NEW MEXICO BOARD OF OSTEOPATHIC MEDICAL EXAMINERS
New Mexico Regulation and Licensing Department
BOARDS AND COMMISSIONS DIVISION
Toney Anaya Building ▪ PO Box 25101 ▪ Santa Fe, New Mexico 87505
(505) 476-4622 ▪ Fax (505) 476-4665 ▪ www.RLD.state.nm.us/boards

PHYSICIAN SUPERVISOR OF PHARMACIST CLINICIAN & CHANGE OF SUPERVISING PHYSICIAN

$100 fee enclosed: _____ $25 Change of Supervising Physician fee _____

State law gives prescriptive authority, as defined in the Act (Section 61-11 B-1 through 61-11 B-3 NMSA 1978), to "pharmacist clinicians" working under the supervision of a New Mexico licensed physician. The Pharmacist Clinician must be registered with the Board of Pharmacy and the Supervising Physician must be registered with the NM Board of Medical Examiners or the Board of Osteopathic Medical Examiners.

In addition to a completed application and $100 fee, the following information must be attached to this form:

1. Copy of proof of current certification as a Pharmacist Clinician by the NM Board of Pharmacy, and
2. A written protocol signed by the Pharmacist Clinician and the Supervising Physician, which includes the requirements in paragraph 16 NMAC 17.9 (copy enclosed).

Change of Supervising Physician includes completed application and $25 fee. A written protocol signed by the Pharmacist Clinician and the Supervising Physician.

Regis**tr**ation as a Pharmacist Clinician Supervisor is valid for *two years.*

SUPERVISING PHYSICIAN INFORMATION — must be authorized by New Mexico law to prescribe controlled substances.

Last Name:_____First Name: _____MI"_____

NM License #:_____SSN#:_____DEA Number: _____

Business Address: _____

City_____.ST:_____ZIP:_____Daytime-Phone #:_____

Mailing Address (if different from above):

_____

_____City._____ST:_____ZIP:_____

PHARMACIST CLINICIAN INFORMATION

Last Name: _____First Name: _____ MI"_____

NM License #:_____SSN#:____-___-_____DEA Number_____

Business Address:_____DOB:_____

City: _____ST: _____ZIP: _____Daytime-Phone #:_____

Mailing Address (if different from above):

Business Address: _____DOB:_____

City:_____ST:_____ZIP:_____Daytime-Phone #:_____

BOP Certification as Pharmacist Clinician: Date Certified._____Exp Date: _____

(Please attach copy of certificate issued by the Board of Pharmacy)

ALTERNATE SUPERVISING PHYSICIAN INFORMATION — If you have more than I alternate please provide this information on a separate sheet of paper for each alternate. Supervising physicians must be authorized by New Mexico law to prescribe controlled substances.

Last Name:_____First Name:_____MI: _____

NM License #:_____SSN#:_____DEA Number: _____

Business Address _____DOB:_____

City: _____ST:_____ZIP_____ Daytime-Phone #:_____

AFFIDAVIT

Pharmacist Clinician: I am the person named in this application for the authority to practice as a pharmacist clinician under the supervision of a NM licensed physician. I hereby certify that _____ is the physician authorized to prescribe dangerous drugs, and I have read and agree to the guidelines and protocols established for practice as a pharmacist clinician.

Date:_____Signed: _____

(Pharmacist Clinician Signature)

AFFIDAVIT

Supervising Physician: I hereby certify that I understand the obligations of serving as pharmacist clinician supervisor as set forth in Section 61-11 B-1 through Section 61-11 B-3 and 16 NMAC 10.11, including a quality assurance program for review of medical services provided by the pharmacist clinician, and have agreed to serve as supervisor.

Date:_____Signed: _____

(Supervising Physician)

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 17 OSTEOPATHIC MEDICINE AND SURGERY PRACTITIONERS
PART 9 PHYSICIANS SUPERVISING PHARMACIST CLINICIANS

16.17.9.1 ISSUING AGENCY: Regulation and Licensing Department - NM Board of Osteopathic Medical Examiners. [16.17.9.1 NMAC - N, 02-07-2016]

16.17.9.2 SCOPE: The provisions in Part 9 of Chapter 17 apply to all osteopathic physicians who supervise pharmacist clinicians.
[16.17.9.2 NMAC - N, 02-07-2016]

16.17.9.3 STATUTORY AUTHORITY: These rules of practice and procedure govern the practice of medicine in New Mexico and are promulgated pursuant to and in accordance with the Osteopathic Medicine and Surgery Act, Section 61-10-14 NMSA 1978 and the Pharmacist Prescriptive Authority Act 61-11B-1 to 61-11B-3 NMSA 1978.
[16.17.9.3 NMAC - N, 02-07-2016]

16.17.9.4 DURATION: Permanent.
[16.17.9.4 NMAC - N, 02-07-2016]

16.17.9.5 EFFECTIVE DATE: February 7, 2016, unless a later date is cited at the end of a section. [16.17.9.5 NMAC - N, 02-07-2016]

16.17.9.6 OBJECTIVE: The objective of Part 9 of Chapter 17 is to establish and adopt rules to carry out the board's responsibilities set forth in Sections 61-11B to 61-11B-3, NMSA 1978, the "Pharmacist Authority Act."
[16.17.9.6 NMAC - N, 02-07-2016]

16.17.9.7 DEFINITIONS:

A. "**Consultation**" means in person, telephonically, by two-way radio, by e-mail or by other electronic means.

B. "**Alternate supervising physician**" means a physician who holds a current unrestricted license to practice medicine or osteopathic medicine, is a cosignatory on the notification of supervision, and agrees to act as the supervising physician in the supervising physician's absence with no change to the scope of practice or protocol of the pharmacist clinician. The alternate supervising physician must be approved by the board.

C. "**Scope of practice**" means duties and limitations of duties placed upon a pharmacist clinician by their supervising physician or the alternate supervising physician(s) and the board; includes the limitations implied by the field of practice of the supervising physician or the alternate supervising physician(s) and the board. [16.17.9.7 NMAC - N, 02-07-2016]

16.17.9.8 APPROVAL OF SUPERVISING PHYSICIANS: A physician shall only be approved as a pharmacist clinician supervisor after the pharmacist clinician registers with the board by submitting an application for authority to practice under the supervision of a licensed physician. The application shall include: **A.** The name, address, phone number of the applicant, and proof of current certification as a pharmacist clinician by the board of pharmacy;

B. the name, address, and phone number of the supervising physician;

C. a written protocol agreed to and signed by the pharmacist clinician and the supervising physician that shall include:

(1) a statement identifying the physician authorized to prescribe dangerous drugs and the pharmacist clinician who is a party to the guidelines or protocol;

(2) a statement of the types of prescriptive authority that the pharmacist clinician is authorized to make within his scope of practice which may include:

(a) a statement of the types of diseases, dangerous drugs or dangerous drug categories involved and the type of prescriptive authority authorized in each case; and

(b) a general statement of the procedures, decision criteria or plan the pharmacist clinician is to follow when exercising prescriptive authority;

(c) a statement of the activities the pharmacist clinician is to follow in the course of exercising prescriptive authority, including documentation of decisions made and a plan for communication to and consultation with the supervising physician concerning specific decisions made; documentation may occur on the prescriptive record, patient profile, patient medical chart or in a separate log book; and

(d) a statement that describes appropriate mechanisms for reporting to the physician the pharmacist clinician's activities in monitoring the patients; and

(e) a statement that describes provisions for immediate communication or consultation between the pharmacist clinician and the supervising physician or alternate supervising physician.

D. The pharmacist clinician may be authorized in the protocol to monitor dangerous drug therapy as follows:

(1) collecting and reviewing patient dangerous drug histories;

(2) measuring and reviewing routine patient vital signs including pulse, temperature, blood pressure and respiration; and

(3) ordering and evaluating the results of laboratory tests relating to dangerous drug therapy, including blood chemistries and cell counts, controlled substance therapy levels, blood, urine, tissue or other body fluids, culture and sensitivity tests when performed in accordance with guidelines or protocols applicable to the practice setting.

E. A pharmacist clinician may only prescribe controlled substances if she:

(1) has obtained a New Mexico controlled substances registration and a drug enforcement agency registration, and

(2) prescribes controlled substances within the parameters of written guidelines or protocols established under these regulations and Section 3.A of 62-11B NMSA 1978, the Pharmacist Prescriptive Authority Act.

F. The protocol for each pharmacist clinician shall be reviewed by the board as least every two years.

G. A pharmacist clinician shall perform only those services that are set forth in the protocol.

H. Pharmacist clinicians may prescribe only those drugs described in a board approved protocol.

I. A physician may supervise as many pharmacist clinicians as the physician can effectively supervise and communicate with in the circumstances of their particular practice setting.

J. Within thirty days after an employer terminates the employment of a pharmacist clinician, the supervising physician or the pharmacist clinician shall submit a written notice to the board providing the date of termination and reason for termination. The pharmacist clinician shall not work as a pharmacist clinician until the board approves another supervising physician.

[16.17.9.8 NMAC - N, 02-07-2016]

16.17.9.9 THE PHYSICIAN'S REQUIREMENTS OF SUPERVISION:

A. Supervising physicians must provide direction to pharmacist clinicians to specify the pharmacotherapeutic services to be provided under the circumstances in each case. This may be done by written protocol or by oral consultation. It is the responsibility of the supervising physician to assure that the appropriate directions are given and understood.

B. Supervising physicians must establish a quality assurance program for review of medical services provided by the pharmacist clinician.

C. If the supervising physician is of the opinion that circumstances warrant exceptions to the requirements set forth in Subsections A or B above, the supervising physician must specify the circumstances in writing and deliver the same to the board. The board will review, grant or deny requests for exceptions or waivers, at the board's discretion.

D. Documentation of the supervising physician reviews must be retained by the pharmacist clinician and be available for board inspection for a period of not less than five (5) years from the date of such reviews.

E. The pharmacist clinician must have prompt access to the physician by telephone or other electronic means for advice and direction.

F. If the supervising physician plans to be or is absent from his or her practice for any reason, the supervising physician cannot designate a pharmacist clinician to take over those duties or cover the practice during such absence. The supervising physician may designate an alternate supervising physician, approved by the board, to cover the practice and perform the duties of supervising physician. The alternate supervising physician will then supervise the pharmacist clinician and will be responsible for the pharmacist clinician's actions or omissions in exercising prescriptive authority or other duties as a pharmacist clinician.

G. In order to change a supervising physician between biennial renewals of registration, without a change to the pharmacist clinician's scope of practice or protocol, a pharmacist clinician shall submit to the board a change of supervising physician form and the required fee, as specified in 16.10.9.11 NMAC. The new supervising physician may only act after the application is approved by the board.
[16.17.9.9 NMAC - N, 02-07-2016]

16.17.9.10 REPORT AND COMMITTEE: The chair of the board shall appoint two (2) members of the board, or a member and an agent of the board to an oversight committee that shall also include two members appointed by the board of pharmacy. The oversight committee will make a report that may include non-binding recommendations to both the board of pharmacy and the board of osteopathic medical examiners regarding disciplinary action. Each board can accept or reject the recommendations.
[16.17.9.10 NMAC - N, 12-18-15]

16.17.9.11 PHYSICIANS SUPERVISING PHARMACIST CLINICIANS:

A. Registration application fee of $100.

B. Biennial renewal fee of $100.

C. Change of supervising physician fee of $25, with no change in scope of practice or protocol.

D. Late fee of $25 for failure to renew registration or provide required documentation on or before July 1.

[16.17.9.11 NMAC - N, 02-07-2016]

HISTORY of 16.17.9 NMAC: [RESERVED]