



BUREAU OF NATUROPATHIC MEDICINE
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NATUROPATHIC FORMULARY ADVISORY COMMITTEE

Meeting Minutes July 31, 2005

Meeting Site:
 The Khalsa Medical Clinic
 436 North Bedford Drive, Suite 308
 Beverly Hills, CA 90210

Teleconference Site 1:
 Dr. Traub, ND
 73-1138 Oluolu Street
 Kailua Kona, HI 96740

Teleconference Site 2:
 Dr. Mittman, ND
 2140 E. Broadway Road
 President's Office
 Tempe, AZ 85282

Public Location Site:
 400 R Street
 1st Floor Hearing Room
 Suite 1030
 Sacramento, CA 95814

COMMITTEE MEMBERS PRESENT: Peter Wannigman, Naturopathic Doctor (Chairman)
 Soram Khalsa, Medical Doctor (Vice-Chairman)
 Trevor Holly Cates, Naturopathic Doctor
 Michael Traub, Naturopathic Doctor
 Paul Mittman, Naturopathic Doctor

COMMITTEE MEMBERS ABSENT: Cynthia Watson, Medical Doctor
 Mary Hardy, Medical Doctor

STAFF PRESENT: Kathy McKeever, Bureau Chief
 Joanne Davis, Assistant to the Bureau Chief

I. Call to Order and Roll Call

Chairman Wannigman called the meeting to order at 3:05 p.m. (pacific daylight time). Roll call was taken and a quorum was declared.

II. Approval of the June 26, 2005 Committee Minutes

The Bureau indicated that the minutes were not completed in time for this meeting. It was moved and seconded (Traub/Mittman) to postpone the review and approval of the June 26, 2005 minutes to the next Committee meeting. Roll was called and the move was carried unanimously.

III. Discussion on the Medical Malpractice Under Physician Supervision

The Committee discussed the financial liabilities of the medical doctor who are supervising naturopathic doctors.

Committee members asked the Bureau Chief to continue to inquire with The Doctors Company and SCPIE (Southern California Physicians Insurance Exchange) and NorCal regarding the financial impact on MDs supervising naturopathic doctors or nurse practitioners.

Bureau Chief will continue to inquire and update the Committee members at the next Committee meeting.

IV. Discussion on the IV Therapeutics

Chairman Wannigman indicated that CNDA is working with CMA and the Pharmacy Board to address some of the gray areas in the Act through a clean-up bill. The clean-up bill will not expand the naturopathic doctors scope of practice, but will acknowledge naturopathic doctors within the pharmacy codes as they relate to the Naturopathic Doctors Act.

Committee members discussed National Academy of Naturopathic Therapy Injection (NANTI), mesotherapy, lidocaine, and procaine. Members tabled further discussion to the next Committee meeting.

V. Discussion on Routes of Administration

Chairman Wannigman read and the committee discussed Section 3640 (d)-(e) of the Business and Professions Code and Section 4234 (d)-(e) of the regulations. Regarding the routes of administration, Chairman Wannigman would like the Committee to provide recommendations to set some precedent greater than what the rules and regulations say about scope of practice and competency and to define the avenues of competency. The Committee agreed to identify within its recommendations postgraduate IV therapy courses for naturopathic doctor to complete. Committee members discussed the types of training and the number of hours the naturopathic doctor should take before utilizing routes of administration.

Dr. Traub, ND, will obtain and forward to Committee members the course outline and syllabus of Virginia Osborne's training class, which has Part 1 and Part 2. Chairman Wannigman will contact Ms. Osborne to obtain her specific proposal she provided to Arizona. Members tabled further discussion to the next Committee meeting.

Members discussed chelation in regards to heavy metal toxicity and poisoning. Members discussed that the appropriate use for chelation of an naturopathic doctor

would be for heavy metal toxicity for experimental treatment, as long as there is adequate informed patient consent, and not for poisoning. Member agreed to include language for chelation with experimental protocols as part of IV therapy recommendations.

Members discussed EDTA in oral and injection form and were indecisive if the injection form must be under the supervision on a physician. Chairman Wannigman will contact Larry Woodhouse, McGuff Company, to help research and bring back to the Committee information on chemicals vs. dietary supplements

Members discussed botanical medicine in an injectable form. Members need more information in this area. Dr. Khalsa requested the Committee to review a list of herbs that are sold for intravenous infusions as well as the safety and method of use for them in order to recommend an inclusion list. Dr. Traub, ND, suggested the Bureau to incorporate by regulations of permissible injectables and required training needed.

Members discussed local anesthetics for parenteral use by a naturopathic doctor. The Bureau Chief indicated this would also be a discussion for the Minor Office Surgery Taskforce. After some discussion, it was tabled for further discussion to the next the Committee meeting to obtain the input from the two other medical doctor members.

Members discussed ocular route of administration and whether or not the regulations were sufficient. Section 4234 reads: “(d) A licensee may utilize all of the routes of administration specified in subdivision (d) of the Section 3640 of the Code except for the ocular and intravenous routes of administration. A licensee may only utilize the ocular and intravenous routes of administration if he or she is clinically competent in those areas. (e) For the purposes of this section, “clinically competent” means that one possesses and exercises the degree of learning, skill, care and experience ordinarily possessed and exercises by a member of the appropriate discipline in clinical practice.”

Members indicated the language in the regulations were sufficient.

VI. Discussion on Formulary

a. Inclusion vs Exclusion of Items to Formulary

Chairman Wannigman discussed the inclusion vs. exclusion lists from the perspective of a pharmacist. An exclusionary list would not prohibit the naturopathic doctor from prescribing a new drug once its available. An inclusionary list will specifically identify those drugs the naturopathic doctor could prescribe and would have to be updated, likely through the regulatory process, to add any new drug. Members discussed the impact on pharmacy when dealing with inclusion and exclusion formulary lists. Further research is needed.

b. Other States Formulary

Members discussed the formulary rules of the following states: Oregon, Washington, Montana, Utah, and Arizona.

c. Dangerous Drugs Exclusions

Prior to the start of the meeting, Chairman Wannigman emailed members a list dangerous drugs to review as exclusionary drugs as identified by the Drug Facts and Comparisons. For the record and made part of these minutes, the list is attached. Chairman Wannigman indicated that antiarrhythmics drugs should also be added to exclusionary list. Dr. Traub, ND, recommended to omit topical hemostatics and systemic anti-infectives and keep heparin antagonist on the list with the exception of heparin anticoagulants.

Member discussed whether or not to include narcotics (scheduled controlled substances) on the exclusionary list. This was tabled for further discussion.

Dr. Khalsa volunteered to contact the California Medical Association to obtain their input on the items the Formulary Committee is discussing for recommendations to the legislature.

d. Pharmacology Certification

Chairman Wannigman indicated this Committee should have a complete understanding of the curriculum of the schools, postgraduate training, reliable data, including malpractice data on naturopathic doctors prescribing authority.

The members have received curriculum from Southwest College of Naturopathic Medicine, a letter from major a malpractice company stating there are not any known claims against a naturopathic doctor prescribing authority. Dr. Cates, ND, has school curriculum for Bridgeport, Bastyr, and National Collage. Dr. Cates, ND, will obtain curriculum, including course notes and examinations, from the remaining two naturopathic schools.

Dr. Mittman, ND, will obtain and disburse to the Committee the pharmacology blueprint from NPLEX.

VII. Public Comment

Members inquired about the status of the two vacant pharmacist positions. The Bureau Chief indicated the positions are still vacant and asked the members to forward any names they may have to the Bureau. Dr. Mittman, ND, has a list of pharmacists that he will email to the Bureau.

Members discussed future meetings. Next meetings will be scheduled for August 28, 2005 beginning at 10:00 a.m. and September 25, 2005 at 3:00 p.m.

John Kalman, naturopathic doctor, introduced himself and briefly spoke to the Committee.

VIII. Adjournment

The meeting was adjourned at 5:40 p.m.

Attachment

July 31, 2005 Meeting Minutes Attachment

A licensed Naturopathic Doctor shall be granted prescribing of legend drugs (Rx only) provided the physician is prescribing within his/her scope of specialty practice. The following is a list of legend drugs, which are exclusions to prescribing rights.

Exclusions*:

1. Blood modifiers
 - Anticoagulants
 - Heparin antagonists
 - Tissue Plasminogen Activators
 - Thrombolytic enzymes
 - Hemorheologic agents
 - Antithrombin
 - Antihemophilic products
 - Hemostatics, systemic
 - Hemostatics, topical
 - Plasma Protein fractions
 - Dextran adjunct
 - Plasma expanders
 - Hemin
 - Sodium phenylbutyrate
2. Hormone abortifacients
3. CNS Drugs
 - Antipsychotic agents
4. General Anesthetics
 - Barbiturates
 - Gases
 - Volatile Liquids
5. Muscle Relaxants- Adjuncts to Anesthesia
 - Nondepolarizing Neuromuscular Blockers
 - Curare preparations
 - Depolarizing Neuromuscular Blockers
6. Systemic Anti-Infectives
 - Parenteral administration
7. Antineoplastics (provides for use of Hormones)
 - Alkylating agents
 - Antimetabolites

- Mitotic inhibitors
- Radiopharmaceuticals
- Miscellaneous Antineoplasticsa
- Antineoplastic adjuncts
- NCI Investigational Agents

* As identified by the Drug Facts and Comparisons ®

These exclusions are superceded by following exclusion:

- Controlled substances listed as DEA schedule I or II
 - (with the exception of oral administrative forms of Morphine Sulfate for use in terminal pain management).