

CHAPTER 6900
BOARD OF PODIATRY
PODIATRIST LICENSURE

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6900.0010 DEFINITIONS.

Subpart 1. **Scope.** For purposes of this chapter, the following terms have the meanings given them.

Subp. 1a. **Acceptable graduate training.** "Acceptable graduate training" means at least 12 consecutive months of postgraduate training in a clinical residency or preceptorship as described in part 6900.0020, subpart 5, 6, or 7.

Subp. 2. [Repealed, 15 SR 2629]

Subp. 3. [Repealed, 15 SR 2629]

Subp. 3a. **Blood borne diseases.** "Blood borne diseases" means diseases that are spread through exposure to, or inoculation of, or injection of blood, or through exposure to blood contained in body fluids, tissues, or organs. Blood borne diseases include infection caused by such agents as the human immunodeficiency virus (HIV) and hepatitis B virus (HBV).

Subp. 4. **Board.** "Board" means the Minnesota Board of Podiatric Medicine.

Subp. 4a. **Infection control.** "Infection control" means programs, procedures, and methods to reduce the transmission of agents of infection for the purpose of preventing or decreasing the incidence of infectious diseases.

Subp. 5. **Revoke a license.** "Revoke a license" means to rescind the right to practice and cause the podiatrist to reapply and meet the licensure requirements at the time of application.

Subp. 6. **Suspend a license.** "Suspend a license" means to discontinue a podiatrist's right to practice for a definite or indefinite time until specified conditions are met.

Subp. 7. **False or misleading advertising.** "False or misleading advertising" means a statement or claim that:

- A. contains a misrepresentation of fact;
- B. is likely to mislead or deceive because in context it makes only a partial disclosure of relevant facts;
- C. is intended or is likely to create false or unjustified expectations of favorable results;
- D. appeals to an individual's anxiety in an excessive or unfair way;
- E. contains material claims of superiority that cannot be substantiated;
- F. misrepresents a podiatrist's credentials, training, experience, or ability; or
- G. contains other representations or implications that in reasonable probability will cause an ordinary, prudent person to misunderstand or be deceived.

Subp. 8. **Initial licensure period.** For a license issued after the date on which the biennial renewal period becomes effective, "initial licensure period" means the period which begins on the date licensure is granted and ends on June 30 of the first fiscal year following the fiscal year in which the license is granted.

Statutory Authority: *MS s 153.02; 153.16; 214.06; 214.12*

History: *13 SR 1237; 15 SR 2629; 18 SR 620; 20 SR 168*

6900.0020 LICENSURE REQUIREMENTS.

Subpart 1. **Moral character.** The applicant must respond to questions on the application that pertain to the grounds for denial of a license found in Minnesota Statutes, section 153.19, subdivision 1.

A personal recommendation must be received from at least one podiatrist who is licensed in any state and who can recommend the applicant for licensure in Minnesota.

Subp. 2. Education. The applicant must submit a complete transcript of education obtained in any college accredited by the Council on Podiatric Medical Education, American Podiatric Medical Association.

The transcript must contain the date of graduation, degree granted, and an original seal of the college.

Subp. 3. Examination. The applicant must have received a passing score on each part of the National Board of Podiatric Medical Examiners Licensing Examination. A passing score is the number corresponding to or greater than the cut score recommended by the national board. The cut score is the score which separates passing scores from failing scores.

A copy of the applicant's scores must be submitted. The copy must contain an original seal of the national board.

Subp. 3a. State clinical examination. The applicant must pass a state clinical examination as required in Minnesota Statutes, section 153.16, subdivision 1, paragraph (c).

A state clinical examination shall include demonstration of the clinical application of podiatric medical knowledge and skill, but need not include demonstrations on actual patients. The examination may be developed in cooperation with boards of podiatric medicine in other states. A passing score is the number corresponding to or greater than the cut score recommended by a test development consultant.

Subp. 4. Graduate training. Applicants graduating in 1987 and thereafter from a podiatric medical school must present evidence of satisfactory completion of acceptable graduate training. For applicants entering a graduate training program after June 30, 1995, the evidence of satisfactory completion must include written verification from the program supervisor and submission of the applicant's surgical and other training logs. The logs will be returned at the applicant's request.

Subp. 5. Clinical residency. A clinical residency is a formal, structured postdoctoral training program approved by the Council on Podiatric Medical Education of the American Podiatric Medical Association and sponsored by and conducted in an institution such as a hospital or ambulatory health care facility or conducted by a college of podiatric medicine accredited by the Council on Podiatric Medical Education of the American Podiatric Medical Association. The residency must:

A. provide the podiatric medical graduate with a well-rounded exposure in preparation for management of podiatric conditions and diseases as they are related to systemic diseases of children and adults;

B. develop the podiatric medical graduate in the art of preventing and controlling podiatric conditions and diseases and in the promotion of foot health principally through mechanical and rehabilitative methods;

C. provide the podiatric medical graduate with clinical experience necessary to refine competency in the podiatric medical and surgical care of the foot as defined by the statutory scope of practice; or

D. provide the podiatric medical graduate with clinical experience necessary to become competent in the full scope of podiatric medicine and surgery.

Subp. 6. Preceptorship. A preceptorship is a formal, structured postdoctoral training program, with written objectives appropriate to all aspects of the program and a written evaluation process, conducted by a podiatrist primarily in an office-based setting and controlled and supervised by a college of podiatric medicine accredited by the Council on Podiatric Medical Education of the American Podiatric Medical Association. The preceptorship must provide the recent podiatric medical graduate sufficient experiences to have further patient care exposure, to improve clinical management and communication skills, and to obtain increased self-confidence.

Subp. 7. Preceptor requirements. The preceptor must:

A. provide hands-on training in the care of children and adults that offers experience as defined by the statutory scope of practice including drug therapy, radiology, local anesthesia, analgesia, biomechanics, physical medicine, rehabilitation, and the following surgeries:

- (1) nail;
- (2) digital;
- (3) soft tissue;
- (4) forefoot;
- (5) metatarsal;
- (6) midfoot; and
- (7) rearfoot or ankle;

B. hold a clinical appointment at a podiatric medical school or be a member of the teaching staff of a hospital sponsoring a residency program;

C. have a hospital staff appointment with podiatric surgical privileges; however, the granting of staff privileges is solely within the discretion of individual institutions;

D. not have been the subject of disciplinary action concerning professional conduct or practice; and

E. instruct and direct the unlicensed podiatrist in the podiatrist's duties, oversee and check the work, provide general directions, and comply with at least the following criteria:

(1) review and evaluate patient services provided by the unlicensed podiatrist from information in patient charts and records on a daily basis and the unlicensed podiatrist's surgical and other training logs on a monthly basis; review of patient charts and records may either be in person or by telecommunication;

(2) be on-site at facilities staffed by an unlicensed podiatrist;

(3) be present during the performance of surgical treatment by the unlicensed podiatrist; and

(4) supervise no more than two unlicensed podiatrists at any one time.

Subp. 8. [Repealed, 20 SR 168]

Subp. 8a. **Applicant lacking state clinical examination.** An applicant for licensure who has met the licensure requirements in Minnesota Statutes, section 153.16, except passing the state clinical examination may be granted a temporary permit for one year to practice according to the requirements in part 6900.0160, subpart 3, and may be scheduled for the personal appearance at any time during the year.

Subp. 9. **Personal appearance.** The applicant shall be scheduled for a personal appearance before one or more members of the board or the executive director when the other requirements for licensure have been met. Applicants must be prepared to answer questions regarding ethics of practice.

Subp. 10. **License in other states.** If an applicant is licensed in one or more states other than Minnesota, the applicant must cause a form supplied by the board to be submitted from the board of podiatric medicine in the state of original licensure and each state in which a license was held during the five years immediately preceding application.

Statutory Authority: *MS s 153.02; 153.16; 214.06; 214.12*

History: *13 SR 1237; 15 SR 2629; 20 SR 168*

6900.0030 [Repealed, 15 SR 2629]

6900.0160 TEMPORARY PERMIT.

Subpart 1. **Prerequisites.** An applicant for a temporary permit to practice podiatric medicine must submit a complete, acceptable application for a Minnesota temporary permit accompanied by the required fee. The clinical examination and personal interview may be completed during the permit period.

The applicant must submit a transcript as provided in part 6900.0020, subpart 2, and written evidence that the applicant has been accepted as a resident, preceptee, or graduate trainee in an acceptable graduate training program.

Subp. 2. **Term of permit.** A granted permit is valid for the period of graduate training of 12 months beginning with the first day of graduate training. A permit may be reissued for one of the following reasons:

A. the applicant submits acceptable evidence that the training was interrupted by circumstances beyond the control of the applicant and that the sponsor of the program agrees to the extension; or

B. the applicant is continuing in a residency that extends for more than one year.

Subp. 2a. Revocation. The permit may be revoked if an applicant has engaged in conduct that constitutes grounds for denial of licensure or disciplinary action, discontinues training, or moves out of Minnesota.

Subp. 3. Scope of practice. The scope of practice of the permit holder is limited to the performance of podiatric medicine within the structure of the acceptable graduate training program within which the permit holder is enrolled.

Statutory Authority: *MS s 153.02; 153.16; 214.06; 214.12*

History: *13 SR 1237; 15 SR 2629; 20 SR 168*

6900.0200 LICENSE RENEWAL.

Subpart 1. License renewal term. The license renewal term is 24 months beginning on July 1 and ending on June 30. The term of renewal begins on July 1 in odd-numbered years for a licensee whose license number is an odd number and in even-numbered years for a licensee whose license number is an even number.

Subp. 1a. First license renewal following licensure. For the first renewal period following the initial licensure period, the fee and continuing education requirements for renewal of the license are that fraction of the license renewal fee and continuing education hours, to the nearest dollar and hour, respectively, that is represented by the ratio of the number of days the license is held in the initial licensure period to 730 days.

Subp. 1b. Submission of license renewal application. A licensee must submit to the board a license renewal application on a form provided by the board, together with the license renewal fee, postmarked no later than June 30 in the year of renewal. The application form must be signed by the licensee in the place provided for the renewal applicant's signature and include evidence of participation in approved continuing education programs, as described in part 6900.0300, and any other information as the board may reasonably require.

Subp. 1c. Renewal application postmarked after June 30. A renewal application postmarked after June 30 in the renewal year shall be returned to the licensee for addition of the late renewal fee. A license renewal application postmarked after June 30 in the renewal year is not complete until the late renewal fee has been received by the board.

Subp. 2. Failure to submit renewal application. The procedures in subparts 3 to 6 will be followed by the board for licensees who have failed to submit the renewal application as provided in subparts 1b and 1c.

Subp. 3. Notice. Any time after July 1 of the applicable year, the board will send to the last address on file with the board, a notice to a licensee who has not completed and submitted a license renewal application. The notice will state that the licensee has failed to make application for renewal; the amount of renewal and late fees and information about continuing education that must be submitted in order for the license to be renewed; that the licensee may voluntarily terminate the license by notifying the board; and that failure to respond to the notice by the date specified, which date must be at least 30 days after the notice is sent by the board, either by applying for license renewal as provided in subpart 1b or by notifying the board that the licensee has voluntarily terminated the license, will result in expiration of the license and terminating the right to practice.

Subp. 4. Result. If the application for renewal as provided in subpart 1 or notice of voluntary termination is not received by the board by the date specified in the notice, the license will expire and the licensee's right to practice terminates on the date specified in the notice. The expiration and termination will not be considered a disciplinary action against the licensee.

Subp. 5. Reinstatement. A license that has expired under this part may be reinstated under part 6900.0210.

Subp. 6. Disciplinary action. The board, in lieu of the procedure in subpart 3, may initiate disciplinary action against any licensee for failure to submit fees or provide documentation of completion of continuing education requirements, and may add such failure to other

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grounds specified in Minnesota Statutes, sections 153.01 to 153.25 in any contested case proceeding initiated by the board against the licensee on the other grounds.

Subp. 7. Name and address change. A podiatrist who has changed names must notify the board in writing as soon as possible and request a revised renewal certificate. The board may require substantiation of the name change by requiring official documentation.

A podiatrist must maintain with the board a correct mailing address to receive board communications and notices. A podiatrist who has changed addresses must notify the board in writing as soon as possible. Placing a notice in first class United States mail, postage pre-paid and addressed to the licensee at the licensee's last known address, constitutes valid service.

Statutory Authority: *MS s 16A.128; 153.02; 153.16; 214.06; 214.12*

History: *11 SR 1408; 13 SR 1237; 15 SR 2629; 18 SR 2483; 20 SR 168*

6900.0210 REINSTATEMENT OF LICENSE.

Subpart 1. Requirements. Upon a podiatrist's compliance with the requirements in this part, the podiatrist's license must be reinstated. The podiatrist requesting reinstatement of a license shall submit the following materials:

- A. an application form and relicensure fee;
- B. verification of licensure status from each state in which the podiatrist has held an active license during the five years preceding application;
- C. for each year the license has been inactive, evidence of participation in one-half the number of hours of acceptable continuing education required for biennial renewal, under part 6900.0300, up to five years;
- D. if the license has been inactive for more than five years, the amount of acceptable continuing education required in item C, must be obtained during the five years immediately before application; or
- E. other evidence as the board may reasonably require.

Subp. 2. Revoked or suspended license. No license that has been suspended or revoked by the board will be reinstated unless the former licensee provides evidence of full rehabilitation from the cause for which the license was suspended or revoked and complies with the other reasonable conditions imposed by the board for the purpose of establishing the extent of rehabilitation. In addition, if the disciplinary action was based in part on failure to meet continuing education requirements, the license will not be reinstated until the former licensee has successfully completed the requirements. The board may require the licensee to pay the costs of the proceedings resulting in the suspension or revocation of a license under its disciplinary authority and the reinstatement or issuance of a new license. A licensee who has been disciplined by the board in a manner other than by suspension or revocation may be required by the board to pay the costs of the proceedings resulting in the disciplinary action.

Subp. 3. Licensure application not precluded. Nothing in this part prohibits a podiatrist from applying for licensure under Minnesota Statutes, section 153.16.

Statutory Authority: *MS s 153.02; 153.16; 214.06; 214.12*

History: *13 SR 1237; 15 SR 2629; 20 SR 168*

6900.0250 FEES.

Subpart 1. Amounts. Fees are as follows:

- A. licensure, \$500;
- B. renewal of a license, \$500;
- C. late renewal of a license, an additional \$100;
- D. temporary permit, \$250;
- E. replacement of an original license document or renewal certificate, \$10; and
- F. relicensure following expiration of license, \$550.

Subp. 2. Requirements. Fees must be paid in United States money and are not refundable.

Subp. 3. Special fee. A one-time fee of \$15 is assessed against the license of each person holding a license to practice on June 7, 1994, to be paid on or before June 30, 1994. Fail-

ure to pay the fee by the licensee's renewal date is failure to submit a completed license renewal application as provided in part 6900.0200.

Statutory Authority: *MS s 153.02; 153.16; 214.06; 214.12*

History: *11 SR 1408; 13 SR 1237; 13 SR 2687; 15 SR 2629; 18 SR 2483*

6900.0300 CONTINUING EDUCATION.

Subpart 1. Requirement. Except as provided in subpart 1a, every podiatrist licensed to practice in Minnesota shall obtain 30 clock hours of continuing education in each two-year cycle of license renewal, at least two hours of which must be in the subject of infection control, including blood borne diseases.

Subp. 1a. Prorating continuing education hours. The number of continuing education hours required during the initial licensure period is that fraction of 30 hours, to the nearest whole hour, that is represented by the ratio of the number of days the license is held in the initial licensure period to 730 days. Continuing education in infection control, including blood borne diseases, is required for renewal periods beginning on or after September 1, 1993. For initial licensure periods of less than two years, one continuing education hour in infection control is required.

Subp. 2. Obtaining continuing education hours. Continuing education hours shall be obtained in the following manner:

A. attendance at educational programs approved by the board under subpart 3 or completion of verifiable home study programs under subpart 3b;

B. attendance at hospital staff meetings (no more than three hours of hospital staff meetings may be used for license renewal each year); or

C. participation in acceptable graduate training.

Subp. 3. Requirements of program approval. Each continuing education program used to meet the license renewal requirements must be approved by the board before the program is accepted, based on the following criteria:

A. The content must be directly related to the practice of podiatric medicine as defined in Minnesota Statutes, section 153.01, subdivision 2. Subjects such as practice management or those not of a scientific nature are not acceptable.

B. The speaker must be a licensed podiatrist, other credentialed health care professional, or person especially qualified to address the subject.

C. The sponsor must provide the attendee a written statement of attendance that includes the name and dates of the program, the name and address of the sponsor, the number of continuing education clock hours granted by the sponsor and approved by the board if prior approval has been sought, the name of the attendee and a signature of the sponsor or designee, or upon completion of the program, the sponsor must send the board a list of attendees.

Subp. 3a. Procedure for program approval. Either the sponsor of a continuing education program or a licensee may submit the program for approval by the board.

The following information about the program is required:

A. name and address of the program sponsor;

B. dates and times of the program;

C. subject or content matter of each item on the program together with the amount of time devoted to the subject;

D. name of and identifying information about the speakers or instructors; and

E. assurance that a written statement of attendance will be given to the podiatrist or that a list of attendees will be sent to the board.

The board shall approve each continuing education program for a specific number of clock hours of continuing education. One clock hour is 60 minutes. Partial hours will not be granted. Lunch breaks, rest periods, greetings, and other noneducational time will not be included.

Subp. 3b. Home study programs. The criteria listed in subpart 3 for program approval shall apply to home study programs to the extent the criteria are relevant to home study pro-

grams. In addition, the sponsor of the home study program must verify that the licensee has completed the program by means of an independently scored quiz related to the subject matter of the program or other procedure that is approved by the board.

Subp. 4. **Proof of attendance.** Proof of attendance at continuing education programs meeting the requirement of this part shall be submitted to the board within the renewal period in which it was attended in the form of a certificate, descriptive receipt, or affidavit.

Subp. 5. [Repealed, 15 SR 2629]

Statutory Authority: *MS s 153.02; 153.16; 214.06; 214.12*

History: *13 SR 1237; 15 SR 2629; 18 SR 620; 20 SR 168*

6900.0400 DISCIPLINE.

Insurers required to submit reports to the board under Minnesota Statutes, section 153.24, subdivision 4, shall send the reports to the board by the first day of the months of February, May, August, and November of each year.

Grounds for disciplinary action include failure to supervise a resident, preceptee, other graduate trainee, or undergraduate student.

Statutory Authority: *MS s 153.02*

History: *13 SR 1237*

6900.0500 WAIVERS AND VARIANCES.

Subpart 1. **Application.** A licensee or applicant for licensure may petition the board for a time-limited waiver or variance of any rule except for any part of a rule which incorporates a statutory requirement. The waiver or variance shall be granted if:

A. adherence to the rule would impose an undue burden on the petitioner;

B. the granting of a waiver or variance will not adversely affect the public welfare;

and

C. in the case of a variance, the rationale for the rule in question can be met by alternative practices or measures specified by the petitioner.

Subp. 2. **Renewal, reporting, and revocation.** A waiver or variance shall be renewed upon reapplication according to the procedure described in subpart 1 if the circumstances justifying its granting continue to exist. Any petitioner who is granted a waiver or variance shall immediately notify the board in writing of any material change in the circumstances which justify its granting. A waiver or variance shall be revoked if a material change in the circumstances which justify its granting occurs or, in the case of a variance, if the petitioner has not complied with the alternative practices or measures specified in the petition.

Subp. 3. **Burden of proof.** The burden of proof is upon the petitioner to demonstrate to the board that the requirements in subpart 1 have been met.

Subp. 4. **Statement of reasons.** The minutes of any meeting at which a waiver or variance is granted, denied, renewed, or revoked shall include the reason for the action.

Statutory Authority: *MS s 153.02; 153.16; 214.06; 214.12*

History: *15 SR 2629*