may want to volunteer their services to help those in need during community disasters and public health emergencies.

SERV-OR allows health professionals to register in advance so they are ready to lend a hand in the next public health emergency. However, only a small percentage of eligible health care professionals are currently registered. Here is your opportunity to register with SERV-OR and be ready to participate.

• Disaster Training Provided

After an application is approved, registered volunteers have access to free online and face-to-face training. Courses cover Basic and Advanced Disaster Life Support, disaster burn training, triage, personal and family preparedness, and the Incident Command System. The Basic Disaster Life Support course provides a full day of CMEs, and the Advanced course provides two full days -- at no cost to registered volunteers.

• Minimum Requirements

Any licensed Naturopathic physician with an active, unencumbered license is eligible to join the statewide volunteer unit, known as the State Managed Volunteer Pool. Additionally, some counties have a local Medical Reserve Corps unit that is actively recruiting. Apply for both groups through SERV-OR.

Why Register Now?

Being prepared for a disaster means Oregonians can count on trained professionals who:

- Are willing and prepared to deploy.
- Have registered with the State and can be verified in advance of an emergency.
- Don't have to wait on completed paperwork before putting their skills to the test.

To Register or get more information:

Eric Gebbie, DrPH,
SERV-OR Systems Coordinator
SERV.OR@STATE.OR.US
Telephone (toll-free, voice): 1-877-343-5767
SERV-OR.ORG

GETTING ACQUAINTED

Some new Licensees are better prepared to face the challenges of starting out on their own. Others could use a helping hand while getting started. As a new graduate, you may want to contact a more experienced doctor while seeking some peer advice. Or, if you have been in practice for a while, and are looking for someone to join your practice full or part-time, consider these new doctors. You may be able to share your experiences while mentoring other Naturopaths getting started. Either way, we encourage you to "Get Acquainted!"

All Licensee contact info can be found on our web site under the "Find a Physician" link.

NEW LICENSEES

Congratulations! It has been a long road and we are excited to welcome you as "Doctor." The Board is here to help you as a licensee of the OBNM. If you have questions, please feel free to contact me.
 ~ Anne Walsh, Executive Director

Name, License Number	Date	City, State	Name, License Number	Date	City, State
Colleen Amann, ND 1888	4/9/2012	Portland, OR	Jessica Huffman, ND 1860	10/18/2011	Portland, OR
Sarah Axtell, ND 1874	1/3/2012	Portland, OR	Chrysalis Jayne, ND 0801R	2/27/2012	Eugene, OR
Rebecca Berzow, ND 1871	1/1/2012	Portland, OR	Conan Jones, ND 1932	10/15/2012	Portland, OR
Brooke Bodeen, ND 1916	10/1/2012	Springfield, OR	Melanie Keller, ND 1899	10/1/2012	Portland, OR
Ashley Boudet, ND 1861	10/19/2011	Portland, OR	Melissa Kuser, ND 1878	1/4/2012	Portland, OR
Kaley Bourgeois, ND 1896	10/1/2012	Lake Oswego, OR	Valerie LaRosa, ND 1901	10/1/2012	Portland, OR
Lisa Brennan, ND 1866	12/5/2011	Portland, OR	Stephen Levy, ND 1893	8/20/2012	Portland, OR
Jolene Brighten, ND 1897	10/1/2012	Portland, OR	Ariel Mastrich, ND 1914	10/1/2012	Lake Oswego, OR
Karen Brothers, ND 1928	10/09/2012	Philadelphia, PA	Joanna May, ND 1922	10/3/2012	Portland, OR
Theresa Brown, ND 1887	4/1/2012	Portland, OR	Tucker Meager, ND 1891	4/24/2012	Glenwood Springs, CO
Seth Burrell, ND 1911	10/1/2012	Portland, OR	Aarin Meager-Benson, ND 1880	1/9/2012	Glenwood Springs, CO
Carmen Campbell, ND 1877	1/4/2012	Portland, OR	Meredith Murray, ND 1906	10/1/2012	Portland, OR
Angela Carter, ND 1875	1/3/2012	Portland, OR	Jessica Nagelkirk, ND 1907	10/1/2012	Portland, OR
Amy Castellano, ND 1920	10/3/2012	Portland, OR	Kristina Olson-Kuyper, ND 1862	10/20/2011	Gresham, OR
John Chlebowski, ND 1886	4/1/2012	Ashland, OR	David Palacios, ND 1900	10/1/2012	McMinnville, OR
Heidi Clark, ND 1881	1/11/2012	Portland, OR	Nathalie Paravicini, ND 1890	4/24/2012	Portland, OR
Jocelyn Cooper, ND 1894	9/10/2012	Redmond, OR	Dennis Perry, ND 1927	10/09/2012	Beaverton, OR
Angela Cortal, ND 1917	10/2/2012	Portland, OR	Rachelle Price, ND 1892	7/2/2012	Coon Rapids, MN
Elizabeth Davidson, ND 1898	10/1/2012	Lake Oswego, OR	Kelly Raylinsky, ND 1895	10/1/2012	Portland, OR
Lisa Del Alba, ND 1884	3/16/2012	Eugene, OR	Janna Redding, ND 1931	10/10/2012	Portland, OR
Karen Dewitt, ND 1873	1/3/2012	Portland, OR	Amanda Richardson-Meyer, ND 1908	10/1/2012	Portland, OR
Rowan Dunlap, ND 1927	10/8/12	Portland, OR	Darcy Ries, ND 1923	10/4/2012	Portland, OR
Jennifer Elton, ND 1921	10/3/2012	Portland, OR	Brook Schales, ND 1930	10/10/2012	Portland, OR
Katherine Faur, ND 1879	1/6/2012	Phoenix, AZ	Alison Schulz, ND 1863	10/21/2011	Portland, OR
Marcy Feibelman, ND 1867	1/1/2012	Portland, OR	Erin Sharman, ND 1902	10/1/2012	McMinnville, OR
Valeria Ferdinand, ND 1926	10/8/12	Portland, OR	Jason Sherbondy, ND 1865	11/10/2011	Portland, OR
Terry Fong, ND 1889	4/13/2012	Portland, OR	Robin Sielaff, ND 1868	1/1/2012	Portland, OR
Cora Forsten, ND 1869	1/1/2012	Portland, OR	Janelle Siler, ND 1909	10/1/2012	Portland, OR
Megan Golani, ND 1905	10/1/2012	Portland, OR	Emily Simonis, ND 1872	1/1/2012	Ashland, OR
Karla Goodman, ND 1883	3/1/2012	Portland, OR	Maria Siri, ND 1910	10/1/2012	Portland, OR
Philip Grasso, ND 1876	1/4/2012	Lake Oswego, OR	Robert Strait, ND 1934	10/15/2012	Corvallis, OR
Katie Guidotti, ND 1882	1/16/2012	Medford, OR	Anne Van Couvering 1924	10/5/2012	Sag Harbor, NY
Chip Halverson, ND 1885	3/22/2012	Portland, OR	Lauren Ward, ND 1903	10/1/2012	Portland, OR
Leslie Hamlett, ND 1912	10/1/2012	Portland, OR	Nicole Weigl, ND 1933	10/15/2012	Portland, OR
Gillian Hanson, ND 1913	10/1/2012	Portland, OR	Melissa Wenzel, ND 1915	10/1/2012	Portland, OR
Ashlie Hempstead, ND 1918	10/2/2012	Portland, OR	Elise Wong, ND 1870	1/1/2012	Portland, OR
Kai Herman, ND 1919	10/2/2012	Portland, OR	Erica Zelfand, ND 1904	10/1/2012	Portland, OR

BOARD DISCIPLINARY ACTIONS

*Board Actions since September 2011

Case No. & Name	Violation & Board Action (Final Actions Only)
N10-08-14 Joshua David ND	Consent Order effective February 29, 2012 for violation of ORS 685.110(8), (14) and OAR 850-050-0190(3)(a). For a copy of this order: https://hrlb.oregon.gov/obnm/Discipline/N10-08-14.DavidJ.pdf
N11-01-01 Steven Cranford ND	Consent Order effective February 29, 2012 for violation of ORS 685.110(14) and OAR 850-050-0190(3). For a copy of this order: https://hrlb.oregon.gov/obnm/Discipline/N11-01-01.CranfordS.pdf Consent Order satisfied June 14, 2012
N11-08-04N Tuan Tran OAH: 1102540	Final Order effective August 21, 2012 for violation of ORS 685.020(1) and (2), and OAR 850-050-0120(1)9a) and (b). For a copy of this order: email a request to obnm.info@state.or.us
N11-06-12 Aris Campbell ND	Settlement Agreement and Consent Order effective November 15, 2011 for violation of ORS 685.110(14) and OAR 850-050-0190(3) and(4). For a copy of this order: https://hrlb.oregon.gov/obnm/Discipline/N11-06-12.CampbellA.pdf
N11-08-17 Brian Scott ND	Stipulation for Voluntary Surrender of License in Lieu of Revocation for violation of the terms of order N99-03-01 and ORS 685.110(14) and OAR 850-050-0190(3)(a). For a copy of this order: https://hrlb.oregon.gov/obnm/Discipline/N11-08-17.ScottB.pdf
N12-08-22A Janna Redding ND	Consent Order effective October 10, 2012 in lieu of denial of application under ORS 670.280(2) or (3) and ORS 685.110(6),(7) or (14). For a copy of this order: https://hrlb.oregon.gov/obnm/Discipline/N12-08-22A.ReddingJ.pdf
N12-08-20A Conan Jones ND	Consent Order effective October 15, 2012 in lieu of denial of application under ORS 670.280(2) or (3) and ORS 685.110(6),(7) or (14). For a copy of this order: https://hrlb.oregon.gov/obnm/Discipline/N12-08-20A.JonesC.pdf

Since August 2012

According to the PDMP, 4517 healthcare providers and pharmacists are signed up to use the system and have made 200,914 queries to the system. There have been 157 patient requests for records, 71 healthcare board requests, and 3 law enforcement requests.

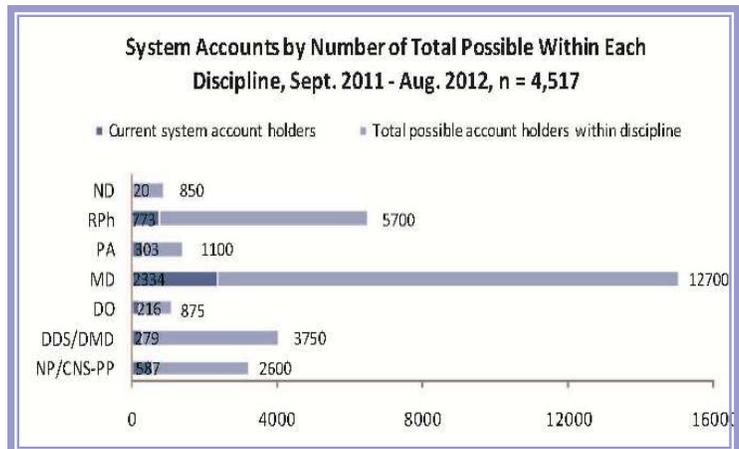
Additionally, in the summer of 2012 a PDMP evaluation survey was sent to just over 1000 system users and non-registered healthcare providers.

Preliminary results include:

- 92% reported that they believe this program is likely to improve management of patient prescriptions for controlled substances
- 78% reported that the PDMP is useful in helping to monitor patients controlled substance prescriptions, and
- 76% reported that it was helpful in controlling doctor shopping.

According to Todd Beran of PDMP, the program

is employing three Outreach Specialist for six months who can come speak to groups about the PDMP, assist with sign up and account applications. For more information contact the program at pdmp.health@state.or.us.





Oregon Board of
Naturopathic Medicine
800 NE Oregon Street Suite 407
Portland OR 97232

Office Hours

Monday through Friday
8:30 AM to 4:30 PM PT

Contact Information

Tel: 971-673-0193
Fax: 971-673-0226
obnm.info@state.or.us

Board Staff

Anne Walsh
Executive Director

David Linn
Administrative Assistant
Merill Creagh
Investigator

- - THIS IS YOUR NOTICE - -
IT IS TIME TO RENEW
YOUR 2012 OREGON ND LICENSE

Renewals are ready online at

www.oregon.gov/obnm

To learn more about how to access your renewal and what you will need
go to page 3

Or check out the information found the OBNM home page of our web site
www.oregon.gov/obnm